Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR RUBEAU OF LAND MANAGEMENT

OCD-ARTESIA

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

BUREAU OF LAND MANAGEMENT

5. Lease Serial

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.NM-147586. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side					or CA/Agreement, f	Name and/or No.	
1. Type of Well							
Oil Well Gas Well Other				— 	8. Well Name and No.		
2. Name of Operator					Long Draw 4 JL Federal #1H		
Mewbourne Oil Company 14744 3a. Address 3b. Phone No. (incl.)			9. API Well No.				
		· ·	Phone No. (include area code)		30-015-37585 10. Field and Pool, or Exploratory Area		
PO Box 5270 Hobbs, NM 88240 [575-393-5905					Cemetery Yeso		
4. Location of Well (Footage, Sec., T, R., M., or Survey Description)					11. County or Parish, State		
1650' FSL & 1650' FEL, Sec 4-T20S-R25E Unit J					Eddy County, NM		
12. CHECK AP	PROPRIATE BOX(ES) TO I	NDICATE NAT	URE OF NOTICE			 Γ A	
TYPE OF SUBMISSION TYPE OF ACTION							
Notice of Intent	Acidize Deepen Production (Start			Start/Resume)	t/Resume) Water Shut-Off		
	Alter Casing	Fracture Treat	Reclamation		Well Integrity		
	Casing Repair	New Construction	<u>=</u>		Other Spuc		
Subsequent Report	Change Plans	=	Plug and Abandon Temporarily Abandon		7		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Dispo				
	450 sks Class C with 2% CaCl2. 1/24/10 tested casing to 1500# fo 5605' MD. Ran 4 ½" 11.6# J55	Mixed @ 14.8 /g or 30 minutes, held & 5 1/2" 17# J55 I	w/1.34 yd. Plug dov l OK. Drilled out with	vn @ 12:15 pm n 8 3/4" bit. Port system. Er	11/23/10. Circ 14 and of casing @ 55	40 sks cmt 587' MD. Ran	
NMOCD ARTESIA DEC 19 2010							
14. I hereby certify that the foregoin Name (PrintedlTyped)	g is true and correct			BUFE	AU OF LAND MA	NAGEMENT	
Jackje Lathan		Title	Title Hobbs Regulatory		CARLSBAD FIELD OFFICE		
Signature	ie Latha		12/06/10				
Market Control of the	THIS SPACE FO	R FEDERAL OR	STATE OFFICE U	SE.			
Approved by (Signature)			Name (Printed/Typed)		Title		
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to determine the applicant the applicant to determine the applicant to dete							
Title 18 U.S.C. Section 1001 and Ti States any false, fictitious or fraudule	tle 43 U.S.C. Section 1212, make it ent statements or representations as to	a crime for any personany matter within i	on knowingly and willfus jurisdiction.	ully to make to an	y department or age	ency of the United	

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