

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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.*5. Lease Serial No.
NMNM117116

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.8. Well Name and No.
OWL DRAW 23 DM FED COM 2H9. API Well No.
30-015-4162910. Field and Pool, or Exploratory
BONE SPRING11. County or Parish, and State
EDDY COUNTY, NM1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
MEWBOURNE OIL COMPANY
Contact: JACKIE LATHAN
E-Mail: jlathan@mewbourne.com3a. Address
PO BOX 5270
HOBBS, NM 88241
3b. Phone No. (include area code)
Ph: 575-393-5905
Fx: 575-397-62524. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 14 T26S R27E SWSW 370FSL 1055FWL

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Well Spud
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recompleat 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 recompleat 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.)

12/01/13 Spud 17 1/2" hole. Ran 403' of 13 3/8" 48# H40 ST&C csg. Cemented with 450 sks Class C w/2% CaCl₂. Mixed @ 14.8 #/g w/1.34 yd. Plug down @ 11:00 AM 12/02/13. Test BOPE & Annular to 2000#. At 2:30 A.M. 12/04/13, tested csg to 1250# for 30 minutes, held OK. Circ 100 sks of cement to pit.

Chart & schematic attached.

Bonds on file: NM1693 nationwide & NMB000919

Accepted for record
WRD NMOC 1/3/2014RECEIVED
JAN 03 2014
NMOC ARTESIA

DEC 28 2013

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #228671 verified by the BLM Well Information System
For MEWBOURNE OIL COMPANY, sent to the Carlsbad
Committed to AFMSS for processing by KURT SIMMONS on 12/19/2013 ()

Name (Printed/Typed) JACKIE LATHAN

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 12/05/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

Date

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

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.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

9

MAN WELDING SERVICES, INC.

Company Man Welding Services, Inc. Date 12-1-83

Lease 147721 - 147722 - 147723 - 147724 - 147725 County OK/MA

Drilling Contractor Man Welding Services, Inc. Plug & Drill Pipe Size 2 1/2" ID

Accumulator Pressure 1500 Manifold Pressure 1500 Annular Pressure 1500

Accumulator Function Test - 00&G0#2

To Check - **USABLE FLUID IN THE NITROGEN BOTTLES** - (III-A-2 c i, or ii or iii)

- Make sure all rams and annular are open and if applicable HCR is closed.
- Ensure accumulator is pumped up to working pressure. (Shut off all pumps)
- 1. Open HCR Valve (If applicable)
- 2. Close annular
- 3. Close all pipe rams
- 4. Open one set of the pipe rams to simulate closing the blind ram
- 5. For 3 ram stacks, open the annular to achieve the 50+ % safety factor. (5M and greater systems)
- 6. Record remaining pressure 1500 psi. Test fails if pressure is lower than required.
- a. (950 psi for a 1500 psi system) b. (1200 psi for a 2000 & 3000 psi system)
- 7. If annular is closed, open it at this time and close HCR

To Check - **PRECHARGE ON BOTTLES OR SPHERICAL** (III-A-2 d)

- Start with manifold pressure at or above maximum acceptable pre-charge pressure:
 - a. (800 psi for a 1500 psi system) b. (1100 psi for 2000 and 3000 psi system)
- 1. Open bleed line to the tank slowly (gauge needle will drop at the lowest bottle pressure)
- 2. Close bleed line. Barely bump electric pump and see what pressure the needle jumps up to
- 3. Record pressure drop 250 psi. Test fails if pressure drops below minimum.
- Minimum: a. (700 psi for a 1500 psi system) b. (900 psi for a 2000 & 3000 psi system)

To Check - **THE CAPACITY OF THE ACCUMULATOR PUMPS** (III-A-2 f)

- Isolate the accumulator bottles or spherical from the pumps & manifold
- Open the bleed off valve to the tank. (manifold psi should go to 0 psi) close bleed valve
- 1. Open the HCR valves (if applicable)
- 2. Close annular
- 3. With pumps only, time how long it takes to regain the required manifold pressure.
- 4. Record elapsed time 5 minutes. Test fails if it takes over 2 minutes.
- a. (950 psi for a 1500 psi system) b. (1200 psi for a 2000 & 3000 psi system)

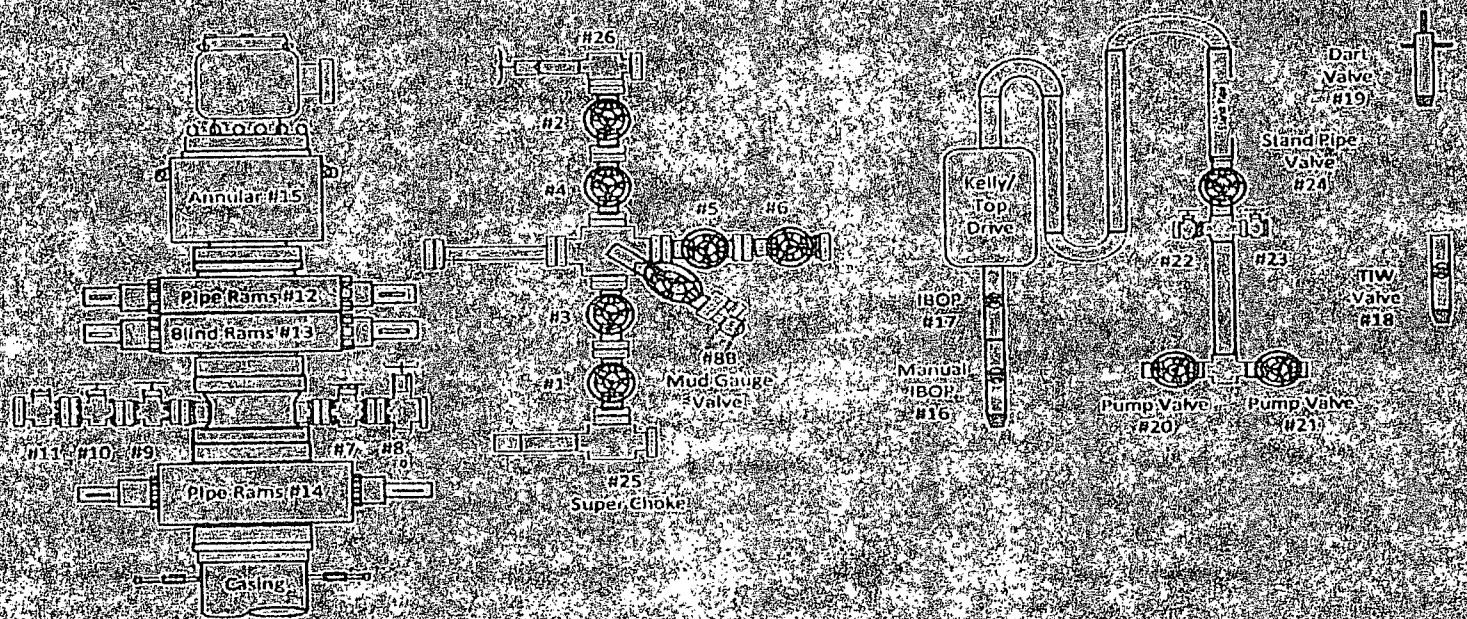


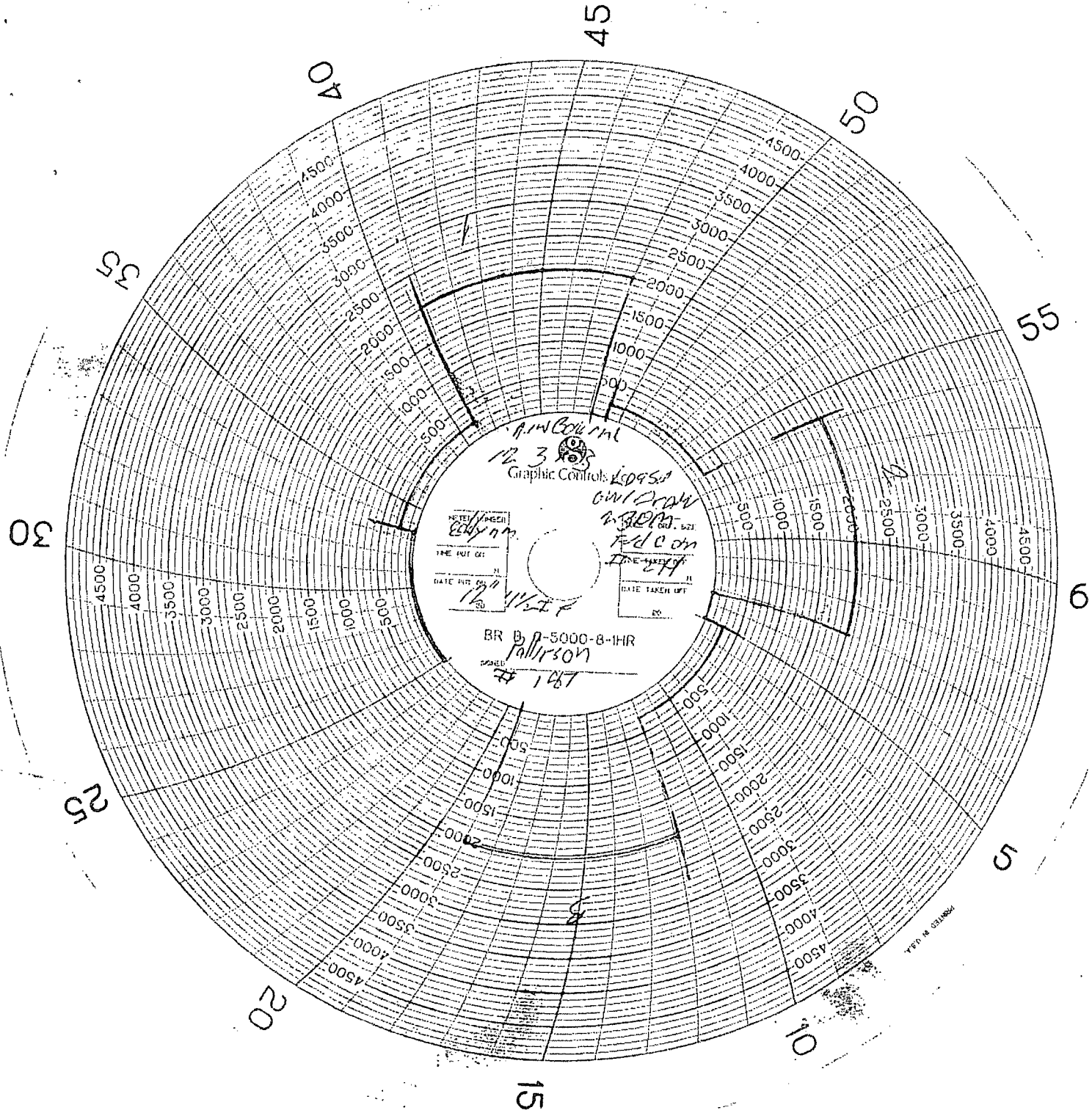
Pg. 1 of 2

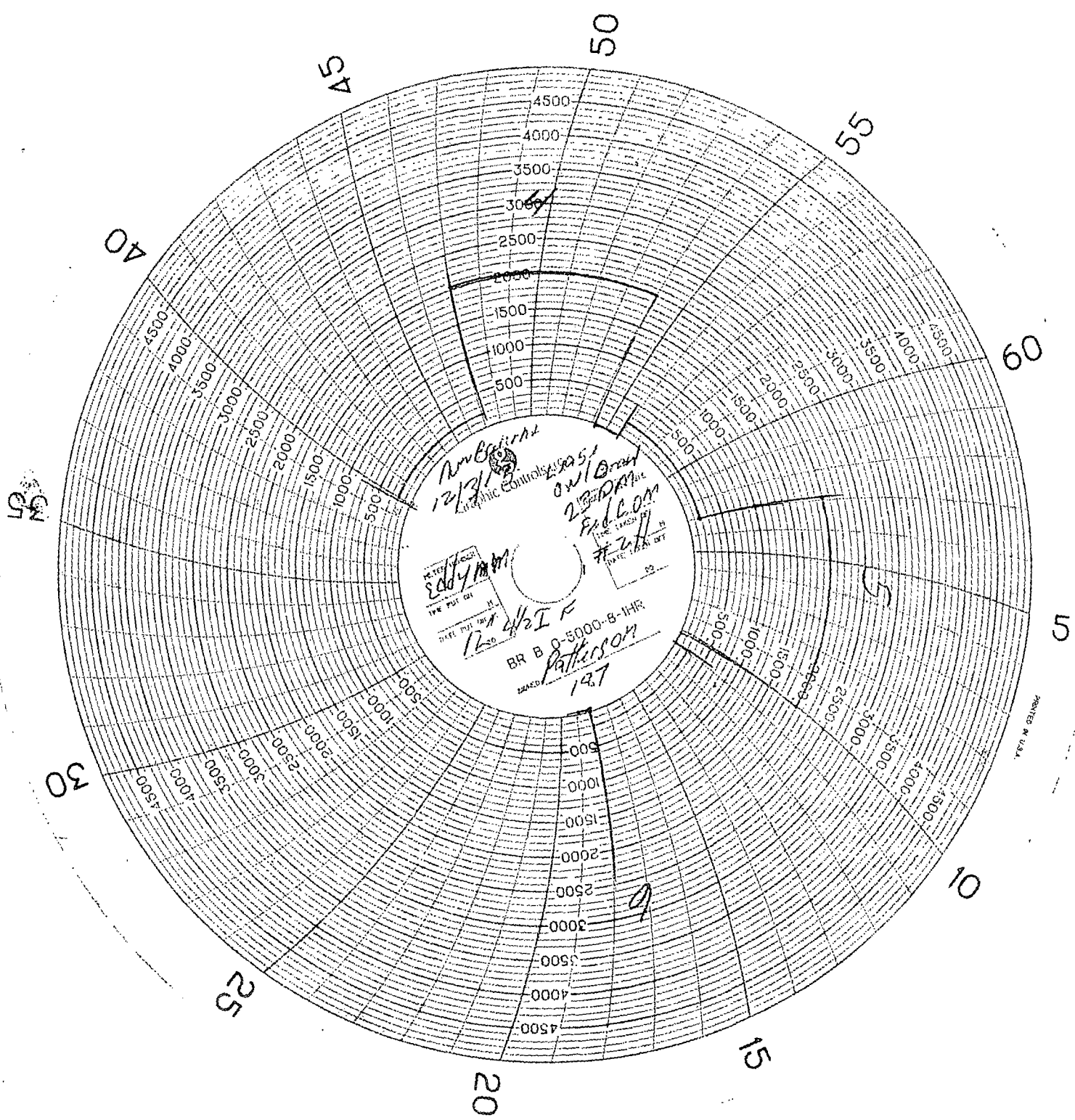
Plug Size & Type: 620 M¹⁰ Drill Pipe Size: 4 1/2 IF Tester: T. J. DeWitt

Required BOP: _____ Installed BOP: _____

Appropriate Casing Valve Must Be Open During BOP Test

[illegible]





NORBITAL
12/31/55
Automatic Controls
0.1/0.01
2.3/0.01
Fid. 6.01
#264
DATE 12/31/55
BY
BR B 0-5000-8-1HR
Patterson
14.7

MADE IN U.S.A.

