Form 3160-5 (June 1990)		ED STATES T OF THE INTERIOR	RECEIVED	FORM APPROVED Budget Bureau No. 1004–0135 Expires: March 31, 1993	
	BUREAU OF J	LAND MANAGEMENT		5. Lease Designation and Serial No. NMNM064348	
O. C. D. 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				6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE				7. If Unit or CA, Agreement Designation	
i. Type of Well Oil Gas Well Well Other Salt Water Disposal  2. Name of Operator				8. Well Name and No. Mobil Fodonal Ship Com #1	
Nearburg Producing Company				Mobil Federal SWD Com #1 9. API Well No.	
3. Address and Telephone No.				30-015-21669	
P.O. Box 823085 Dallas, TX 75382-3085 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10. Field and Pool, or Exploratory Area Devonian	
1,980' FSL and 1960' FWL of Sec 7-T20S-R25E				11. County or Parish, State	
				Eddy County, New Mexico	
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR O				RT, OR OTHER DATA	
TYP	E OF SUBMISSION		TYPE OF ACTION		
Notice of Intent				Change of Plans	
Subsequent Report		Recompletion		New Construction	
Las subsequent Report				Water Shut-Off	
Final Abandonment Notice		Altering Casi		Conversion to Injection	
		LÅ Other	Activity	_ Dispose Water (Note: Report results of multiple completion on Well	
	Acc locations and measured and true vertice Moved in, rigged up Test BOPs, choke & plug. Tested 8-5/8 Stubblefield with M Drilled cement plug Drilled cement plug Dumped cement conta Circulate and condi	ai depths for all markers and zones per o drilling rig. Nip manifold to 3000#, "casing to 1000# for MOCD). Drilled out (s from 2,930'-3,000 (s 7,804'-8,000'and so (s 7,804'-8,000'and	tinent to this work.)* pled up BOPs. Hydril to 1500#. or 30 minutes (wit. plug from 1,200'- ', 4,780'-4,880' a 9,050'-9,150'. new mud volume.	1,300'. nd 6,500'-6,650'.	
14. I hereby certify t	that the foregoing is frue and correct		۔ 		
Signed ///	died permiphan	Title Productio	n Analyst	Date	
(This space for F	Federal or State office use)				
Approved by Conditions of app	proval, if any:	Title		Date	
		knowingly and willfully to make to any	department or agency of the United	States any false, fictitious or fraudulent statements	
or representations as	to any matter within its jurisdiction.				

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