Form 3160-5. (September 2021)

UNITED STATES DEPARTMENT OF THE INTERIOR OCD ARTESIA BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No 1004-0135 Expires January 31, 2004 RM

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 RECEIVED

NMNM-0209083 RECEIVED

6. If Indian, Allottee or Tribe Name

JUN - 1 2010

					1 2010
SUBMIT IN TR	RIPLICATE - Other instru	ctions on rever	se side	7. If Unit or CA	Agreement Name and/or No ARTES
1. Type of Well		- Y-			
Oil Well Gas Well Other				8. Well Name and No.	
2. Name of Operator			Burton 4 Federal #3H		
Mewbourne Oil Company 14 3a. Address	3b. Phone No. (include area code)		9. API Well No. 30-015-37816		
		, , , , , , , , , , , , , , , , , , ,		10. Field and Pool, or Exploratory Area	
PO Box 5270 Hobbs, NM 88 1. Location of Well (Footage, Sec.,	575-393-5905		Parkway Bone Spring 49622		
810' FNL & 200' FEL Sec 4			11. County or Pa	rish, State	
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NAT	URE OF NOTICE, R		HER DATA
TYPE OF SUBMISSION		1	TYPE OF ACTION		
✓ Notice of Intent ☐ Subsequent Report	Acidize Alter Casing Casing Repair	Deepen Fracture Treat New Construction	Production (Start Reclamation Recomplete		Water Shut-Off Well Integrity Other Change Casing
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abandon Plug Back	Temporarily Aba	indon	Design
following completion of the investing has been completed. Fin determined that the site is ready Mewbourne Oil Company has 36# J55 csg to be set at 3300'. If you have any questions pleas	received an approved APD for the second seco	esults in a multiple coi iled only after all requ he above captioned	npletion or recompletion in inferments, including reclar when the second	n a new interval, a F nation, have been c	Form 3160-4 shall be filed once ompleted, and the operator has
14 1 hereby certify that the foregoin Name (PrintedlTyped)	g is true and correct	, Title			
ackie Lathan		11tie H	obbs Regulatory		
Signature acc	i Lathan	Date 0	5/19/10		
	THIS SPACE FO		STATE OFFICE USE	Att	MUV III
Approved by (Signature)	. 		Name Printed/Typed)	Title MAY	2 0 2010
Conditions of approval, if any, are certify that the applicant holds lega which would entitle the applicant to c	goes not warrant or p	Office		Date TV VV INGRAM	
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudule	le 43 U.S.C. Section 1212, make it nt statements or representations as to	a crime for any person o any matter within its	n knowingly and willfully t jurisdiction.	d make poganyzdena	etment pragency of the United