Form 3160-5 (August 2007)

OCD-ARTESIA

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

OMB No. 1004-0137 Expires July 31, 2010

FORM APPROVED

5 Lease Serial No NMNM101967

6 If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

| abandoned well. | Use Form 3160-3 (API | D) for suc | h proposa | ls. | | | |
|--|--|--|------------------------|---|---|--|--|
| SUBMIT IN TRIPLICATE – Other instructions on page 2. | | | | | 7. If Unit of CA/Agree | ement, Name and/or No. | |
| 1 Type of Well Oil Well Gas Well Other | | | | 8. Well Name and No. Empire 7 MP Fed #1H | | | |
| 2. Name of Operator Mewbourne Oil Company | | | | | 9. API Well No. 30-015-39805 | | |
| Mewbourne Oil Company 3a. Address 3b. Phone No. (include area code) | | | | | 10. Field and Pool or Exploratory Area | | |
| PO Box 5270 Hobbs, NM 88241 575-393-5905 | | | | Empire Glorieta; Yeso 96210 | | | |
| 4 Location of Well (Footage, Sec., T.,R.,M., or Survey Description) 545' FSL & 85' FWL, Sec 7 T17S, R29E | | | | | 11 Country or Parish, State Eddy County, NM | | |
| | | | | | | | |
| 12. CHEC | K THE APPROPRIATE BOX(| (ES) TO IND | CATE NATUR | E OF NOTIC | E, REPORT OR OTH | ER DATA | |
| TYPE OF SUBMISSION | TYPE OF ACTION | | | | | | |
| Notice of Intent | Acidize Deepe | | en Produ | | iction (Start/Resume) | Water Shut-Off | |
| | Alter Casing | Fracti | re Treat | Recla | mation | Well Integrity | |
| Subsequent Report | Casing Repair | | Construction | | mplete | Other Completion Sundr | |
| | | | | <u> </u> | emporarily Abandon | | |
| Final Abandonment Notice | | Convert to Injection Plug Back Water Disposal 1: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration the | | | | | |
| 48660# 20/40 sand. Flow 04/13/12 RIH w/2 7/8" 6. 04/19/12 Put well on proc | Yeso from 4325' MD (40) back well for cleanup. 5# J55 tbg to 3666' & rod duction. | SO' TVD) to the state of the st | - | (4086' TV) | D) in 18 stages w/1 | OR RECORD 0 2012 D MANAGEMENT | |
| 14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Jackie Lathan | | | Title Hobbs Regulatory | | | | |
| The Troops Regula | | | | -105414101 | J | | |
| Signature | Lathan | | Date 04/30 | /12 | | | |
| | THIS SPACE FO | OR FEDE | RAL OR ST | ATE OFF | ICE USE | | |
| Approved by | | | <u> </u> | | | | |
| | | | Title | | r | Date | |
| Conditions of approval, if any, are attached that the applicant holds legal or equitable to entitle the applicant to conduct operations to | tle to those rights in the subject le | t warrant or co case which wo | rtify uld Office | | | | |
| Title 18 U.S.C. Section 1001 and Title 43 | | | | nd willfully to | make to any departmen | t or agency of the United States any false | |
| fictitious or fraudulent statements or representations as to any matter within its jurisdiction. | | | | | | | |

(Instructions on page 2)