

UNITED STATES **Carlsbad Field Office**
DEPARTMENT OF THE INTERIOR **OCD Artesia**
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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. NMNM107374
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. DELAWARE RANCH 11 14 W1AP F C 1H
9. API Well No. 30-015-44071-00-X1
10. Field and Pool or Exploratory Area PURPLE SAGE-WOLFCAMP (GAS)
11. County or Parish, State EDDY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator MEWBOURNE OIL COMPANY	Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com
3a. Address P O BOX 5270 HOBBS, NM 88241	3b. Phone No. (include area code) Ph: 575-393-5905	

4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 11 T26S R28E NENE 185FNL 425FEL

12. CHECK THE 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Hydraulic Fracturing
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Well Spud

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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

05/19/2019
Spud 17 1/2" hole. TD 17 1/2" hole @ 700'. Ran 685' of 13 3/8" 54.5# J55 ST&C Csg. Cemented with 375 sks Class C w/additives. Mixed @ 13.5#/g w/1.77 yd. Tail w/200 sks Class C w/0.5% CaCl2. Mixed @ 14.8#/g w/1.34 yd. Dislaced w/98 bbls FW. Plug down @ 5:30 AM 05/20/19. Circ 171 sks of cmt to the pit. Tested BOPE w/5000# & Annular to 3500#. At 7:00 A.M. 05/21/19, tested csg to 1500# for 30 mins, held OK. FIT test to 10.5 PPG EMW. Drilled out with 12 1/4" bit.

Copy of chart & schematic attached.

RECEIVED

JUL 23 2019

GC 7/24/19
Accepted for record NMOCD

DISTRICT II-ARTESIA O.C.D.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #468689 verified by the BLM Well Information System For MEWBOURNE OIL COMPANY, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 06/13/2019 (19PP2398SE)	
Name (Printed/Typed) JACKIE LATHAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 06/12/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title Accepted for Record	Date JUN 18 2019
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 Jonathon Shepard Carlsbad Field 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.

(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

MAN WELDING SERVICES, INC

Company MEMBOURNE Date 5.20.19

Lease ~~DELEWEE~~ RANCH 11/14 WJAP FED Conn IH County Eddy

Drilling Contractor PATTERSON 217 Plug & Drill Pipe Size 4 1/2 IF - XT.39

Accumulator Pressure: 3000 Manifold Pressure: 1500 Annular Pressure: 1000

Accumulator Function Test - OO&GO#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 1250 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.

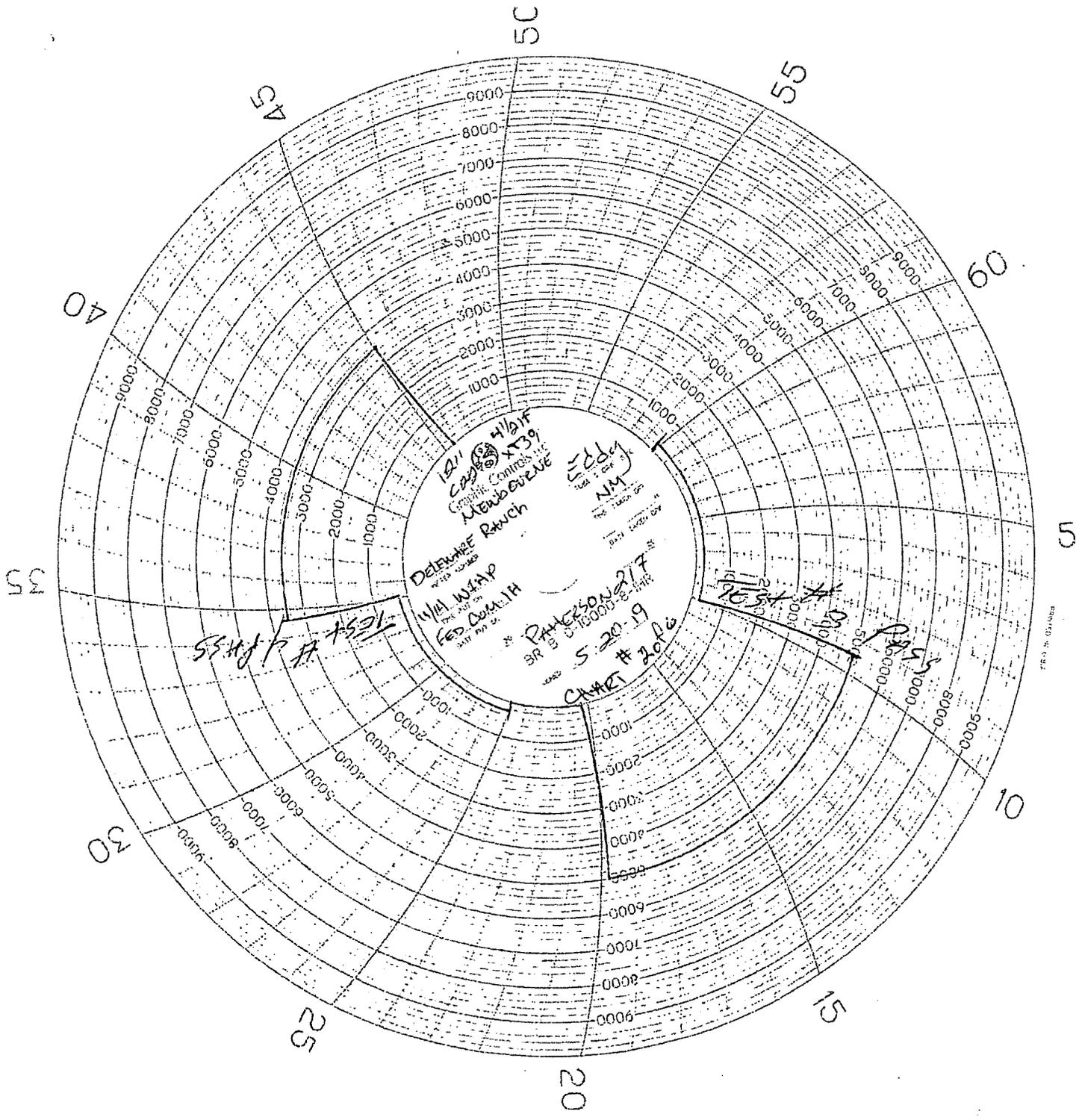
To Check - PRECHARGE ON BOTTLES OR SPHERICAL (III.A.2.d.)

- 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 950 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.)

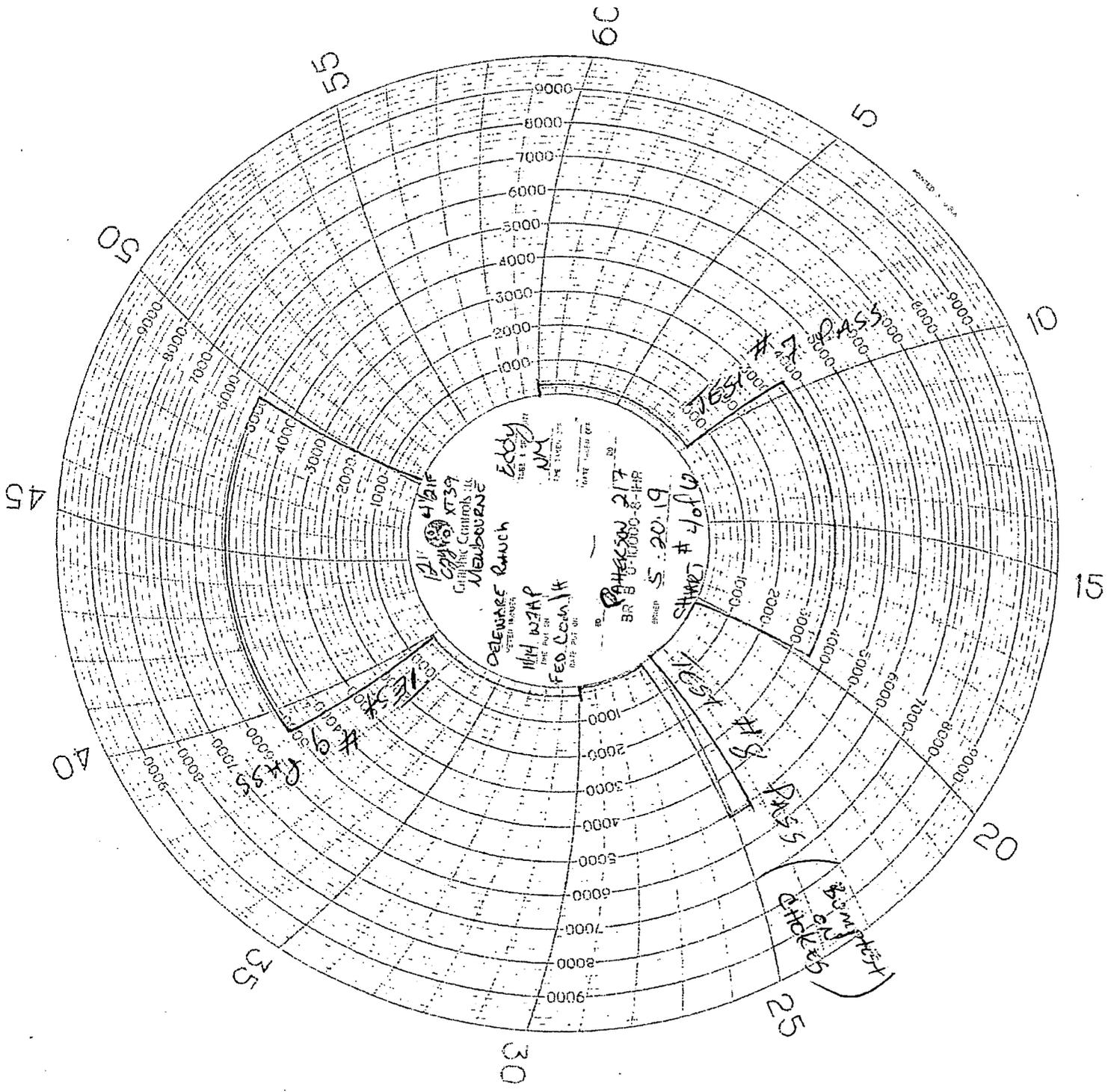
- Isolate the accumulator bottles or spherical from the pumps & manifold.
- Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
 - 1. Open the HCR valve, {if applicable}
 - 2. Close annular
 - 3. With pumps only, time how long it takes to regain the required manifold pressure.
 - 4. Record elapsed time min 36sec 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}



1211 4161F
 02/19/19
 FEDERAL CONTROL
 MEMORANDUM
 DELRWAPE Ranch
 WMA WMAF
 PATRICKSON
 SIR 20-19
 CHART # 20A6
 NIM

55
 1000
 2000
 3000
 4000
 5000
 6000
 7000
 8000
 9000

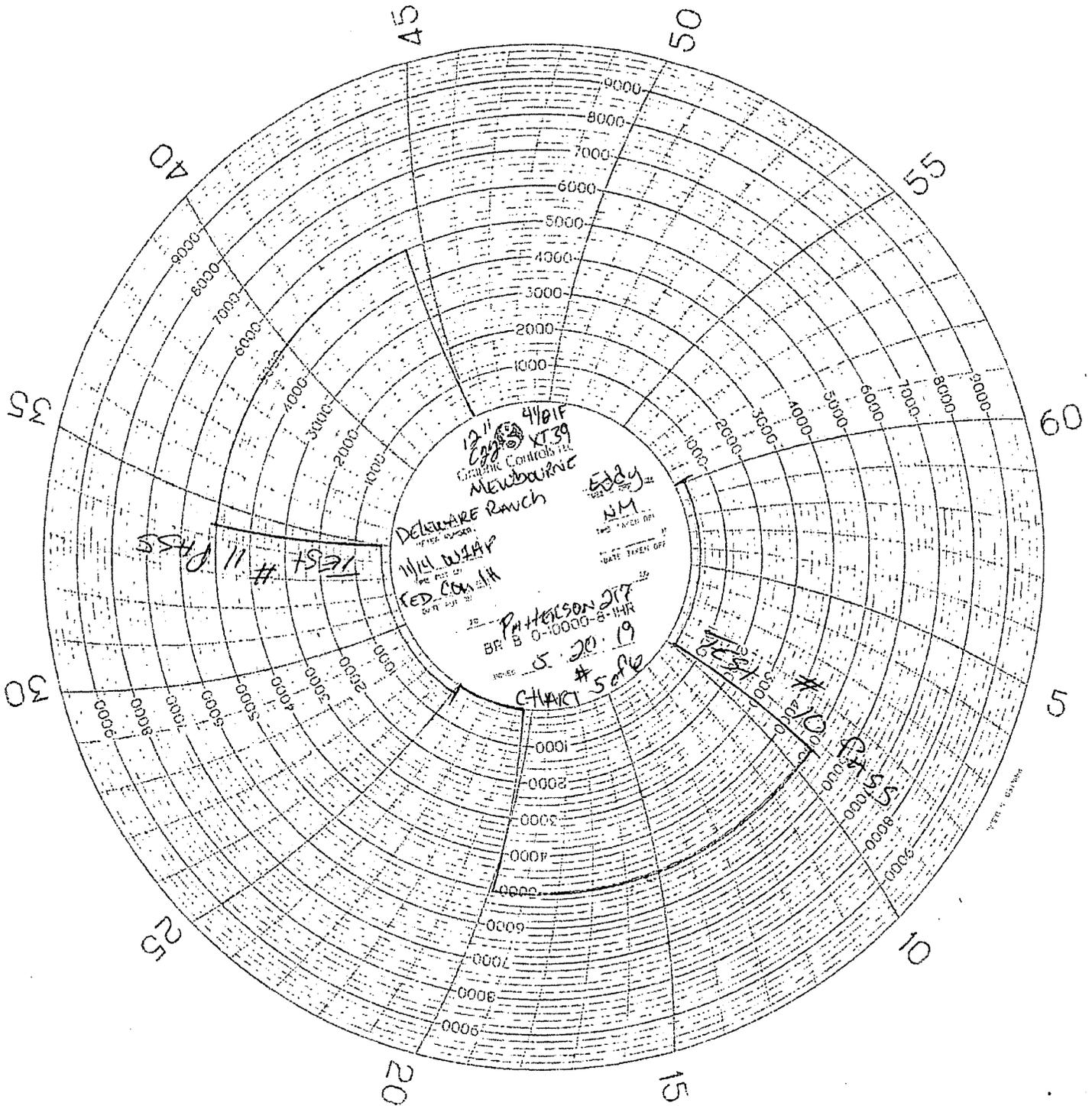
1000
 2000
 3000
 4000
 5000
 6000
 7000
 8000
 9000




Graphic Controls, Inc.
 MEDBURNE
 DELEWARE RANCH
 11/14 WZAP
 THE PLOT ON
 FED. COM. #

Eddy
 MAG # 435
 MAG # 450
 MAG # 475
 MAG # 490
 MAG # 505
 MAG # 520
 MAG # 535
 MAG # 550
 MAG # 565
 MAG # 580
 MAG # 595
 MAG # 610
 MAG # 625
 MAG # 640
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 MAG # 730
 MAG # 745
 MAG # 760
 MAG # 775
 MAG # 790
 MAG # 805
 MAG # 820
 MAG # 835
 MAG # 850
 MAG # 865
 MAG # 880
 MAG # 895
 MAG # 910
 MAG # 925
 MAG # 940
 MAG # 955
 MAG # 970
 MAG # 985
 MAG # 1000

Hatched & unshaded areas



TYPE 1-51-100

