

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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

fm

**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.**

**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

3b Phone No (include area code)  
575-393-5905

4. Location of Well (Footage, Sec., T, R, M, or Survey Description)  
2135' FNL & 1650' FEL, Sec 17-T20S-R25E Unit Letter G

5. Lease Serial No.

NM-99014

6. If Indian, Allottee or Tribe Name

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

**RECEIVED**  
JAN 19 2010  
NM OCD ARTESIA

8 Well Name and No

Pine Box 17 G Federal #3

9 API Well No

30 015 37472

10 Field and Pool, or Exploratory Area

Undesignated Yeso

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 checked="" 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>Change Name</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.)

Mewbourne Oil Company has received an approved APD for the above captioned well. MOC would like to change the name to the Pine Box 17 G Federal #1.

If you have any questions, please call 575-393-5905.

14 I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Jackie Lathan

Title Hobbs Regulatory

Signature

*Jackie Lathan*

Date 12/29/09

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature)

*[Signature]*

Name  
(Printed/Typed)

Office

**APPROVED**

Title

JAN 12 2010  
s/ Dustin Winkler

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.

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 any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

(Continued on next page)

*MZ*