				FORM APPROVED
Form 3160-5		ED STATES	NM O DD	Budget Bureau No 1004-0155
June 1990 RECEIVED	DEPARTMEN	T OF THE INTERIOR AND MANAGEMENT	Drawer DD	982 Majores March 31, 1913 S. Lease Designation and Serial No.
₹				NM-27279
	DRY NOTICES	AND REPORTS ON WELLS		6. If Indian, Allomor or Tribe Name
Cochok luse this 10 m to	or proposals to dr	AND REPORTS ON WELLS iii or to deepen or reentry to a R PERMIT—" for such proposa	different feservoir.	
CADI	GEPLICATION TO			7. If Unit or CA, Agreement Designation
AREA HE	SUBMIT	IN TRIPLICATE		
1. Type of Well		- OUTINE WITHL		8. Well Name and No.
Well Gas Well Other				Santo Nino "30" Fed. #1
2. Name of Operator				9. API Well No.
Mewbourne 011 Company				30-015-28157
3. Address and Telephone No.				10. Field and Pool, or Exploratory Area
P.O. Box 5270 Hobbs, New Mexico 88241 (505) 393-5905				Santo Nino Bone Spring
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State
1980' FWL & 660'	FNL			
Sec 30-T18S-R30E				Eddy County, N.M.
CHECK APP	ROPRIATE BOX	s) TO INDICATE NATURE O	F NOTICE, REPO	RT, OR OTHER DATA
			TYPE OF ACTION	· _
TYPE OF SUBA	AISSION			Change of Plans
Notice of later	OOUT	IDENTINE Abandonment		New Construction
	1311/1	DENTIAL Recompletion		Non-Routine Fracturing
Subsequent Rep		Suffinit mer		Water Stat-Off
		Casing Repair		Conversion to Injection
Final Abandous	ment Notice	Altering Cusing	f-mations	Dispose Water
		Other Add Po	<u>erforations</u>	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
			and the of contin	Completion or Recompletion Report and Editorial State of the same proposed work. If well is directionally drilled,
13 Describe Proposed or Complete	Operations (Clearly state	all pertinent details, and give pertinent dates, inc	cluding estimated date of starring to this work.)*	ag any proposed work. If well is directionally drilled,
give subsurface locations a	ind measured and true veri	all pertinent details, and give pertinent lical depths for all markers and zones pertinent		CEIVED
8/14/95 Set RBP	@ 7920 '.		. uu	

8/15/95 Perforate First Bone Spring Sand from 7102'-7290'.

OCT 1 7 1995

8/16/95 Acidize perforations w/5,000 gal. 7 1/2% HCL acid.

8/17/95 Frac perforations w/127,000 gal. gel and 281,000# same CON

8/19/95 TIH w/production string. Swab and flow test and restore very solphoded

· CONTEIDENTIAL	57 ⁵
14. I hereby certify that the foregoing is true and correct Signed	Dete 9/08/95
(This space for Federal or State office use) Approval by	Detx

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