UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB NO. 1004-0135

OCD Artesia

BUREAU OF LAND MANAGEMENT						Expires: July 31, 2010			
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.					Lease Scrial No. NMNM117115 If Indian, Allottee or Tribe Name				
									SUBMIT IN TRIPLICATE - Other instructions on reverse side.
1. Type of Well ☐ Oil Well ☑ Gas Well ☐ Other					8. Well Name and No. ICEMAN 26 W2AP FED COM 1H				
Name of Operator Contact: JACKIE LATHAN MEWBOURNE OIL COMPANY E-Mail: jlathan@mewbourne.com					9. API Well No. 30-015-43862				
3a. Address	3b. Phone No. (include area code)		e)	10. Field and Pool, or Exploratory					
PO BOX 5270 HOBBS, NM 88241	Ph: 575-393-5905			FOREHAND RANCH WOLFCAMP					
4. Location of Well (Footage, Sec., T.)			11. County or Parish, and State					
Sec 26 T23S R27E Mer NMP				EDDY COUNTY, NM					
12. CHECK APPR	ROPRIATE BOX(ES) TO	O INDICATE	NATURE OF	NOTICE, RE	PORT, OR OT	HER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION								
Notice of Intent	☐ Acidize ☐ Dee		en	☐ Producti	☐ Production (Start/Resume)) 🗖 Water Shut-Off		
_	☐ Alter Casing	☐ Fracture Treat		☐ Reclamation		■ Well Integrity			
☐ Subsequent Report	□ Casing Repair	□ New	Construction	□ Recomp	□ Recomplete				
☐ Final Abandonment Notice	Change Plans	☐ Plug	and Abandon	□ Temporarily Abandon		Change 1	to Original A		
	☐ Convert to Injection	Plug Back		■ Water D	isposal				
testing has been completed. Final Ab determined that the site is ready for final Mewbourne Oil Co. requests a MOC would like to change the is due to Xcel Energy having a damages will stay as approved 75'. Please call Bradley Bisho	nal inspection.) Approval to make the follo Surface location to 205' I An existing easement on to I in the original APD. Th	owing changes	to the approve	ed APD: R27E. This	NM C	DIL CONSE ARTESIA DIST DEC 1 2 2	RVATION		
•	, , , ,				t _a	RECEIVE	E D		
OK P. B.	Electronic Submission #	354007 verifie		ell Information	BLM-HM System	9020.2	<u> </u>		
Name (Printed/Typed) JACKIE LATHAN			Title AUTHORIZED REPRESENTATIVE						
Signature (Electronic S		\D CED==	Date 10/07/2						
	THIS SPACE FO	OK FEDERA					- , , , , , , , , , , , , , , , , , , ,		
Approved By Approved By			Title HU		ANAGER		11/29/16		
Conditions of approval, if any, are attached. Approval of this notice does not warr certify that the applicant holds legal or equitable title to those rights in the subject which would entitle the applicant to conduct operations thereon.			CARLSBAD FIELD OFFICE Office						
Title 18 U.S.C. Section 1001 and Title 43 U States any false, fictitious or fraudulent s	J.S.C. Section 1212, make it a tatements or representations as	crime for any porto any matter.	son knowingh	•	- new surve	ey.	iited		

** OPERATOR-SUBMITTED ** OPERAT

Well location requires new survey.
Submit C102 to OCD to accommodate location change.