

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFEB 04 2008  
OCD-ARTESIAFORM APPROVED  
OMB No 1004-0137  
Expires: March 31, 2007

## SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1 Type of Well  
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Mewbourne Oil Company 14744

3a. Address

P. O. Box 7698, Tyler, TX 75711 (903) 561-2900

3b. Phone No (include area code)

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1218' FSL &amp; 1820' FEL of Sec 8 T20S R29E

NM-01165

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No

NNNM104028

8. Well Name and No

Henry "8" Federal Com #1

9. API Well No

30-015-34927

10. Field and Pool, or Exploratory Area

Burton Flat; Atoka, East

11. County or Parish, State

Eddy Co., NM

## 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION                                   | TYPE OF ACTION                                |   |  |   |
|--|---|---|--|---|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report           | <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice    | <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input type="checkbox"/> Other Squeeze  |
|  | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | existing                                |
|  | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            | perforations                            |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Mewbourne would like to squeeze the existing Atoka perforations from 10,666-10,850' w/300 sx Class H + additives. Cement retainer to be set @ +/- 10,625'. Drillout retainer and cement. Prepare to test further zones in well. Squeeze will be tested after perforating new zone and prior to downhole commingling.

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Janet Burns

Title

Reg. Tech.

Signature

Date

1/25/08

APPROVED

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date JAN 29 2008

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

WESLEY W INGRAM

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Instructions on page 2)

**District I**

1625 N. French Dr., Hobbs, NM 88240

**District II**

1301 W. Grand Avenue, Artesia, NM 88210

**District III**

1000 Rio Brazos Rd., Aztec, NM 87410

**District IV**

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico

Energy, Minerals &amp; Natural Resources Department

**OIL CONSERVATION DIVISION**

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-102

Revised October 12, 2005

Submit to Appropriate District Office

State Lease - 4 Copies

Fee Lease - 3 Copies

☐ AMENDED REPORT**WELL LOCATION AND ACREAGE DEDICATION PLAT**

|                                     |  |   |  |                                    |                            |
|-------------------------------------|--|---|--|------------------------------------|----------------------------|
| 1 API Number<br><b>30-015-34927</b> |  | 2 Pool Code                                     |  | 3 Pool Name<br><b>Strawn (Gas)</b> |                            |
| 4 Property Code<br><b>35784</b>     |  | 5 Property Name<br><b>Henry 8 Federal Com</b>   |  |                                    | 6 Well Number<br><b>1</b>  |
| 7 OGRID No.<br><b>14744</b>         |  | 8 Operator Name<br><b>Mewbourne Oil Company</b> |  |                                    | 9 Elevation<br><b>3268</b> |

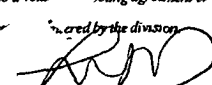
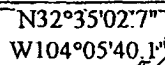
**10 Surface Location**

|                           |                     |                        |                     |         |                              |                                  |                              |                               |                       |
|---------------------------|---------------------|------------------------|---------------------|---------|------------------------------|----------------------------------|------------------------------|-------------------------------|-----------------------|
| UL or lot no.<br><b>O</b> | Section<br><b>8</b> | Township<br><b>20S</b> | Range<br><b>29E</b> | Lot Idn | Feet from the<br><b>1218</b> | North/South line<br><b>South</b> | Feet from the<br><b>1820</b> | East/West line<br><b>East</b> | County<br><b>Eddy</b> |
|---------------------------|---------------------|------------------------|---------------------|---------|------------------------------|----------------------------------|------------------------------|-------------------------------|-----------------------|

**11 Bottom Hole Location If Different From Surface**

|                                  |         |                    |       |                       |               |                  |               |                |        |
|----------------------------------|---------|--------------------|-------|-----------------------|---------------|------------------|---------------|----------------|--------|
| UL or lot no.                    | Section | Township           | Range | Lot Idn               | Feet from the | North/South line | Feet from the | East/West line | County |
| 12 Dedicated Acres<br><b>320</b> |         | 13 Joint or Infill |       | 14 Consolidation Code |               | 15 Order No.     |               |                |        |

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

|   |  |  |  |   |  |
|---|--|--|--|---|--|
| 16  |  |  |  | 17 <b>OPERATOR CERTIFICATION</b><br>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order.<br>hereby created by the division<br><br>Signature _____ Date <b>1/23/08</b><br>Printed Name <b>Janet Burns</b> |  |
| 18 <b>SURVEYOR CERTIFICATION</b><br>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.<br><b>07/20/066</b><br>Date of Survey _____<br>Signature and Seal of Professional Surveyor<br><b>Herschell Jones (REFER TO ORIGINAL PLAT)</b><br>7977<br>Certificate Number _____ |  |  |  | <br><b>NM Lease #01165</b>  |  |