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|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| SUNDRY NOTICES AND REPORTS ON WELLS<br>Do not use this form for proposals to drill or to re-enter an<br>abandoned well. Use form 3160-3 (APD) for such proposals.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 6. If Indian, Allotte                                                                                                                                                                                                                                                                                                                                                                                                     | e or Tribe Name                                                                                                                                                                                                                              |                                                                                                                                                                        |  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | · ·                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                              |                                                                                                                                                                        |  |
| SUBMIT IN TRIPLICATE - Other instructions on page 2                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                           | 7. If Unit or CA/Ag<br>8910086550                                                                                                                                                                                                            | 7. If Unit or CA/Agreement, Name and/or No<br>8910086550                                                                                                               |  |
| 1. Type of Well<br>Oil Well 🛛 Gas Well 🔲 Oth                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | hor                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                           | 8. Well Name and N<br>BOGLE FLATS                                                                                                                                                                                                            |                                                                                                                                                                        |  |
| 2. Name of Operator<br>MEWBOURNE OIL COMPAN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Contact: J,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | ACKIE LATHAN                                                                                                                                                                                                                                                                                                                                                                                                              | 9. API Well No.                                                                                                                                                                                                                              |                                                                                                                                                                        |  |
| 3a. Address                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | ,                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | 3b. Phone No. (include area code)                                                                                                                                                                                                                                                                                                                                                                                         | 30-015-10577<br>10. Field and Pool                                                                                                                                                                                                           |                                                                                                                                                                        |  |
| P O BOX 5270<br>HOBBS, NM 88241                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Ph: 575-393-5905                                                                                                                                                                                                                                                                                                                                                                                                          | INDIAN BASI                                                                                                                                                                                                                                  | N-STRAWŃ                                                                                                                                                               |  |
| 4. Location of Well (Footage, Sec., T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | · · ·                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                           | 11. County or Paris                                                                                                                                                                                                                          | h, State                                                                                                                                                               |  |
| Sec 16 T22S R23E SENW 16                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | 50FNL 1980FWL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                           | EDDY COUN                                                                                                                                                                                                                                    | TY, NM                                                                                                                                                                 |  |
| 12. CHECK THE AF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | PPROPRIATE BOX(ES) T                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | O INDICATE NATURE O                                                                                                                                                                                                                                                                                                                                                                                                       | F NOTICE, REPORT, OR O                                                                                                                                                                                                                       | THER DATA                                                                                                                                                              |  |
| TYPE OF SUBMISSION                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | TYPE OF ACTION                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                              |                                                                                                                                                                        |  |
| Divise of Intent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ☐ Acidize                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Deepen                                                                                                                                                                                                                                                                                                                                                                                                                    | □ Production (Start/Resume)                                                                                                                                                                                                                  | U Water Shut-Of                                                                                                                                                        |  |
| Notice of Intent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Alter Casing                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | Hydraulic Fracturing                                                                                                                                                                                                                                                                                                                                                                                                      | Reclamation                                                                                                                                                                                                                                  | U Well Integrity                                                                                                                                                       |  |
| Subsequent Report                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Casing Repair                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | New Construction                                                                                                                                                                                                                                                                                                                                                                                                          | Recomplete                                                                                                                                                                                                                                   | ☑ Other<br>ShutIn Notice                                                                                                                                               |  |
| Final Abandonment Notice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Change Plans Convert to Injection                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | Plug and Abandon                                                                                                                                                                                                                                                                                                                                                                                                          | Temporarily Abandon Water Disposal                                                                                                                                                                                                           | Shutin Nonce                                                                                                                                                           |  |
| If the proposal is to deepen directional<br>Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | rk will be performed or provide th<br>operations. If the operation resul-<br>pandonment Notices must be filed<br>inal inspection.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco<br>only after all requirements, includi                                                                                                                                                                                                                                                                                                           | . Required subsequent reports must<br>inpletion in a new interval, a Form 3                                                                                                                                                                  | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once                                                                                       |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | rk will be performed or provide th<br>operations. If the operation resul-<br>bandonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco<br>only after all requirements, includi                                                                                                                                                                                                                                                                                                           | . Required subsequent reports must<br>impletion in a new interval, a Form 3<br>ng reclamation, have been complete                                                                                                                            | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has                                                             |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rk will be performed or provide th<br>operations. If the operation resul-<br>bandonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | e Bond No. on file with BLM/BIA<br>ts in a multiple completion or reco<br>only after all requirements, includi<br>work to be completed                                                                                                                                                                                                                                                                                    | . Required subsequent reports must<br>impletion in a new interval, a Form 3<br>ng reclamation, have been complete                                                                                                                            | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has                                                             |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rk will be performed or provide th<br>operations. If the operation resul-<br>bandonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco<br>only after all requirements, includi                                                                                                                                                                                                                                                                                                           | . Required subsequent reports must<br>impletion in a new interval, a Form 3<br>ng reclamation, have been complete                                                                                                                            | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has                                                             |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rk will be performed or provide th<br>operations. If the operation resul-<br>pandonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair<br>ride & NMB000919                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | e Bond No. on file with BLM/BIA<br>ts in a multiple completion or reco<br>only after all requirements, includi<br>work to be completed                                                                                                                                                                                                                                                                                    | Required subsequent reports must<br>mpletion in a new interval, a Form 3<br>ng reclamation, have been complete<br>NMOOL<br>ART<br>NMOCD                                                                                                      | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has<br>CONSERVATION<br>ESIA DISTRICT                            |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.<br>Bond on file: NM1693 nationw                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rk will be performed or provide th<br>operations. If the operation result<br>andonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair<br>ride & NMB000919<br>ride & NMB000919<br>ride & NMB000919<br>ride & State of the state of | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco<br>only after all requirements, includi<br>work to be completed<br>GC II/6///<br>Accepted for record - 1<br>8128 verified by the BLM Well<br>IE OIL COMPANY, sent to the                                                                                                                                                                          | Required subsequent reports must<br>mpletion in a new interval, a Form 3<br>ng reclamation, have been complete<br>NMOCD<br>NMOCD<br>F<br>Information System<br>Carlsbad                                                                      | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has<br>CONSERVATION<br>ESIA DISTRICT<br>OV 0 4 2019             |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.<br>Bond on file: NM1693 nationw                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | rk will be performed or provide th<br>operations. If the operation result<br>andonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair<br>ide & NMB000919<br>ride & NMB000919<br>true and correct.<br>Electronic Submission #48<br>For MEWBOURN<br>mitted to AFMSS for proces                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco<br>only after all requirements, includi<br>work to be completed<br>GC II/6/<br>Accepted for record - 1<br>8128 verified by the BLM Well<br>IE OIL COMPANY, sent to the<br>sing by PRISCILLA PEREZ or                                                                                                                                              | Required subsequent reports must<br>mpletion in a new interval, a Form 3<br>ng reclamation, have been complete<br>NMOCD<br>NMOCD<br>F<br>Information System<br>Carlsbad                                                                      | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has<br>CONSERVATION<br>ESIA DISTRICT<br>OV 0 4 2019             |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.<br>Bond on file: NM1693 nationw<br>ST_T_L                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | rk will be performed or provide th<br>operations. If the operation result<br>andonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair<br>ide & NMB000919<br>rule and correct.<br>Electronic Submission #48<br>For MEWBOURN<br>mitted to AFMSS for proces<br>ATHAN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco<br>only after all requirements, includi<br>work to be completed<br>GC II/6/<br>Accepted for record - 1<br>8128 verified by the BLM Well<br>IE OIL COMPANY, sent to the<br>sing by PRISCILLA PEREZ or                                                                                                                                              | Required subsequent reports must<br>mpletion in a new interval, a Form 3<br>ng reclamation, have been complete<br>NMOCD<br>Information System<br>Carlsbad<br>10/16/2019 (20PP0125SE)<br>RIZED REPRESENTATIVE                                 | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has<br>CONSERVATION<br>ESIA DISTRICT<br>OV 0 4 2019             |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.<br>Bond on file: NM1693 nationw<br>STTTLL ///o//2<br>14. I hereby certify that the foregoing is<br>Com<br>Name (Printed/Typed) JACKIE L/                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | rk will be performed or provide the<br>operations. If the operation result<br>andonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair<br>ride & NMB000919<br>ride & NMB000919<br>Electronic Submission #48<br>For MEWBOURN<br>mitted to AFMSS for proces<br>ATHAN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco<br>only after all requirements, includi<br>work to be completed<br><i>GC II/6</i><br><i>Accepted for record</i><br>8128 verified by the BLM Well<br>IE OIL COMPANY, sent to the<br>sing by PRISCILLA PEREZ or<br>Title AUTHON                                                                                                                     | Required subsequent reports must<br>mpletion in a new interval, a Form 3<br>ng reclamation, have been complete<br>MM OIL<br>ART<br>NMOCD<br>NMOCD<br>NI<br>Information System<br>Carlsbad<br>10/16/2019 (20PP0125SE)<br>RIZED REPRESENTATIVE | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has<br>CONSERVATION<br>ESIA DISTRICT<br>OV 0 4 2019             |  |
| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.<br>Bond on file: NM1693 nationw<br>Solution State | rk will be performed or provide the<br>operations. If the operation result<br>andonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair<br>ride & NMB000919<br>ride & NMB000919<br>Electronic Submission #48<br>For MEWBOURN<br>mitted to AFMSS for proces<br>ATHAN                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco-<br>only after all requirements, includi<br>work to be completed<br>GC II/IG<br>Accepted for record - I<br>8128 verified by the BLM Well<br>IE OIL COMPANY, sent to the<br>sing by PRISCILLA PEREZ or<br>Title AUTHOI<br>Date 10/15/20                                                                                                            | Required subsequent reports must<br>mpletion in a new interval, a Form 3<br>ng reclamation, have been complete<br>MM OIL<br>ART<br>NMOCD<br>NMOCD<br>NI<br>Information System<br>Carlsbad<br>10/16/2019 (20PP0125SE)<br>RIZED REPRESENTATIVE | tinent markers and zones.<br>be filed within 30 days<br>160-4 must be filed once<br>d and the operator has<br>CONSERVATION<br>ESIA DISTRICT<br>OV 0 4 2019             |  |
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| Attach the Bond under which the wor<br>following completion of the involved<br>testing has been completed. Final Ab<br>determined that the site is ready for fi<br>SWI for gas plant take away p<br>Q1 2020.<br>Bond on file: NM1693 nationw<br>Support take away p<br>G1 2020.<br>Bond on file: NM1693 nationw<br>Support take away p<br>Approved By/s/ Jona<br>Conditions of approval, if any, are attached<br>certify that the applicant holds legal or equ                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     | rk will be performed or provide the<br>operations. If the operation result<br>andonment Notices must be filed<br>inal inspection.<br>roblems. Estimated repair<br>ride & NMB000919<br>true and correct.<br>Electronic Submission #48<br>For MEWBOURN<br>initted to AFMSS for proces<br>ATHAN<br>Submission)<br>THIS SPACE FOR<br>thon Shepard<br>1. Approval of this notice does no<br>itable title to those rights in the su<br>ct operations thereon.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | e Bond No. on file with BLM/BIA<br>Its in a multiple completion or reco-<br>only after all requirements, includi<br>work to be completed<br>G C H/6//<br>G C H/6//<br>G C H/6//<br>G C H/6//<br>Well<br>B128 verified by the BLM Well<br>IE OIL COMPANY, sent to the<br>sing by PRISCILLA PEREZ or<br>Title AUTHON<br>Date 10/15/20<br>C FEDERAL OR STATE O<br>Title FE<br>Office GGO<br>ime for any person knowingly and | Required subsequent reports must<br>mpletion in a new interval, a Form 3<br>ng reclamation, have been complete<br>NMOCD NATIONAL<br>Information System<br>Carlsbad<br>10/16/2019 (20PP0125SE)<br>RIZED REPRESENTATIVE                        | be filed within 30 days<br>160-4 must be filed once<br>d and the operator has<br>CONSERVATION<br>ESIA DISTRICT<br>V 0 4 2019<br>RECEIVED<br>RECEIVED<br>QCT 2 2        |  |