

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 S. First St., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources

Form C-104  
Revised August 1, 2011

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address Mewbourne Oil Company PO Box 5270 Hobbs, NM 88241		<sup>2</sup> OGRID Number 14744
		<sup>3</sup> Reason for Filing Code/ Effective Date New Well 08/08/17
<sup>4</sup> API Number 30 - 015 - 44140	<sup>5</sup> Pool Name Purple Sage; Wolfcamp (Gas)	<sup>6</sup> Pool Code 98220
<sup>7</sup> Property Code 317663	<sup>8</sup> Property Name Motley 6/7 W2DE Fed Com	<sup>9</sup> Well Number 1H

II. <sup>10</sup> Surface Location

Ul or lot no. D	Section 6	Township 24S	Range 28E	Lot Idn	Feet from the 220	North/South Line North	Feet from the 415	East/West line West	County Eddy
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<sup>11</sup> Bottom Hole Location

UL or lot no. E	Section 7	Township 24S	Range 28E	Lot Idn	Feet from the 2304	North/South line North	Feet from the 394	East/West line West	County Eddy
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code Flowing	<sup>14</sup> Gas Connection Date 08/08/17	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
278421	Holly Refinery & Marketing PO Box 159 Artesia, NM 88210	O
282301	Crestwood New Mexico Pipeline 801 Cherry Street Suite 3800 Fort Worth, TX 76102	G

NM OIL CONSERVATION  
ARTESIA DISTRICT  
AUG 25 2017  
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IV. Well Completion Data

<sup>21</sup> Spud Date 05/08/17	<sup>22</sup> Ready Date 08/08/17	<sup>23</sup> TD 17530' MD	<sup>24</sup> PBDT 17470'	<sup>25</sup> Perforations 10467' - 17490'	<sup>26</sup> DHC, MC NA
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2"	13 3/8"	503'	546	✓	
12 1/4"	9 5/8"	2305'	550	✓	
8 3/4"	7"	10460'	1145	✓	
6 1/8"	4 1/2"	9579' - 17490'	350		

V. Well Test Data

<sup>31</sup> Date New Oil 08/11/2017	<sup>32</sup> Gas Delivery Date 08/08/2017	<sup>33</sup> Test Date 08/12/2017	<sup>34</sup> Test Length 24 hrs	<sup>35</sup> Tbg. Pressure NA	<sup>36</sup> Csg. Pressure 3750
<sup>37</sup> Choke Size 26/64	<sup>38</sup> Oil 225	<sup>39</sup> Water 284	<sup>40</sup> Gas 4524		<sup>41</sup> Test Method Production

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:  
Jackie Lathan

Title:  
Regulatory

E-mail Address:  
jlathan@mewbourne.com

Date:  
08/22/17

Phone:  
575-393-5905

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

8-28-2017

Pending BLM approvals will  
subsequently be reviewed  
and scanned

# NM OIL CONSERVATION ARTESIA DISTRICT

AUG 25 2017

Form 3160-4  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

## WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.  
NMNM90521

1a. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other				6. If Indian, Allottee or Tribe Name	
b. Type of Completion <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr. Other _____				7. Unit or CA Agreement Name and No.	
2. Name of Operator MEWBOURNE OIL COMPANY				8. Lease Name and Well No. MOTLEY 6/7 W2DE FED COM 1H	
Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com					
3. Address PO BOX 5270 HOBBS, NM 88241			3a. Phone No. (include area code) Ph: 575-393-5905		9. API Well No. 30-015-44140
4. Location of Well (Report location clearly and in accordance with Federal requirements)* Sec 6 T24S R28E Mer At surface NWNW 220FNL 415FWL Sec 6 T24S R28E Mer NMP At top prod interval reported below NWNW 566FNL 355FWL Sec 7 T24S R28E Mer NMP At total depth SWNW 2304FNL 394FWL				10. Field and Pool, or Exploratory PURPLE SAGE;WOLFCAMP GAS	
				11. Sec., T., R., M., or Block and Survey or Area Sec 6 T24S R28E Mer	
				12. County or Parish EDDY	
				13. State NM	
14. Date Spudded 05/08/2017		15. Date T.D. Reached 06/01/2017		16. Date Completed <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod. 08/08/2017	
17. Elevations (DF, KB, RT, GL)* 3109 GL					
18. Total Depth: MD 17530 TVD 10219		19. Plug Back T.D.: MD 17470 TVD 10225		20. Depth Bridge Plug Set: MD TVD	
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) CBL, CCL, GR & CNL				22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit analysis)	

### 23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17.500	13.375 J55	54.5	0	503		546	130	0	
12.250	9.625 N80	40.0	0	2305		550	201	0	
8.750	7.000 P110	29.0	0	10460		1145	362	0	
6.125	4.500 P110	13.5	9579	17490		350	198	0	

### 24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

### 25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) WOLFCAMP	9248	17530	10467 TO 17490	0.380	1548	OPEN
B)						
C)						
D)						

### 26. Perforation Record

### 27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
10467 TO 17490	17,678,514 GALS SLICKWATER CARRYING 10,547,880# 100 MESH SAND & 6,002,600# 40/70 WHITE SAND

### 28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
08/08/2017	08/12/2017	24	→	225.0	4524.0	284.0	54.4	0.77	FLows FROM WELL
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
26/64	SI	3750.0	→	225	4524	284	20106	PGW	

### 28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

Pending BLM approvals will  
subsequently be reviewed  
and scanned

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #385598 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

DC 8-28-17



**28b. Production - Interval C**

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

**28c. Production - Interval D**

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
			→						

**29. Disposition of Gas(Sold, used for fuel, vented, etc.)  
SOLD**
**30. Summary of Porous Zones (Include Aquifers):**

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

**31. Formation (Log) Markers**

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
WOLFCAMP	9248	17530	OIL, WATER, GAS	CASTILE	825
				B/SALT	2197
				DELAWARE	2400
				BELL CANYON	2440
				MANZANITA MKR	3370
				BRUSHY CANYON	4424
				BONE SPRING	5914
				WOLFCAMP	9270

**32. Additional remarks (include plugging procedure):  
Logs will be sent by mail.**
**33. Circle enclosed attachments:**

- |   |                    |               |                       |
|---|--------------------|---------------|-----------------------|
| 1. Electrical/Mechanical Logs (1 full set req'd.)     | 2. Geologic Report | 3. DST Report | 4. Directional Survey |
| 5. Sundry Notice for plugging and cement verification | 6. Core Analysis   | 7 Other:      |                       |

**34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions):**

**Electronic Submission #385598 Verified by the BLM Well Information System.  
For MEWBOURNE OIL COMPANY, sent to the Carlsbad**

Name (please print) JACKIE LATHAN Title REGULATORY

Signature (Electronic Submission) Date 08/22/2017

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.

**\*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\***

**NM OIL CONSERVATION**  
**ARTESIA DISTRICT**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

AUG 25 2017

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.**

5. Lease Serial No. NMNM90521
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. MOTLEY 6/7 W2DE FED COM 1H
9. API Well No. 30-015-44140
10. Field and Pool or Exploratory Area PURPLE SAGE; WOLFCAMP GAS
11. County or Parish, State EDDY COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator MEWBOURNE OIL COMPANY	Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com
3a. Address PO BOX 5270 HOBBS, NM 88241	3b. Phone No. (include area code) Ph: 575-393-5905
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 6 T24S R28E Mer NMP NWNW 220FNL 415FWL	

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

07/22/17 Frac Wolfcamp from 10467' MD (10321' TVD) to 17490' MD (10221' TVD). 1548 holes, 0.38" EHD, 120 degree phasing. Frac in 44 stages w/17,678,331 gals slickwater, carrying 10,547,880# 100 Mesh sand & 6,002,600# 40/70 sand.

Flowback well for cleanup.

08/08/17 PWOL for production.

We are asking for an exemption from tubing at this time.

Bond on file: NM1693 nationwide & NMB000919

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #385578 verified by the BLM Well Information System For MEWBOURNE OIL COMPANY, sent to the Carlsbad</b>	
Name (Printed/Typed) JACKIE LATHAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 08/22/2017

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		
Office _____		

Pending BLM approvals will  
subsequently be reviewed  
and scanned

AC 8-28-17

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly to  
States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction  
(Instructions on page 2)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED**

**Additional data for EC transaction #385578 that would not fit on the form**

**32. Additional remarks, continued**

Bond on file: 22015694 nationwide & 022041703 Statewide



UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**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.*5. Lease Serial No.  
NMNM90521

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
MOTLEY 6/7 W2DE FED COM 1H9. API Well No.  
30-015-4414010. Field and Pool or Exploratory Area  
PURPLE SAGE WOLFCAMP GAS11. County or Parish, State  
EDDY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator  
MEWBORNE OIL COMPANYContact: JACKIE LATHAN  
E-Mail: jlathan@mewbourne.com3a. Address  
PO BOX 5270  
HOBBS, NM 882413b. Phone No. (include area code)  
Ph: 575-393-59054. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 6 T24S R28E Mer NMP NWNW 220FNL 415FWL**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Drilling Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

This is an amended sundry to one that was already sent in. We had the time for the test on the Liner Top incorrect. Should have been for 30 minutes.

06/01/2017 TD'ed 6 1/8" hole @ 17530' MD. Ran 4 1/2" 13.5# HCP110 BPN csg to 17490'. Top of liner @ 9579'. Cmt w/350 sks Lite Class C (60:40:0) w/additives. Mixed @ 11.2#/g w/3.18 yd. Released dart. Displaced w/221 bbls BW. Plug down @ 3:00 P.M 06/03/17. Set packer & sling out of liner. Displaced 77 csg w/240 bbls BW. Circ 133 sks of cmt off of liner top to the pits. Set liner hanger w/3600#. Pushed w/70k# to set liner hanger. Pumped 30 bbls Ultra Flush spacer. Tested tbg spool pack-off to 5000#. Tested liner top to 1500# for 30 minutes, held OK.

Rig released 06/04/17 @ 8:00 P.M.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

AUG 28 2017

RECEIVED

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #386375 verified by the BLM Well Information System  
For MEWBORNE OIL COMPANY, sent to the Carlsbad

Name (Printed/Typed) JACKIE LATHAN

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 08/28/2017

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____

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.

(Instructions on page 2)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***Pending BLM approvals will  
subsequently be reviewed  
and scanned











BC

8-28-17

**Additional data for EC transaction #386375 that would not fit on the form**

**32. Additional remarks, continued**

Bond on file: NM1693 nationwide & NMB000919

 <b>U.S. Department of the Interior</b>		<b>Well Information System</b>	<b>NM OIL CONSERVATION</b> ARTESIA DISTRICT <b>JACKIE LATHAN</b> AUG 28 2017 RECEIVED	 sp Help
Process Number: 3160-5 Process Name: Sundry Notices and Reports on Wells Process Instance Identifier: 00852-55780		Viewing		
 Close Process	 Print Process	 Process details	 Attachments	 Reset
 Fill	 Save	 To bottom		
<div style="display: flex; justify-content: space-between;"> <div>           Form 3160-5            (August 2007)         </div> <div style="text-align: center;">           UNITED STATES            DEPARTMENT OF THE INTERIOR            BUREAU OF LAND MANAGEMENT         </div> </div>				
<b>SUNDRY NOTICES AND REPORTS ON WELLS</b>				
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				
Bold* fields are required.				
<b>Section 1 - Completed by Operator</b>				
<b>1. BLM Office*</b> Carlsbad, NM		<b>2. Well Type*</b> GAS		
<b>3. Submission Type*</b> <input type="radio"/> Notice of Intent <input checked="" type="radio"/> Subsequent Report		<b>4. Action*</b> Drilling Operations		
<b>Operating Company Information</b>				
<b>5. Company Name*</b> MEWBOURNE OIL COMPANY				
<b>6. Address*</b> PO BOX 5270  HOBBS NM 88241		<b>7. Phone Number*</b> 575-393-5905		
<b>Administrative Contact Information</b>				
<b>8. Contact Name*</b> JACKIE _ LATHAN		<b>9. Title*</b> AUTHORIZED REPRESENTATIVE		
<b>10. Address*</b> PO BOX 5270  HOBBS NM 88421		<b>11. Phone Number*</b> 575-393-5905 _  <b>12. Mobile Number</b> _____		
<b>13. E-mail*</b> jlathan@mewbourne.com		<b>14. Fax Number</b> _____		

Pending BLM approvals will subsequently be reviewed and scanned



Technical Contact Information			
<input checked="" type="checkbox"/> Check here if Technical Contact is the same as Administrative Contact.			
15. Contact Name*		16. Title*	
17. Address*		18. Phone Number*	
		19. Mobile Number	
20. E-mail*		21. Fax Number	
Lease and Agreement			
22. Lease Serial Number*			
NMNM90521			
24. If Unit or CA/Agreement, Name and/or Number		25. Field and Pool, or Exploratory Area*	
		PURPLE SAGE WOLFCAMP GAS	
County and State for Well			
26. County or Parish, State*			
EDDY NM			
Associated Well Information			
27. Specify well using one of the following methods:			
a) Well Name, Well Number, API Number, Section, Township, Range, Qtr/Qtr, N/S Footage, E/W Footage			
b) Well Name, Well Number, API Number, Latitude, Longitude, Metes & Bounds description			
Well Name*		Well Number*	
MOTLEY 6/7 W2DE FED COM		1H	
API Number		30-015-44140	
Section		Township	
6		24S	
Range		Meridian	
28E		NEW MEXICO PRINCIPAL	
Qtr/Qtr		N/S Footage	
NWNW		220 FNL	
E/W Footage		415 FWL	
Latitude		Longitude	
		Metes and Bounds	
28. Describe Proposed or Completed Operation			
<p>Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all markers and zones. Attach the Bond under which the work will be performed or provide the Bond Number on file pertinent with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.</p> <p>06/01/2017 TD'ed 6 2" 8539;" hole @ 17530' MD. Ran 4 1/2" 13.5# HCP110 BPN csg to 17490'. Top of liner @ 9579'. Cmt w/350 sks Lite Class C (60:40:0) w/additives. Mixed @ 11.2#/g w/3.18 yd. Released dart. Displaced w/221 bbls BW. Plug down @ 3:00 P.M 06/03/17. Set packer &amp; sting out of liner. Displaced 7" csg w/240 bbls BW. Circ 133 sks of cmt off of liner top to the pits. Set liner hanger w/3600#. Pushed w/70k# to set liner hanger. Pumped 30 bbls Ultra Flush spacer. Tested tbg spool pack-off to 5000#. Tested liner top to 1500# for 15 min, held OK.</p>			

Rig released 06/04/17 @ 8:00 P.M.

Bond on file: NM1693 nationwide & NMB000919

I hereby certify that the foregoing is true and correct.

29. Name\*

JACKIE \_ LATHAN

30. Title

AUTHORIZED REPRESENTATIVE

31. Date\* (MM/DD/YYYY)

06/07/2017 Today

32. Signature\*

*You have the ability to sign this form only if a SmartCard or digital certificate has been issued to you.*

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.

**Section 2 - System Receipt Confirmation**

33. Transaction

378253

34. Date Sent

06/07/2017

35. Processing Office

Carlsbad, NM

**Section 3 - Internal Review #1 Status**

36. Review Category

\_\_\_\_\_

37. Date  
Completed

\_\_\_\_\_

38. Reviewer Name

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39. Comments

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**Section 4 - Internal Review #2 Status**

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