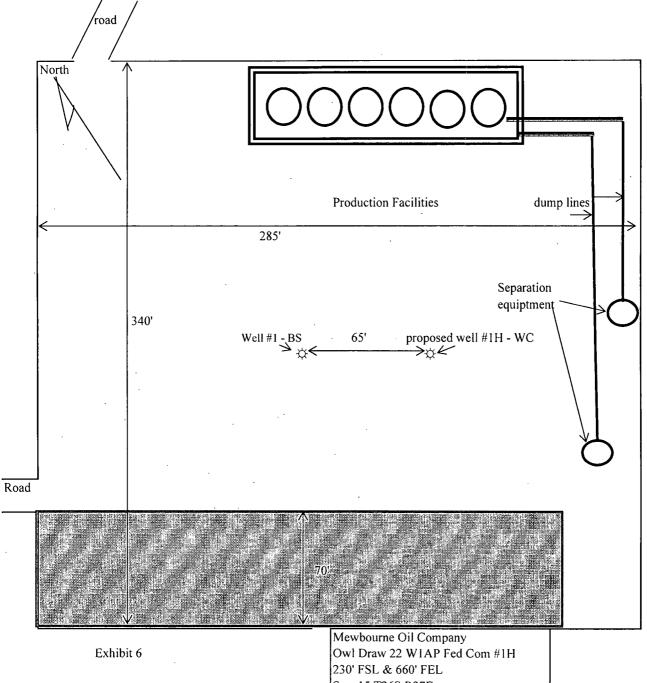
		OCD Artesia			
Form 3160-5 August 2007)		INTERIOR		FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010	
		· · ·	5.	5. Lease Serial No. NMNM114971	
		drill or to re-enter an	6.	6. If Indian, Allottee or Tribe Name	
SUBMIT IN TR	tions on reverse side.	7.	7. If Unit or CA/Agreement, Name and/or No. NMNM134271		
1. Type of Well ☐ Gas Well ☐ O	TION	8. Well Name and No. OWL DRAW 22/27 B2AP FED COM 1H HAN 9. API Well No. 30-015-41430-00-S1			
2. Name of Operator MEWBOURNE OIL COMPA	JACKIE LATHAN ewbourne.com			i0-S1	
3a. Address P O BOX 5270 HOBBS, NM 88241		3b. Phone No. (include area code) Ph: 575-393-5905		10. Field and Pool, or Exploratory HAY HOLLOW UNKNOWN	
4. Location of Well <i>(Footage, Sec., T., R., M., or Survey Descriptic</i>)	11. County or Parish, and State		and State
Sec 15 T26S R27E SESE 200FSL 600FEL 32.020689 N Lat, 104.101515 W Lon			EDDY COUNTY, NM		A NM
12. CHECK APP	ROPRIATE BOX(ES) TO) INDICATE NATURE OF	NOTICE, REP	ORT, OR OTHE	R DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent	Acidize	Deepen	Production	(Start/Resume)	U Water Shut-Off
Subsequent Report	□ Alter Casing	□ Fracture Treat	Reclamatic		Well Integrity
	Casing Repair	New Construction		Recomplete Ø Other Productio	
Final Abandonment Notice		Plug and Abandon	Temporarily Abandon Toduction Facility Changes Water Disposal		Changes
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