Form 3160-5 (September 2001)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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

5. Lease Serial No.

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.

NM-83066	
6. If Indian, Allottee or Tribe Name	

apandoneu we	:n. 03e i 0im 3100-3 (A	ii b) for such propos	, a					
SUBMIT IN TR	IPLICATE - Other ins	structions on reve	se side	7. If Unit o	r CA/Agreement, Name	and/or No.		
1. Type of Well	_							
Oil Well Gas Well Other					8. Well Name and No.			
2. Name of Operator  Mewbourne Oil Company 14744					Crow Flats 28 Federal #3 H  9. API Well No.			
3a. Address 3b. Phone No. (include area code)				<del></del>	30-015-38269			
			uuc areu coucy	<del></del>	10. Field and Pool, or Exploratory Area			
PO Box 5270 Hobbs, NM 88241 575-393-5905  4. Location of Well (Footage, Sec., T, R., M., or Survey Description)					Dog Canyon Wolfcamp 17970			
4. Location of well (Footage, Sec., 1, K., M., or Survey Description)					11. County or Parish, State			
(SL) 2120' FSL & 415' FWL, S	Sec 27-T16S-R28E Unit I	Letter L		Eddy Cou	inty, NM			
12. CHECK AP	PROPRIATE BOX(ES)	TO INDICATE NAT	URE OF NOTICE					
TYPE OF SUBMISSION			TYPE OF ACTION					
<ul> <li>Notice of Intent</li> <li>✓ Subsequent Report</li> <li>Final Abandonment Notice</li> </ul>	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abando Plug Back	Production ( Reclamation	Abandon (	<ul><li>☐ Well Integrity</li><li>☑ Other Completion Sundry</li></ul>			
3. Describe Proposed or Complete. If the proposal is to deepen direct Attach the Bond under which the following completion of the investing has been completed. Find determined that the site is ready  03/18/11 Frac Wolfcamp horizonstages. Flowback for	olved operations. If the operat al Abandonment Notices shal for final inspection.)	tion results in a multiple of Il be filed only after all rec	impletion or recomplet juirements, including r	eclamation, have b	een completed, and the	operator has		
03/20/11 PWOL.			A	CCEPTE	FOR RECO	IRD		
Accepted for reco		RECEIVE APR 2 5 201 NMOCD ARTE	D	APR BUFEAU OF				
<ol> <li>14. I hereby certify that the foregoin Name (Printed Typed)</li> <li>Jackie Lathan</li> </ol>	g is true and correct	Title	Hobbs Regulatory					
Signature acti	e Lath		03/30/11					
	TH <b>/</b> S SPACE	FOR FEDERAL OR	STATE OFFICE U	JSE				
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 contact the contact to contact the contact to contact the contact to contact the contac	otice does not warrant or ights in the subject lease	Office		D ate				
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudule	tle 43 U.S.C. Section 1212, ment statements or representation	ake it a crime for any pers	on knowingly and willf is jurisdiction.	ully to make to any	y department or agency (	of the United		