Form 3160-5 (September 2001)

N.M. Oil Cons. DIV-Dist. 2 DEPARTMENT OF THE INTERIOR FRANCE OF THE INTERIOR OF THE INTER

BUREAU OF LAND MANGEMENT NIM 88210

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

5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS				NM-86542		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If India	n, Allottee or Tribe l	Vame
SUBMITINTR	IPLIGATE - Other instr	uctions on neven	se side	7. If Unit	or CA/Agreement, N	ame and/or No.
1. Type of Well			RECEIVED	33405		
Oil Well Gas Well	Other			4	lame and No.	2
2. Name of Operator			AUG 1 2 2004		0 Federal #2 #	<u> </u>
Mewbourne Oil Company 147	<u>44 </u>	3b. Phone No. (incl	PERFERIN	9. API W		
3a. Address		3b. Phone No. (incl	ude area code)	30-015-3		
PO Box 5270 Hobbs, NM 88	240	505-393-5905		1	and Pool, or Explorat	-
4. Location of Well (Footage, Sec.,		n)			Ranch Morrow 761	.40
1650' FSL & 1650' FWL, Sec 2	0-T22S-R28E Unit Letter K			Eddy, N	ry or Parish, State	
12 CHECK AP	PROPRIATE BOX(ES) T	O INDICATE NAT	URE OF NOTICE R			A
	ROPRIATE BOX(ES) T			or orer, c	OK OTHER BITT	
TYPE OF SUBMISSION			TYPE OF ACTION			
	Acidize	Deepen Deepen	Production (Start	/Resume)	Water Shut-C)ff
✓ Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity	y
Cubarana Baran	Casing Repair	New Construction	n Recomplete		Other Chan	ge well name
Subsequent Report	Change Plans	Plug and Abando	n Temporarily Ab	andon		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal			
Mewbourne Oil Company has a Dinero 20 #3. WAS O'NE	pplied for and received an applied for and received an application of the second secon			C would lil	ke to change the we	ell name to the
14. I hereby certify that the foregoin Name (PrintedlTyped) Kristi Green Signature	g is true and correct	D. I	Hobbs Regulatory Asst			
	THIS SPACE	VANDALIS STATE OF THE STATE OF THE	STATE OF BOE USE	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		and the second s
Approved by (Signature)	(ORIG. SGD.) ALEXIS		NETROLEUM EI	HGINEE	Pritle AUG	1 0 2004
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to o	al or equitable title to those righ	ce does not warrant or its in the subject lease	Office		Date	

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person 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.

Porm 3160-5 (September 2001)

UNIT STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OPERATOR'S COP

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

	Exp	pires	: Jan	uary	31,
	-				

SUNDRY N	OTICES AND R	EPORTS ON	WELLS
Do not use this f	orm for proposa	is to drill or to	re-enter an
abandoned well.	Jse Form 3160-3	(APD) for such	proposals.

J. Doube Bellal Ive.			
NM-86542			
6. If Indian, Allottee of	r Tribe N	lame	

abandoned we	iii. USE FOIIII 3100-3 (AFD) for such prope	Jaais.			
-33 8 (0.50 / 0.00 / 0.00 / 0.00	iraliegaves salar in siri	jagistis akalifest	specialists	7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well			DEOCULES	33405		
Oil Well Gas Well	Other		RECEIVED	8. Well Name and No.		
2. Name of Operator			AUG 1 2 7004	Dinero 20 Federal #2		
Mewbourne Oil Company 147	44			9. API Well No.		
3a. Address		3b. Phone No. (include area code)		30-015-33432		
•		505-393-5905		10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec.,			· · · · · · · · · · · · · · · · · · ·	Dublin Ranch Morrow 76140		
1980' FSL & 1980' FWL, Sec 20-T22S-R28E Unit Letter K				11. County or Parish, State		
12. CHECK AP	PROPRIATE BOX(ES) TO) INDICATE NA	TURE OF NOTICE, RI	EPORT, OR OTHER DATA		
TYPE OF SUBMISSION		<u> </u>	TYPE OF ACTION			
	Acidize	Deepen	Production (Start	/Resume) Water Shut-Off		
Notice of Intent	Alter Casing	Fracture Treat	Reclamation	☐ Well Integrity		
Subsequent Report	Casing Repair	New Construct	ion Recomplete	Other Change well name		
_ · ·	Change Plans	Plug and Abane	don 🔲 Temporarily Aba	andon perteliphone cal		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal	WKristi 7/7/04		
location to 1650' FSL & 1650' F and Topo Sheet.		nit Letter K. Ån ar		ogical review, MOC would like to move this and cleared. Attached is a new C102		
14. 1 hereby certify that the foregoing Name (PrintedlTyped)	ng is true and correct					
Kristi Green		Titl	e Hobbs Regulatory Asst			
Signature Fruit	i guen	Dat	e 06/28/04	,		
			R(5)(14)(15)(0)(1)(0 <u>15</u> (15)(5)			
Approved by (Signature)	Low D. Lan) 4	Name (Printed/Typed)/s/ Joe G	. Lara FIELD MANAGER		
Conditions of approval, if any are certify that the applicant holds legs which would entitle the applicant to	al or equitable title to those right	e does not warrant of ts in the subject leas	CARLSBAD FI	ELD OFFICE Date [C. : AUG 2004		

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