

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTN.M. DIV-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2004

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

5. Lease Serial No.
NM-04825

1a. Type of Well ☐ Oil Well ☒ Gas Well ☐ Dry Other
b. Type of Completion: ☐ New Well ☐ Work Over ☐ Deepen ☒ Plug Back ☐ Diff. Resvr.
Other _____

2. Name of Operator

Mewbourne Oil Company 14744

3. Address

PO Box 5270 Hobbs, NM 88240

3a. Phone No. (include area code)

505-393-5905

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

At surface 885' FSL & 1425' FWL, Unit Letter N

At top prod. interval reported below Same

At total depth Same

RECEIVED

JAN 27 2004

OCD-ARTESIA

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No.

Freedom 31 Federal Com #2

9. API Well No.

30-015-32794

10. Field and Pool, or Exploratory

Scanlon Strawn

11. Sec., T., R., M., on Block and Survey
or Area

Sec 31-T20S-R29E

12. County or Parish

Eddy

13. State

NM

17. Elevations (DF, RKB, RT, GL)*

3225

14. Date Spudded

05/29/03

15. Date T.D. Reached

07/04/03

16. Date Completed

☐ D&A☒ Ready to Prod.18. Total Depth: MD 11980'
TVD19. Plug Back T.D.: MD 11300'
TVD20. Depth Bridge Plug Set: MD NA
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)

NA

22. Was well cored? ☒ No ☐ Yes (Submit analysis)
Was DST run? ☒ No ☐ Yes (Submit report)
Directional Survey? ☒ No ☐ Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2 7/8	10620	10620'						

25. Producing Intervals

Formation	TOP	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Scanlon Strawn	10714	10720	6	0.24	13	open
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, Etc.

Depth Interval	Amount and Type of Material
10714'-10720'	Natural

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
12/19/03	12/24/03	24	→	20	1690	2	58.8	0.624	Producing
Choke Size	Tbg. Press. Flwg. SI	Csg. Press	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	
10/64	1690	0	→	20	1690	2	84500	Producing	

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Call Press	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	
			→						

(See instructions and spaces for additional data on next page)

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg Press Flwg. SI	Csg. Press	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg Press Flwg. SI	Csg. Press	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas: Oil Ratio	Well Status	

29. Disposition of Gas (Sold used for fuel, vented, etc.)

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
Delaware	3222				
Bone Spring	5711				
Wolfcamp	9180				
Strawn	10365				
Atoka	10824				
Morrow	11370				
Barnett	11822				
TD	10980				

32. Additional remarks (include plugging procedure):

33. Circle enclosed attachments:

- 1 Electrical/Mechanical Logs (1 full set req'd.) 2 Geologic Report 3 DST Report 4 Directional Survey
 5 Sundry Notice for plugging and cement verification 6 Core Analysis ⑦ Other: C104 / C102 / 3160-5

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) NM Young Title Hobbs District MangerSignature NM Young by Kristi Green Date 01/16/04

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.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTOil Cons.
N.M. Div-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210FORM APPROVED
OMB No. 1004-0135
Expires: January 31, 2004**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

PO Box 5270 Hobbs, NM 88240

3b. Phone No. (include area code)

505-393-5905

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

885' FSL & 1425' FEL Sec 31-T20S-R29E

5. Lease Serial No.

NM-04825

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

Freedom 31 Federal Com #2

9. API Well No.

30-015-32794

10. Field and Pool, or Exploratory Area

Scanlon Morrow

11. County or Parish, 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 <u>Perforate Strawn</u>
	<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	

3. 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 recompleate 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 recompleation 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.)

12/17/03...MI wireline and tag plug at 11300'. (Morrow @ 11403'-11543')

12/18/03...Perforated Scanlon Strawn at 10714'-10720' with 2 SPF and 13 holes. PWOL.

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

Name (Printed/Typed)

NM Young

Title Hobbs District Manager

Signature

Date 01/16/04

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature)

Name
(Printed/Typed)

Title

Office

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.

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.

(Continued on next page)

DISTRICT II
811 South First, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV
2040 South Pacheco, Santa Fe, NM 87505

OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

Instruction on back
Submit to Appropriate District Office

State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code	Pool Name
30-015-32794		Scanlon Strawn
Property Code	Property Name	Well Number
	FREEDOM "31" FEDERAL COM.	2
OGRID No.	Operator Name	Elevation
14744	MEWBOURNE OIL COMPANY	3224

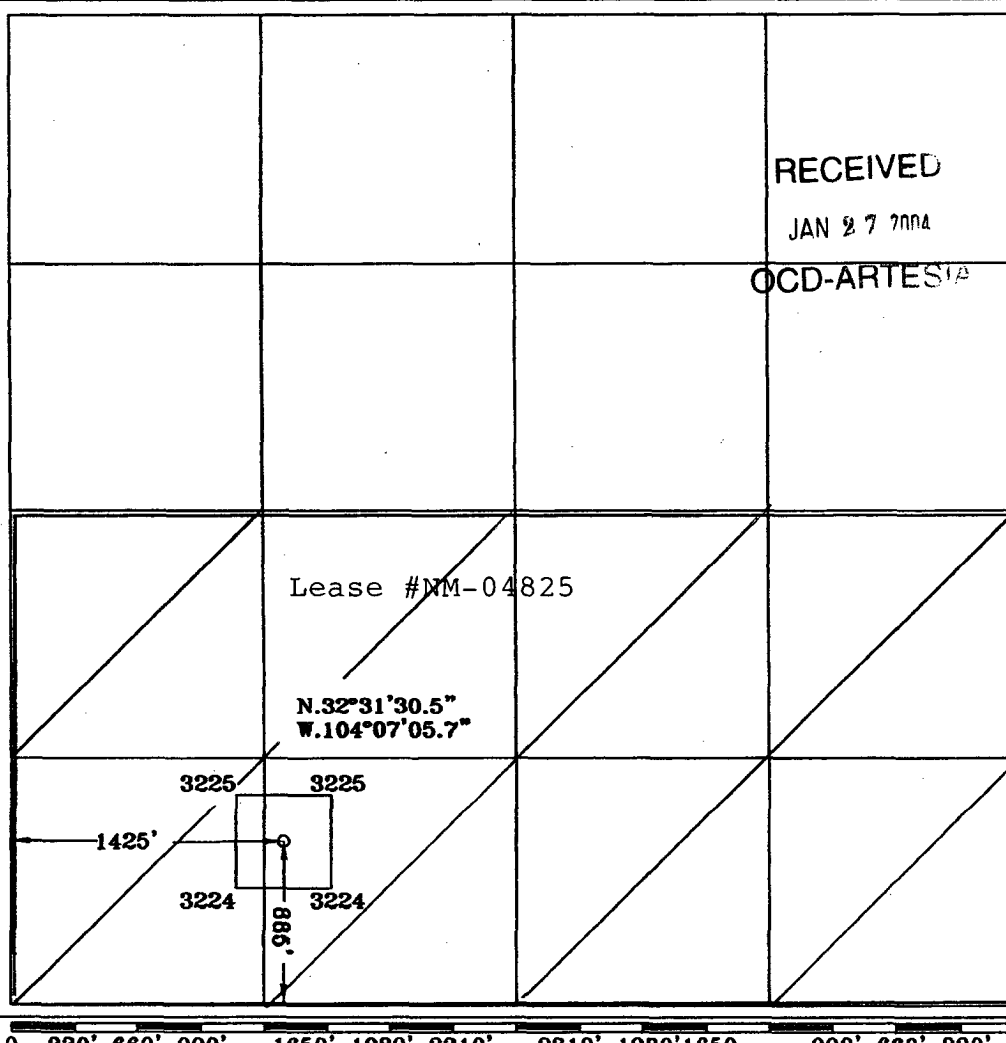
Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	31	20S	29E		885	SOUTH	1425	WEST	EDDY

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
Dedicated Acres	Joint or Infill	Consolidation Code		Order No.					
320									

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

	RECEIVED JAN 27 2004 OCD-ARTESIA
	OPERATOR CERTIFICATION <i>I hereby certify the the information contained herein is true and complete to the best of my knowledge and belief.</i> Signature: <i>NM Young</i> Printed Name: NM Young Title: Hobbs Manager Date: 01/16/04
	SURVEYOR CERTIFICATION <i>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.</i> Date Surveyed: 3/31/2003 Signature & Seal of Professional Surveyor: <i>Herschel L. Jones</i> Certificate No. Herschel L. Jones RLS 3640 FREEDOM 31-2 GENERAL SURVEYING COMPANY
	0 330' 660' 990' 1650' 1980' 2310' 2310' 1980' 1650' 990' 660' 330' 0'