

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TP  
(Other Instruc  
verse side)

DATE  
in re

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

45F

SUNDRY NOTICES AND REPORTS ON WELLS

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

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM 71752	
2. NAME OF OPERATOR Mewbourne Oil Company ✓		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 7698, Tyler, Texas 75711		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FWL & 467' FSL		8. FARM OR LEASE NAME Federal "N"	
14. PERMIT NO. API #30-015-25965		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, GR, or ARTESIAN OFFICE) 3595.4' GL		10. FIELD AND POOL, OR WILDCAT Happy Valley Morrow	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 6-22S-26E	
		12. COUNTY OR PARISH Eddy	
		13. STATE N.M.	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other) Surface Casing	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>

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

17. 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.)

9/06/88 - Spud at 10:00 P.M. 9/04/88. Ran 11 joints 13-3/8" 64# LS casing with IF in collar of 1st joint. Total 472.74' set at 450'. Western cemented with 200 sxs Class "C" with 10% Thixad + 2% CaCl and 450 sxs Class "C" with 5#/sx gilsonite + 1#/sx Hiseal + 1/2#/sx Celloseal + 3% CaCl. PD to 433' at 6:18 A.M. Did not circulate (REDI-MIX FROM 6' TO SURF.) SJS

9/12/88 - Ran 9-5/8" casing as follows:

1	9-5/8" down jet guide shoe	1.90'
1	9-5/8" 36# new LS shoe	47.05'
1	9-5/8" FC	2.09'
58	9-5/8" 36# new LS	2547.22'
Total		2597.36'
Set @		2590.00'

Western cemented with 300 sxs Class "C" containing 10% Thixad + 2% CaCl-2 followed by 1000 sxs Pacesetter lite "C" containing 5#/sx gilsonite + 1/2#/sx celloseal + 2% CaCl-2 followed by 300 sxs Class "C" containing 5#/sx gilsonite + 1/2#/sx celloseal + 2% CaCl-2. Plug down to 2547' at 5:35 AM 9/11/88. Circ 50 sxs.

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

SIGNED Raymond Thompson TITLE Engr. Oprns. Sec. DATE 9/20/88  
(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

SJS