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UNITED STATES DEPARTMENT OF THE INTERIOR OCD-HOBBS BUREAU OF LAND MANAGEMENT

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

i,	Lease	Serial	No.

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SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.							NM-98189 6. If Indian, Allottee or Tribe Name				
	Villa V	7486 - 1 086 65 - 132567 9 1	(1) b)	[0]]] (0]]] (1)			7. If Unit o	r CA	/Agreement, Name and/or No.		
1. Type of Well ☐ Gas Well ☐	Othe	et.					8. Well Na	me :	and No.		
2. Name of Operator	- Other				,		Geronimo 30 Federal #4				
Mewbourne Oil Company 14	744						9. API We	11 N	20-025-38/82		
3a. Address			3b. Phone No. (include area code)			No number assigned					
PO Box 5270 Hobbs, NM 88	240		505-393-5905			10. Field and Pool, or Exploratory Area					
4. Location of Well (Footage, Sec.,	T, R.,	M., or Survey Description)					Lusk Bor 11. County		oring 41450 arish, State		
2440' FSL & 330' FWL Unit l							Lea Coun				
12. CHECK AP	PROF	RIATE BOX(ES) TO	IN	DICATE NAT	URE O	F NOTICE, F	REPORT, O	R O	THER DATA		
TYPE OF SUBMISSION				•	ТҮРЕ О	F ACTION					
		Acidize [Deepen		Production (Sta	rt/Resume)		Water Shut-Off		
✓ Notice of Intent		Alter Casing		Fracture Treat		Reclamation			Well Integrity		
Subsequent Report		Casing Repair		New Construction	=	Recomplete			Other Use rig pump to test		
	\square	Change Plans	╛	Plug and Abandor	n 📙	Temporarily A	andon				
Final Abandonment Notice		Convert to Injection	Ш	Plug Back		Water Disposal					
Mewbourne Oil Company recei 13 3/8" casing string. This strir from 9400' to 8600' in the Bone BOPE and pressure test BOP ar If you have any problems, pleas	ig will e Sprii nd 8 5/	be replaced with 8 5/8" 3 g and set 4 1/2" or 5 1/2" 8" 32# J55 surface casin Robin Terrell (505) 390-	32# " ca ig to 481	2 J55 and set at 10 asing (to be deter to 1500# with rig place). 2 13 14 75 76	000' (50' rmined a	' into the Rustle fter logs). After	r). MOC woler further revi	ew, er L	also like to change the TD MOC will function test		
14. 1 hereby certify that the foregoing Name (PrintedlTyped)	g is tru	e and correct	<u>ና></u>	87.1797.31.88	/	-					
Kristi Green			<u>-د</u>	Title 1	Hobbs R	egulatory					
Signature Fruiti	gre	ien .		Date (01/22/07	,					
		THE SPACE FO	ĴŔ,		er katerioa and	2200		Marin Control			
Approved by (Signature)				I	Name (Printed/Typed)			Title			
Conditions of approval, if any, are certify that the applicant holds lega which would entitle the applicant to c	doe	'S HOL WALLAM OF L	Office				Date				
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudule:	le 43 U	J.S.C. Section 1212, make it ments or representations as	t a c	rime for any person	n knowin s jurisdict	ngly and willfully	to make to any	dep	artment or agency of the United		