	OCD Artesia								
Form 3160-5 (August 2007)	DE BL			FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010 5. Lease Serial No.					
	SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an					NMNM01165 6. If Indian, Allottee or Tribe Name			
abandoned well. Use form 3160-3 (APD) for such proposals.						6. If Indian, Atlottee of Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on reverse side.						7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well          Image: Second Seco						8. Well Name and No. GLOCK 17 MP FEDERAL 1H			
2. Name of Operator Contact: JACKIE LATHAN MEWBOURNE OIL COMPANY E-Mail: jlathan@mewbourne.com						9. API Well No. 30-015-41417-00-X1			
Ph:				(include area code) 3-5905	10. Field and Pool, or Exploratory WILDCAT				
HOBBS, NM 88241 Fx: 57 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				-6252		11. County or Parish, and State			
Sec 17 T20	S R29E SWSW 40 N Lat, 104.061677	0FSL 2000FWL			EDDY COUNTY, NM				
······································	12. CHECK APPR	OPRIATE BOX(ES) TO	INDICATE	NATURE OF N	NOTICE, RI	EPORT, OR OTHEI	R DATA	ł	
TYPE OF S	TYPE OF SUBMISSION				TYPE OF ACTION				
□ Notice of	□ Notice of Intent			_ · _		ion (Start/Resume)	_	□ Water Shut-Off	
🛛 Subsequent Report		Alter Casing Casing Repair	—	Fracture Treat New Construction		<ul> <li>Reclamation</li> <li>Recomplete</li> </ul>		☐ Well Integrity ☑ Other	
		Change Plans	—	and Abandon	-	arily Abandon Well Spud		Spud	
		Convert to Injection	🗖 Plug	Plug Back  Water		Disposal			
If the proposal Attach the Bost following com testing has bee	l is to deepen directiona nd under which the wor ppletion of the involved	ration (clearly state all pertinen lly or recomplete horizontally, k will be performed or provide operations. If the operation res andonment Notices shall be file nal inspection.)	give subsurface the Bond No. on sults in a multiple	locations and measu file with BLM/BIA e completion or reco	red and true ve Required su mpletion in a	ertical depths of all pertin bsequent reports shall be new interval, a Form 316	ent marke filed with 0-4 shall 1	ers and zones. iin 30 days be filed once	
w/additives	. Mixed @ 13.5 #/g	381' of 20" 94# J55 BT&C w/1.75 yd. Tail w/200 sks 25/13. Circ 133 sks of cer	s Class C w/2	% CaCl2. Mixed	l @ 14.8 #/c	) w/1.34 bit.			
Bond on file	e: NM1693 nationw		) ale sense ion NOC			NOV 1 9	2013		
14. I hereby cert	ify that the foregoing is	Electronic Submission #2	223734 verifie	d by the BLM Wel	II Informatio	n System		المستنجر	
	Com	For MEWBOUF mitted to AFMSS for proce		PANY, sent to the E CARRASCO on		(14JNC0203SE)			
Name (Printed/Typed) JACKIE LATHAN				Title AUTHORIZED REPRESENTATIVE					
Signature	(Electronic S	ubmission)		Date 10/21/2	013	<u>.</u>			
		THIS SPACE FC	R FEDERA	L OR STATE	OFFICE U	SE			
Approved By ACCEPTED				JAMES A AMOS TitleSUPERVISOR EPS Date 11/17			Date 11/17/2013		
certify that the app	d. Approval of this notice does itable title to those rights in the ict operations thereon.	Office Carlsbac	d						
Title 18 U.S.C. Sec States any false, f	ction 1001 and Title 43 fictitious or fraudulent s	U.S.C. Section 1212, make it a statements or representations as	crime for any pe to any matter w	rson knowingly and thin its jurisdiction.	willfully to m	ake to any department or	agency o	f the United	

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