

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD

FORM 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.

Artesia

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMMNM132942
2. Name of Operator MEWBOURNE OIL COMPANY		6. If Indian, Allottee or Tribe Name
Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address P O BOX 5270 HOBBS, NM 88241	3b. Phone No. (include area code) Ph: 575-393-5905	8. Well Name and No. FNR FED COM 17 20 B2JO 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T23S R30E NWSE 2630FSL 1655FEL		9. API Well No. 30-015-43239-00-X1
		10. Field and Pool, or Exploratory FORTY NINER RIDGE
		11. County or Parish, and State EDDY COUNTY, NM

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 Well Spud
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 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.)

8/23/2015 Spud 17 1/2" hole. TD hole at 425'. Ran 425' of 13 3/8" 54.5# J55 ST&C Csg. Cemented with 180 sks Class C w/ additives. Mixed @ 14.4#/g w/1.61 yd. Tail w/ 450 sks Class C 2% CaCl2. Mixed @ 14.8#/g w/1.34 yd. Plug down @ 8:30 p.m. 8/23/2015. Did not circ cmt. Ran temp survey indicating TOC @ 100'. Ran 1" pipe. Tag @ 100'. Ran 1" pipe in 2 stages with 75 sks Class C w/2% CaCl2. Mixed @ 14.8#/g w/ 1.34 yd. Circ 17 sks of cmt to the pit. WOC. At 7:00 a.m. Tested wellhead to 800#. NU & tested BOPE to 3000# & Annular to 1500#. 8/25/15, tested csg to 1250# for 30 min, held OK. Drilled out w/ 12 1/4" bit.

Verbal given for 2"?

Charts and schematic attached.

Bond on file: NM1693 nationwide & NMB000919

Accepted for record

WJ NMOCD 11/1/15

NM OIL CONSERVATION
ARTESIA DISTRICT

OCT 30 2015

RECEIVED

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

Electronic Submission #314975 verified by the BLM Well Information System
For MEWBOURNE OIL COMPANY, sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/23/2015 (16JAS0643SE)

Name (Printed/Typed) JACKIE LATHAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 09/01/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE 26/2015

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.

ACCEPTED FOR RECORD

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE