

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. NMNM0540701A
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. VIPER 32 29 W2PI FED COM 1H
9. API Well No. 30-015-44075-00-X1
10. Field and Pool or Exploratory Area FOREHAND RANCH
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 P O 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 32 T23S R27E SESE 345FSL 990FEL

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 Well Spud
	<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 recomplate 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.

3/12/19
Spud 17 1/2" hole @ 440'. Ran 425' of 13 3/8" 54.5# J55 ST&C Csg. Cemented with 450 sks Class C 1% CaCl2. Mixed @ 14.8#/g w/1.34 yd. Displaced w/ 58 bbls of BW. Plug down @ 6:00 PM 03/13/19. Circ 147 sks of cmt to the pit. Test BOPE to 5000# & Annular to 3500#. At 8:45 A.M. 03/15/19, tested csg to 1500# for 30 mins, held OK. FIT test to 10.5 PPG EMW. Drilled out with 12 1/4" bit.

Charts & Schematic attached.

Bond on file: NM1693 nationwide & NMB000919

*GC 4/30/19
Accepted for record - NMOCD*

RECEIVED

APR 25 2019

Submit GC Plan

DISTRICT II-ARTESIA O.C.D.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #461131 verified by the BLM Well Information System For MEWBOURNE OIL COMPANY, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 04/15/2019 (19PP1662SE)	
Name (Printed/Typed) JACKIE LATHAN	Title REGULATORY
Signature (Electronic Submission)	Date 04/11/2019

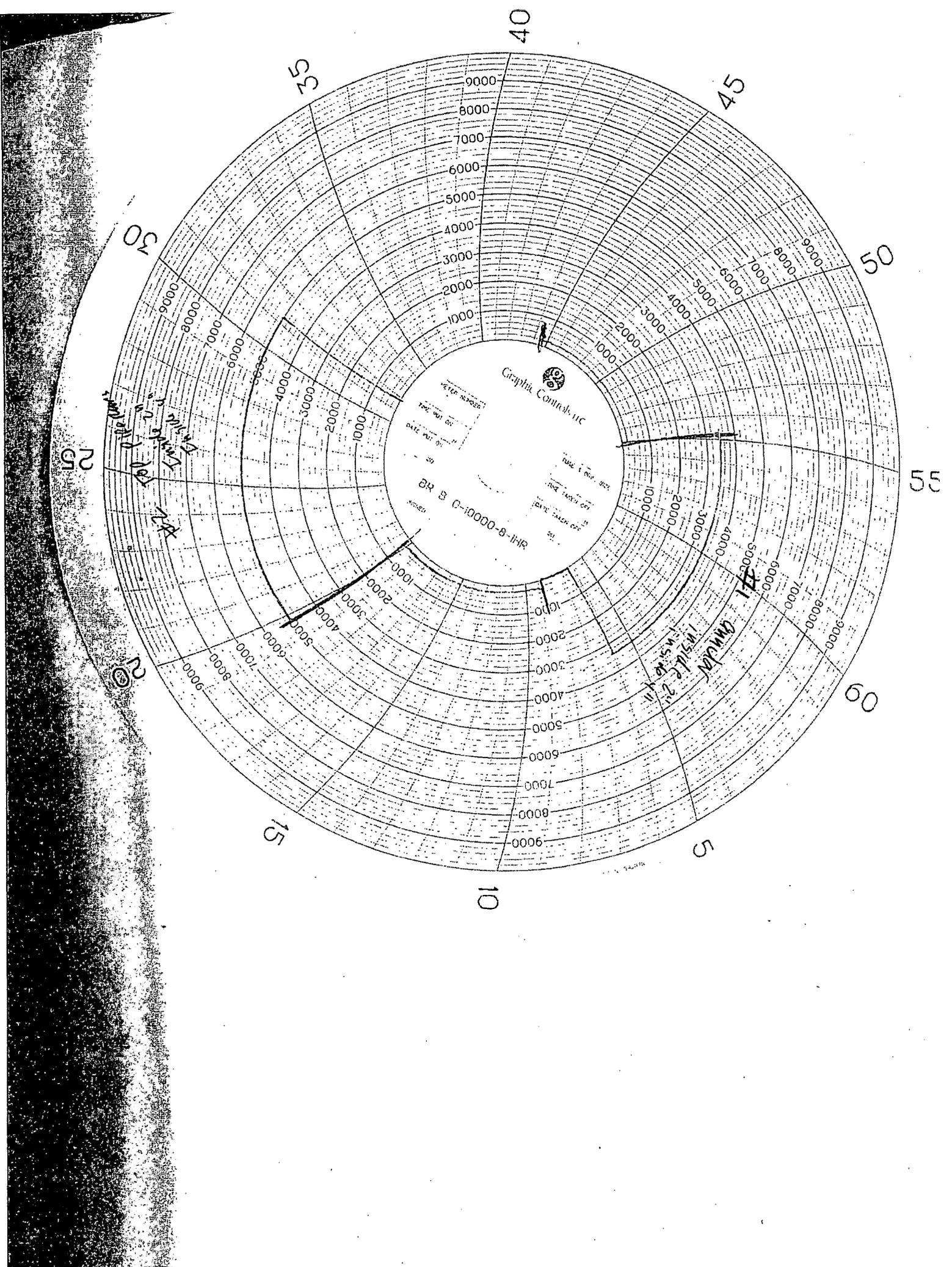
THIS SPACE FOR FEDERAL OR STATE OFFICE USE

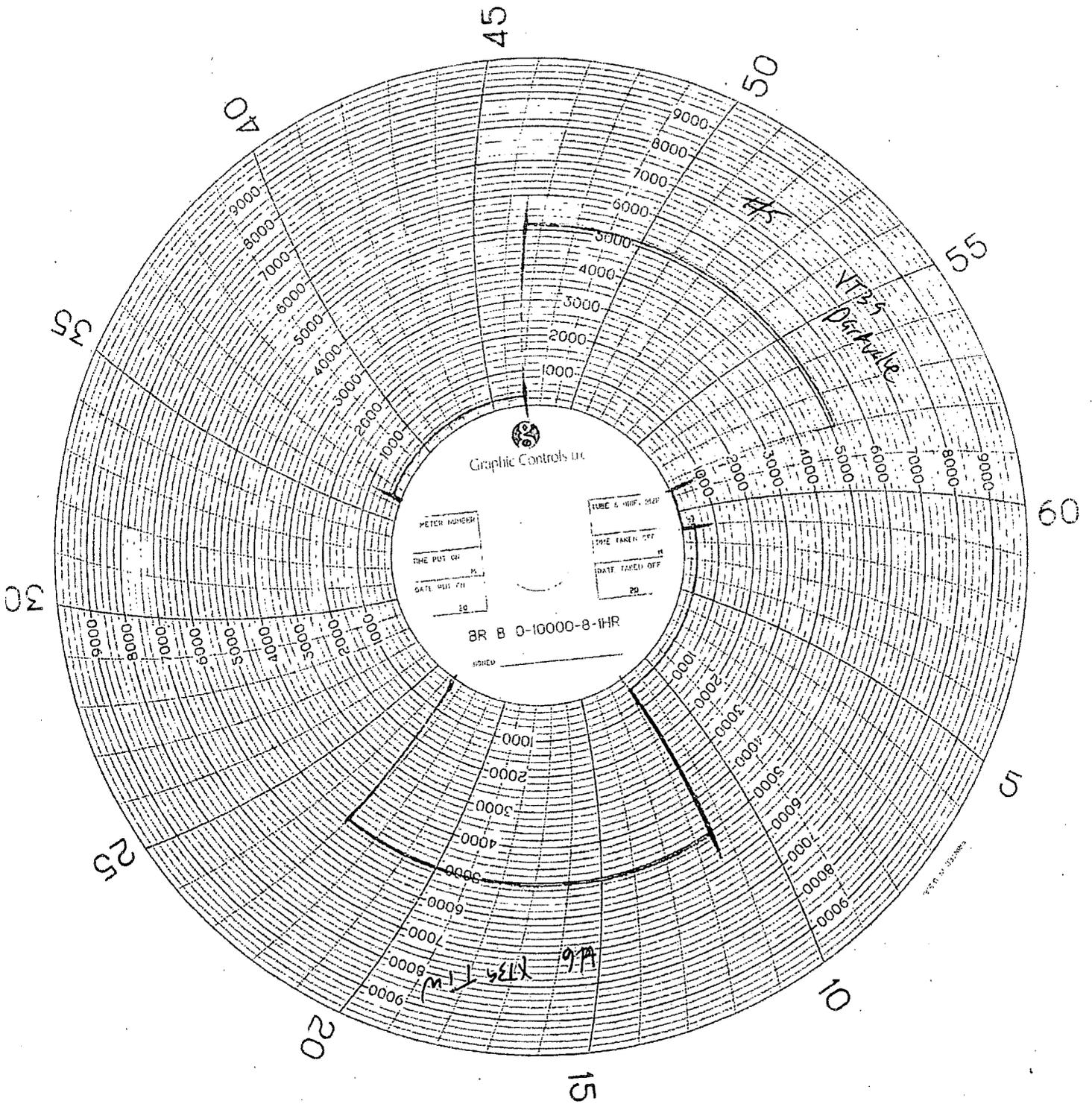
Approved By _____	Title Accepted for Record	Date APR 19 2019
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office Jonathon Shepard Carlsbad Field Office	

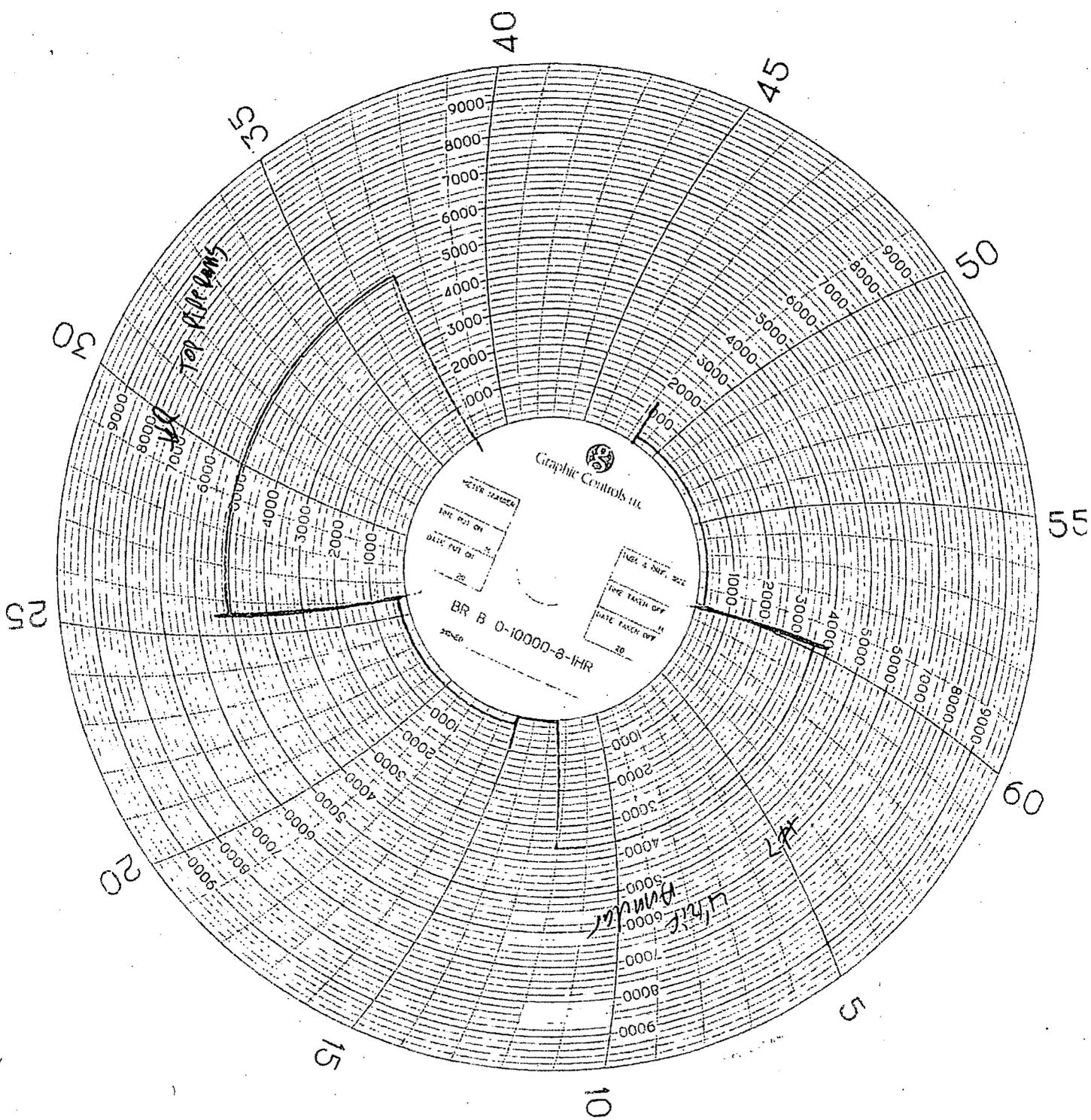
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

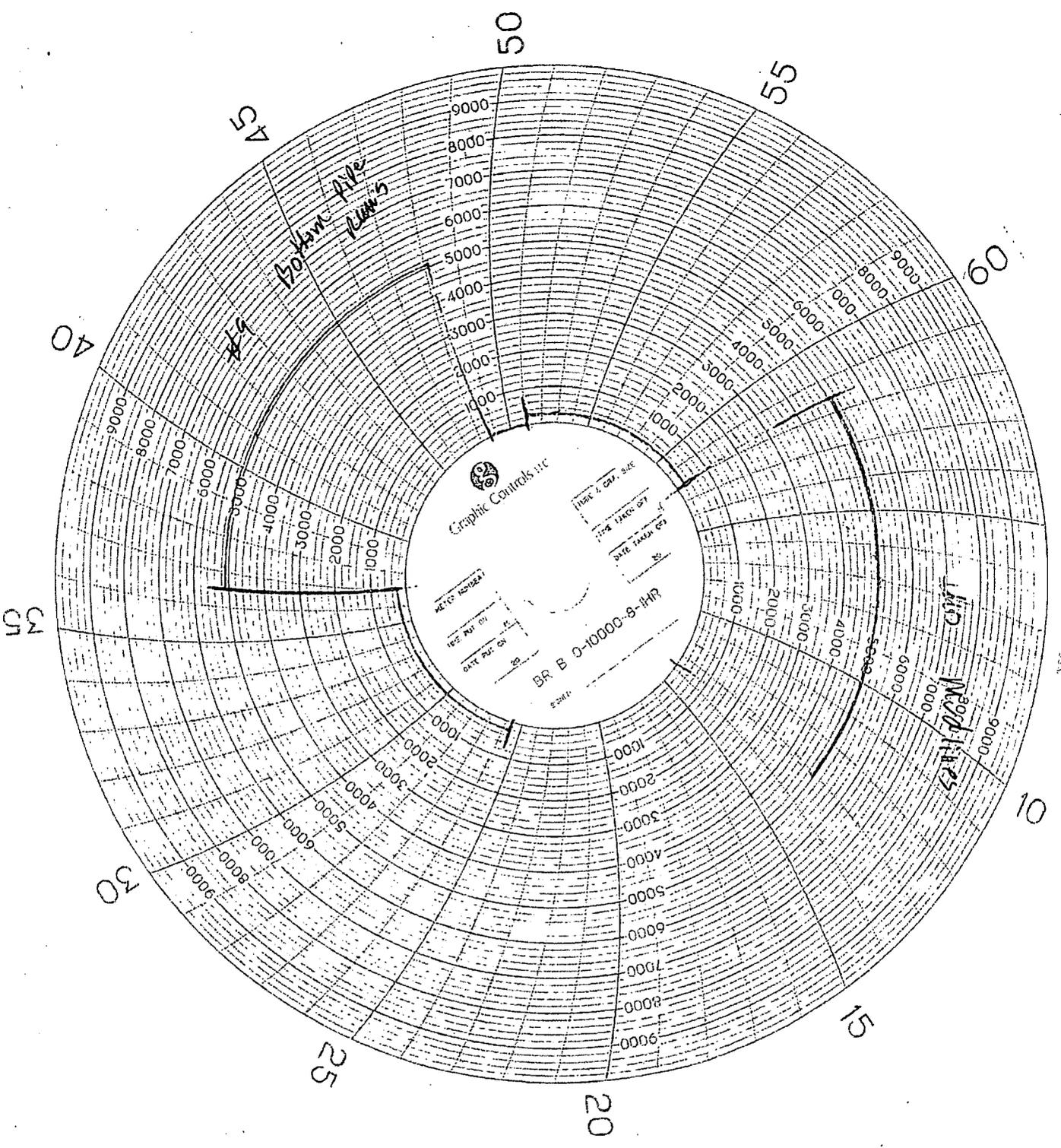
(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

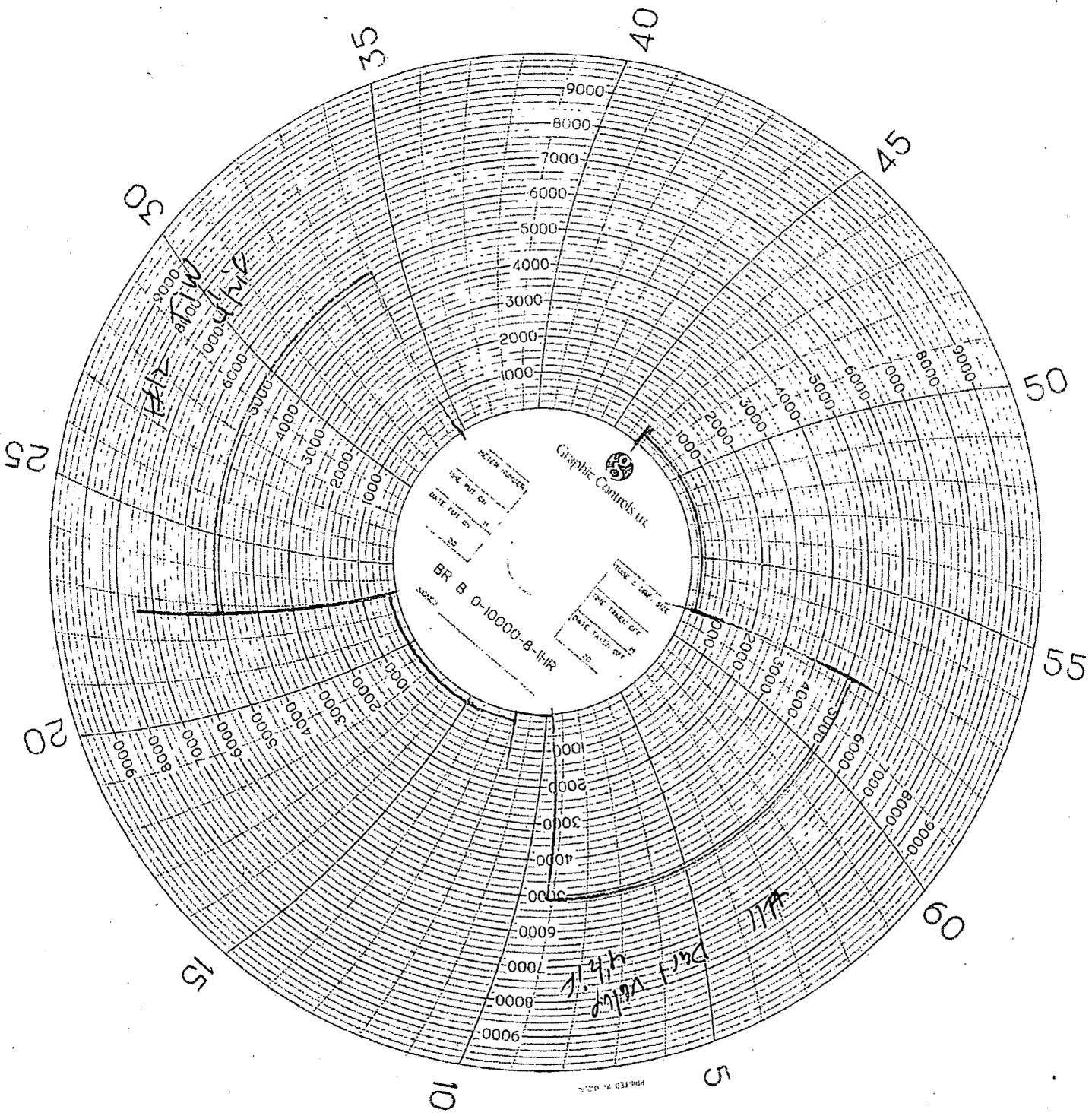


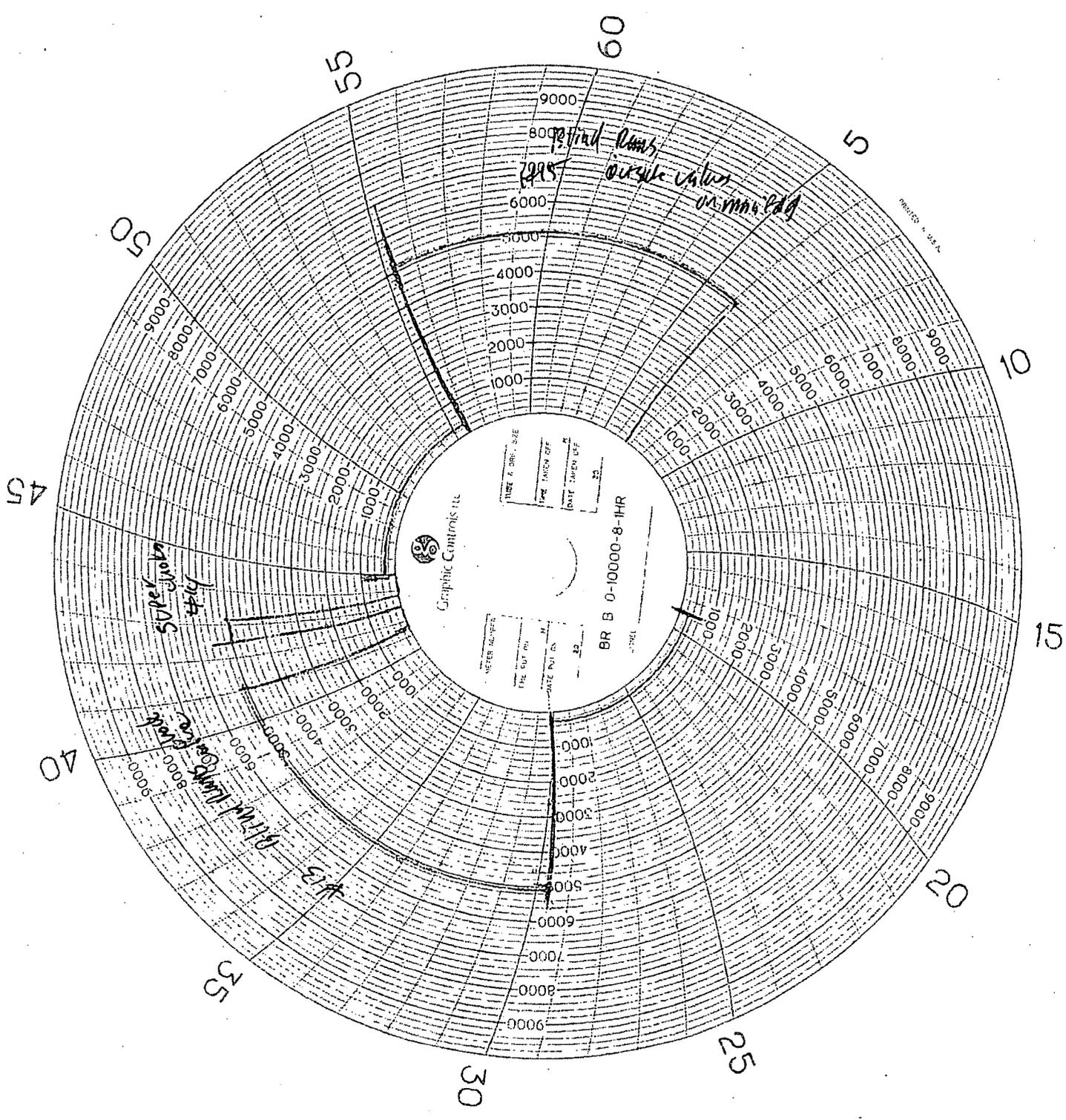






10
 10000-8-1HR
 22HR







MAN WELDING SERVICES

WELDING • BOP TESTING
 NIPPLE UP SERVICE • BOP LIFTS • TANDEM
 MUD AND GAS SEPARATORS
 Lovington, NM • 575-398-4540

Company: Maintain

Pg. 1 of 1

Lease: 1/1/19 3 2/29 WZP Fed 100M 1H

Date: 3-13-19

Plug Size & Type: 17" C22

Drilling Contractor: Patterson

Invoice #: B097256

Required BOP: _____

Drill Pipe Size: 4 1/2" - X139

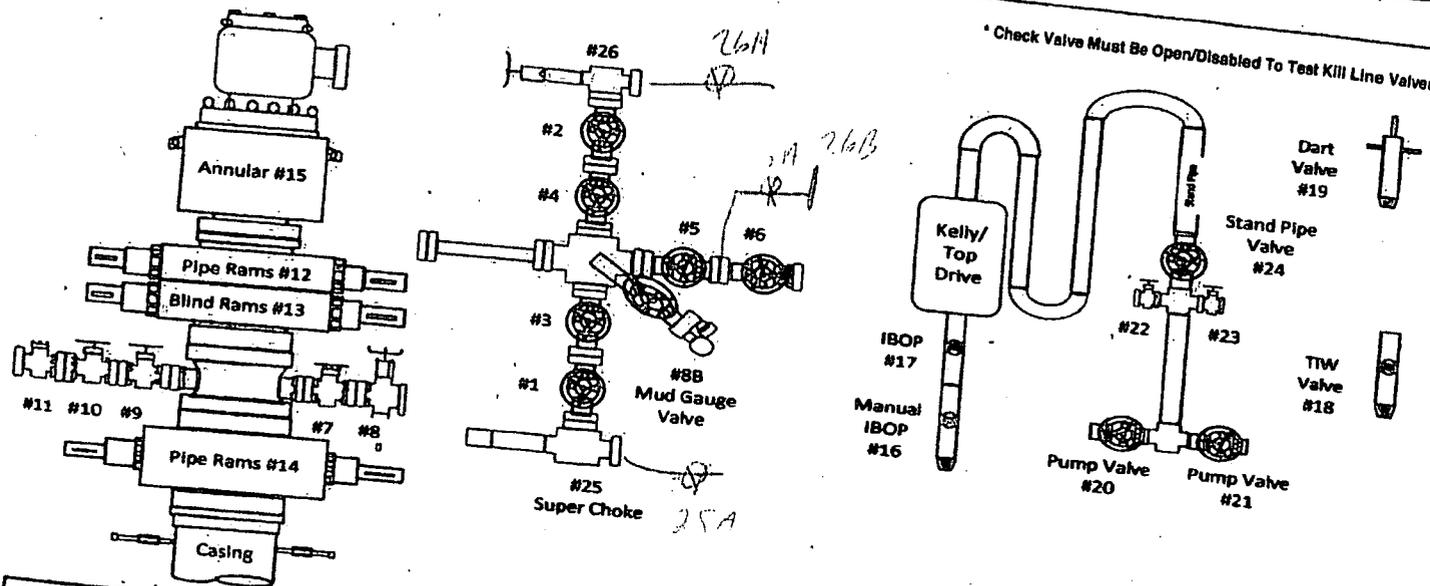
Rig #: 219

Installed BOP: _____

Tester: Todd

Appropriate Casing Valve Must Be Open During BOP Test

Check Valve Must Be Open/Disabled To Test Kill Line Valves



TEST #	ITEMS TESTED	TEST LENGTH	LOW PSI	HIGH PSI	REMARKS
1	15, 9, 7	10-10	250	3500	Passed VT-39
2	12, 9, 7	10-10	250	5000	Passed VT-39
3	12, 10, 8	10-10	250	5000	Passed VT-39
4	12, 10, 8B, 3, 4, 5	10-10	250	5000	Passed VT-39
5	19	10-10	250	5000	Passed VT-39
6	18	10-10	250	5000	Passed VT-39
7	15, 9, 7	10-10	250	5000	Passed VT-39
8	17, 9, 7	10-10	250	3500	Passed XT-39
9	14	10-10	250	5000	Passed 4 1/2" IF
10	7, 21, 22, 23, 16	10-10	250	5000	Passed 4 1/2" IF
11	19	10-10	250	5000	Passed 7" Rams
12	19	10-10	250	5000	Passed 4 1/2" IF
13	13, 11, 25A, 26A, 6A, 5A	10-10	250	5000	Passed 4 1/2" IF
14	13, 11, 25, 26, 26A, 5	10-10	250	5000	Passed
15	12, 11, 3, 5, 1	10-10	250	5000	Passed

MAN WELDING SERVICES, INC

Company Mowbraine Date 3-13-19

Lease Viper 32/29 WZPi Fed 10M 14 County Eddy County

Drilling Contractor Patterson 217 Plug & Drill Pipe Size 4 1/2" IF - XT39 - 12" C-72

Accumulator Pressure: 3000 Manifold Pressure: 1500 Annular Pressure: 1000

Accumulator Function Test - OO&GO#2

To Check - **USABLE FLUID IN THE NITROGEN BOTTLES** (III.A.2.c.i. or ii or iii)

- Make sure all rams and annular are open and if applicable HCR is closed.
- Ensure accumulator is pumped up to working pressure! (Shut off all pumps)
 1. Open HCR Valve. (If applicable)
 2. Close annular.
 3. Close **all** pipe rams!
 4. Open one set of the pipe/rams to simulate closing the blind ram.
 5. For 3 ram stacks, open the annular to achieve the 50+ % safety factor. (5M and greater systems).
 6. Record remaining pressure 1600 psi. Test fails if pressure is lower than required.
 - a. (950 psi for a 1500 psi system) b. (1200 psi for a 2000 & 3000 psi system)
 7. If annular is closed, open it at this time and close HCR.

To Check - **PRECHARGE ON BOTTLES OR SPHERICAL** (III.A.2.d.)

- Start with manifold pressure at, or above, maximum acceptable pre-charge pressure:
 - a. (800 psi for a 1500 psi system) b. (1100 psi for 2000 and 3000 psi system)
- 1. Open bleed line to the tank, slowly. (gauge needle will drop at the lowest bottle pressure)
- 2. Close bleed line. Barely bump electric pump and see what pressure the needle jumps up to.
- 3. Record pressure drop 1000 psi. Test fails if pressure drops below minimum.
- Minimum: a. (700 psi for a 1500 psi system) b. (900 psi for a 2000 & 3000 psi system)

To Check - **THE CAPACITY OF THE ACCUMULATOR PUMPS** (III.A.2.f.)

- Isolate the accumulator bottles or spherical from the pumps & manifold.
- Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
 1. Open the HCR valve, {if applicable}
 2. Close annular
 3. With pumps only, time how long it takes to regain the required manifold pressure.
 4. Record elapsed time: 1.4192. Test fails if it takes over 2 minutes.
 - a. (950 psi for a 1500 psi system) b. (1200 psi for a 2000 & 3000 psi system)