

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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

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.

S

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Mewbourne Oil Company 14744

3a. Address

PO Box 5270 Hobbs, NM 88241

4. Location of Well (Footage, Sec., T, R., M., or Survey Description)

660' FNL & 1500' FWL, Unit C, Sec 6-T19S-R30E

JUN 10 2008

OCD-ARTESIA

3b. Phone No. (include area code)

575-393-5905

5. Lease Serial No.

LC-066087-A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No

Bradley 6 Federal Com #1

9. API Well No.

30-015-35928

10. Field and Pool, or Exploratory Area

Turkey Track Morrow

11. County or Parish, State

Eddy County, NM

12. CHECK 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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 <u>Spud & csg</u>
	<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	

3. 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 shall 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 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.)

05/11/08...MI & spud 17 1/2" hole. Lost circulation at 90'. Dry drill to 340'. Ran 295' 13 3/8" 48# H40 ST&C csg. Cemented with 180 sks Thixsad H with additives. Mixed @ 14.8 #/g w/ 1.34 yd. Tail with 400 sks Class C with 2% CaCl2. Mixed @ 14.8 #/g w/ 1.34 yd. Did not circ cmt. Ran Temp Survey. TOC at 80'. Ran 1" pipe to 107' & cement in 8 stages w/250 sks Class C w/additives. Mixed @ 14.8 #/g w/ 1.34 yd. Circ 10 sks to surface. WOC 18 hrs. At 4:00 am on 05/14/08, tested BOPE and casing to 1250# for 30 minutes, held OK. Drilled out with 12 1/4" bit.

05/20/08 TD'ed 12 1/4" hole @ 3356'. Ran 3356' 9 5/8" 40# J55/N80 LT&C Csg. Cemented with w/800 sks BJ Lite Class C (35:65:6) with additives. Mixed @ 12.7 /g w/ 2.02 yd. Tail w/400 sks Class C with 2% CaCl2. Mixed @ 14.8 #/g w/ 1.34 yd. Circ 85 sks to pit. WOC 18 hrs. At 7:45 am 05/22/08, tested 9 5/8" casing to 1500# for 30 mins, held OK. Tested Formation @ csg shoe to 12.5# PPG MWE. Charts and schematic attached. Drilled out with 8 3/4" bit.

ACCEPTED FOR RECORD

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Jackie Lathan

Title Hobbs Regulatory

Signature

Date 05/23/08

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature)

Name
(Printed/Typed)

Title

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.

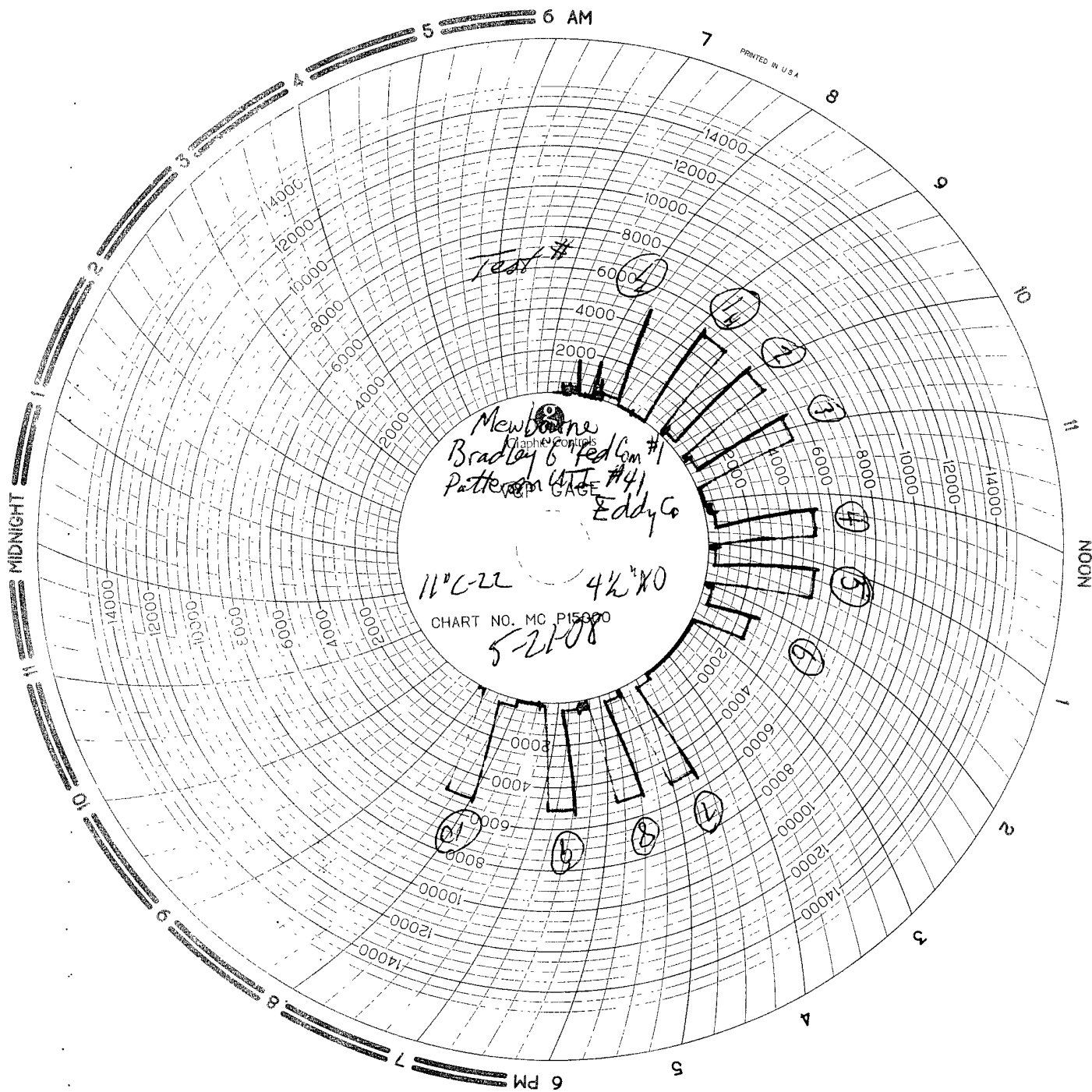
Office

Date

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.

(Continued on next page)

Accepted for record - NMOCD



MAN WELDING SERVICES, INC

Company Membrane Date 5-21-08
Lease Bridley's Federal Com. #1 County Eddy
Drilling Contractor Pattern #41 Plug & Drill Pipe Size 11 C-22 4 1/2" X 10

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 2350 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 1100 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.)

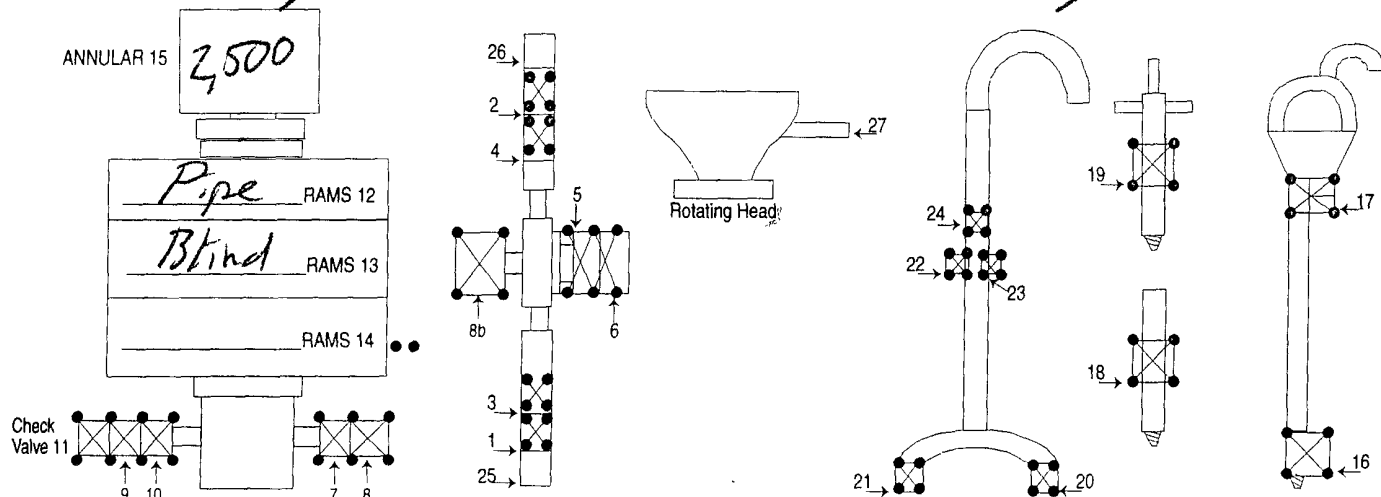
- Isolate the accumulator bottles or spherical from the pumps & manifold.
- Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
 1. Open the HCR valve, {if applicable}
 2. Close annular
 3. With **pumps** only, time how long it takes to regain the required manifold pressure.
 4. **Record elapsed time 110. 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}



Lovington, NM
575-396-4540

8753

Company Mewbourne Date 5-21-08 Start Time 6:30 ☒ am ☐ pm
Lease Bradley G Federal Com. #1 County Eddy State NM
Company Man Paul Noseff
Wellhead Vendor _____ Tester Neel Granath
Drig. Contractor Patterson-UTI Rig # 41
Tool Pusher Bill
Plug Type C-22 Plug Size 11" Drill Pipe Size 4 1/2" x 10
Casing Valve Opened lps Check Valve Open lps

[illegible]

8 HR @ \$1,000⁰⁰ = \$1,000⁰⁰
 HR @
 Mileage 140 @ \$1⁰⁰ = 140⁰⁰

SUB TOTAL \$1,140⁰⁰
TAX 61²⁸
TOTAL \$1,201²⁸