Form 3160-5 (August 2007)

## UNITED STATES DEPARTMENT OF THE INTERIOR

HOBBS OCD

FORM APPROVED OMB No 1004-0137 Expires, July 31, 2010

BUREAU OF LAND MANAGEMENT				5. Lease Serial No	5. Lease Serial No		
SUNDRY NOTICES AND REPORTS ON WELLS EP 2 9 2011  Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				NM5	NM59044		
				6. If Indian, Allottee or Tril	oe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2 RECEIVED				7 If Unit or CA/Agreemen	t, Name and/or No		
1. Type of Well			page 2 state at the				
Oil Well Gas Well Other				8 Well Name and No			
2 Name of Operator				<del></del>	<del>-</del>   /		
Mewbourne Oil Co				QPQAS Unit #11  9. API Well No			
3a Address 3b Phone No (include area code)				<del></del>	30-025-29179		
PO Box 5270, Hobbs, NM 88241 575-393-5905				10 Field and Pool, or Explo	10 Field and Pool, or Exploratory Area		
4 Location of Well (Footage, Sec.	Querecho Pla						
400' FSL & 660' FEL	11 County or Parish, State						
Sec. 21, T-18-S, R-32-E				Lea Co	. NM		
12. CHECK	APPROPRIATE BOX(I	ES) TO INDICATE NA	TURE OF NOTICE,	REPORT, OR OTHER DA	TA		
TYPE OF SUBMISSION							
_	Acidize	Deepen	Production (Start/Re	sume) Water Shut-Off	· · · · · · · · · · · · · · · · · · ·		
Notice of Intent	Alter Casing	Fracture Treat	Reclamantion				
Subsequent Report	Casing Repair	New Construction		Well Integrity			
ya ouosequent report	Change Plans	<u></u>	Recomplete	Other			
Final Abandonment Notice	I—	lug and Abandon	Temporarily Abando	n			
13 Describe Proposed or Complet If the proposal is to deepen d	Convert to Injection	Plug Back	Water Disposal				
08/29/11 Tagged plug @ equipment. Cleaned loca 09/01/11 Moved in welde Cut off anchors. Cleaned	er and backhoe. Dug				_		
Surface restoration is completed.  RECLAMATION DUE 2-28-12				ACCEPTED FO	CCEPTED FOR RECORD		
				SEP 1 8	201		
				OLI IO	2011		
				1 am			
				BURRAU OF LAND N	ANNACEMENT		
				CARLSBAD FIEL	D OFFICE		
4. I hereby certify that the foregoing Name (Printed/Typed)	is true and correct.)			CANESDAD FILL	DOTTIOL		
Name (Frinew Typed)	1	Title	Prod Super				
ignature W	7(	Date	alalu				
	THIS SPACE	FOR FEDERAL O	R STATE OFFICE	USE			
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pproved by onditions of approval, if any, are attace applicant holds legal or equivable the oplicant to conduct operations thereof	to those entits in the subject	s not warrant or certify that case which would entitle the	Title Office	Date			
itle 18 U.S.C. Section 1001 and Title 4 ates any false, fictitious or fraudulent instructions on page 2)	3 U.S.C. Section 1212, make it statements or representations as	a crime for any person knowir to any matter within its jurisd	ngly and willfully to make to cition.	any department or agency of the U	Inited		
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