

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
O. C. D.
ARTESHA OFFICE

RECEIVED

JUN 13 1991

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
NM-29277

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
FEDERAL "S" #1

9. API Well No.
30-015-26432

10. Field and Pool, or Exploratory Area
Red Lake Atoka Morrow

11. County or Parish, State
Eddy, New Mexico

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

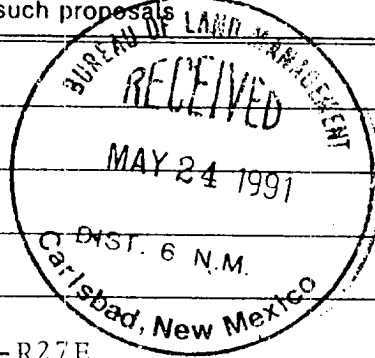
Mewbourne Oil Company

3. Address and Telephone No.

P. O. Box 7698, Tyler, Texas 75711

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

660' FEL & 710' FNL of Sec. 21-T18S-R27E



12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

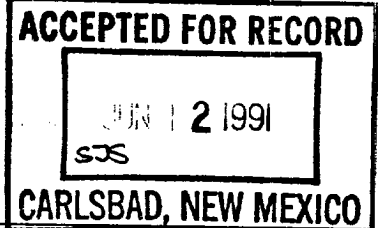
- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Fracture Treat

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

4/17/91 - Western fracture treated Morrow sand perfs 9607-10' & 9613-26' down 2-7/8" tubing with 20,000 gals 73 downhole slurry quality Binary Westfoam carrying 11,875# 20/40 Mesh ADFRAC Black (Westprop-3). Flushed with 240C gals CO₂/N₂ 2% KCL water. ISDP 5300#, 5 mins 4350#, 10 mins 4050#, 15 mins 3800#, Avg 11 BPM at 7300#. Job Complete at 11:00 AM.



14. I hereby certify that the foregoing is true and correct

Signed

Title Engr. Cprns. Secretary

Date 5/21/91

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any: