Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED OMB No. 1004-0135 Expires: January 31, 2004

	Expi	165.	January	
Lease	Serial	No		

5.

SUNDRY NOTICES AND REPORTS ON WELLS	
Do not use this form for proposals to drill or to re-enter a	3 <i>1</i>
abandoned well. Use Form 3160-3 (APD) for such proposals	

NM-14758
6. If Indian, Allottee or Tribe Name

					1			
	NPLICATE - Other Instru	ictions on re	rerse sid	'e	7. If Unit o	r CA/Agreement	, Name and/	or No.
1. Type of Well	1 out-				9 Wall No	ma and No		
✓ Oil Well ☐ Gas Well ☐ Other 2. Name of Operator				8. Well Name and No. Long Draw 9 BO Federal Com #1H				
2. Name of Operator Mewbourne Oil Company 147	144				9. API We		Com #1r1	
Ba. Address	3b. Phone No. (Phone No. (include area code)			1 30 015 - 38309			
		, , , , , , , , , , , , , , , , , , ,			10. Field and Pool, or Exploratory Area			
PO Box 5270 Hobbs, NM 88 4. Location of Well (Footage, Sec.,		575-393-5905			Cemetery	Yeso		
Doubles of won (1 bounge, bee.)	1, 1, 1.2., 0. 5 10, 2000. 4, 110.9				11. County	or Parish, State		
(SL) 330' FSL & 2270' FEL, S (BHL) 330' FSL & 2270' FEL,					Eddy Cou	nty, NM		
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE N	ATURE C	OF NOTICE, R	EPORT, OI	R OTHER DA	ATA	
TYPE OF SUBMISSION			TYPE C	F ACTION				
	Acidize	☐ Deepen		Production (Start	/Resume)	☐ Water Shu	nt-Off	
☑ Notice of Intent	Alter Casing	Fracture Trea		Reclamation		Well Integ		
	Casing Repair	New Construc	=	Recomplete		Other	,,	
Subsequent Report	☐ Change Plans	Plug and Aba		Temporarily Aba	andon			
Final Abandonment Notice	Convert to Injection	Plug Back		Water Disposal				
Mewbourne Oil Company has a Due to availability, MOC will u available equipment. The chang discussed at the on-site meeting layout. If you have any questions please	se a larger rig for this well. The ge will extend the south side 30. These extensions will be recl	ne pad dimensions by, the west side 2 aimed and the fir	5', the north	side 20' and the	eaast side 45	roved APD. S	to the dimer ee attached EIVE 1 4 2010	rig
14. 1 hereby certify that the foregoin Name (PrintedlTyped)	g is true and correct							
Jackie Lathan		Ti	ile Hobbs l	Regulatory				
Signature	in Lath		ate 12/01/10					
	THIS SPACE F	OR FEDERAL	OR STATE	OFFICE USE				
Approved by (Signature)	/s/ Don Peterson		Name (Printed/T	yped)		Title		
Conditions of approval, if any, are certify that the applicant holds legularity which would entitle the applicant to	attached. Approval of this notice	e does not warrant s in the subject le	or CAR	RLSBAD F	IELD 0	FFICE Date	DEC 1	0 201
T.F.	•		t					

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

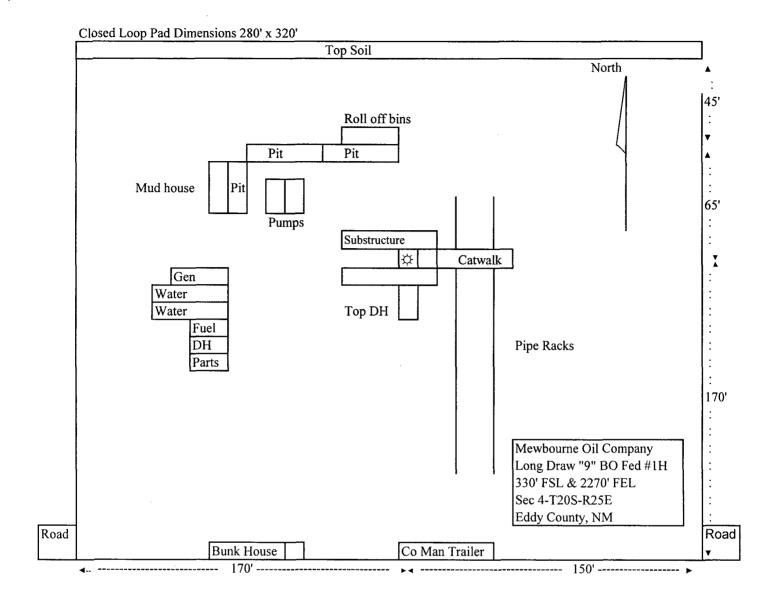


Exhibit 5