

District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 S. First St., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources

HOBBS OCD  
SEP 03 2015

Form C-104  
Revised August 1, 2011

Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Submit one copy to appropriate District Office

AMENDED REPORT

RECEIVED

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address Mewbourne Oil Company PO Box 5270 Hobbs, NM 88241		<sup>2</sup> OGRID Number 14744
		<sup>3</sup> Reason for Filing Code/ Effective Date New Well / 08/25/15
<sup>4</sup> API Number 30 - 025 - 42437	<sup>5</sup> Pool Name Red Hills; Upper Bone Spring Shale	<sup>6</sup> Pool Code 97900
<sup>7</sup> Property Code 314191	<sup>8</sup> Property Name Salado Draw 9 A3CN Fed Com	<sup>9</sup> Well Number 1H

**II. <sup>10</sup> Surface Location**

Ul or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South Line	Feet from the	East/West line	County
C	9	26S	33E		305	North	2355	West	Lea

**<sup>11</sup> Bottom Hole Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	9	26S	33E		337	South	2149	West	Lea

<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code Flowing	<sup>14</sup> Gas Connection Date 08/25/15	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date
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**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
35246	Shell Trading US Co. PO Box 4604 Houston, TX 77210	O
034951	Regency Energy 301 Commerce St Ft. Worth, TX 76102	G

**IV. Well Completion Data**

We are asking for an exemption from tubing at this time.

<sup>21</sup> Spud Date 03/22/15	<sup>22</sup> Ready Date 08/25/15	<sup>23</sup> TD 14170' MD	<sup>24</sup> PBTB 14158' MD	<sup>25</sup> Perforations 10100' - 14153'	<sup>26</sup> DHC, MC NA
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17 1/2"	13 3/4"	985'	850		
12 1/4"	9 5/8"	4950'	1400		
6 1/2"	5 1/2"	14158'	1500		

**V. Well Test Data**

<sup>31</sup> Date New Oil 08/25/15	<sup>32</sup> Gas Delivery Date 08/25/15	<sup>33</sup> Test Date 8/26/15	<sup>34</sup> Test Length 24 hrs	<sup>35</sup> Tbg. Pressure NA	<sup>36</sup> Csg. Pressure 160
<sup>37</sup> Choke Size 64/64	<sup>38</sup> Oil 319	<sup>39</sup> Water 473	<sup>40</sup> Gas 682	<sup>41</sup> Test Method Production	

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Jackie Lathan*  
Printed name: Jackie Lathan  
Title: Regulatory  
E-mail Address: jlathan@mewbourne.com  
Date: 09/01/2015 Phone: 575-393-5905

OIL CONSERVATION DIVISION  
Approved by: *[Signature]*  
Title: Petroleum Engineer  
Approval Date: 10/01/15

recomp \_\_\_\_\_ Add New Well \_\_\_\_\_  
Cancel Well \_\_\_\_\_ Create Pool \_\_\_\_\_  
E-PERMITTING -- New Well \_\_\_\_\_  
Comp *PA* P&A \_\_\_\_\_ TA \_\_\_\_\_  
CSNG *PA* Loc Chng \_\_\_\_\_  
ReComp \_\_\_\_\_ Add New Well \_\_\_\_\_

OCT 07 2015

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.*

<b>SUBMIT IN TRIPLICATE - Other instructions on reverse side.</b>		5. Lease Serial No. NMNM0127A
		6. If Indian, Allottee or Tribe Name
		7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. SALADO DRAW 9 A3CN FED COM 1H	
2. Name of Operator MEWBOURNE OIL COMPANY	Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com	9. API Well No. 30-025-42437
3a. Address PO BOX 5270 HOBBS, NM 88241	3b. Phone No. (include area code) Ph: 575-393-5905	10. Field and Pool, or Exploratory BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 9 T26S R33E NENW 305FNL 2355FWL		11. County or Parish, and State LEA 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 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.)

03/22/15 Spud 17 1/2" hole. TD hole @ 985'. Ran 985' of 13 3/8" 48# H40 ST&C csg. Cemented with 650 sks HalCem-C w/additives. Mixed @ 13.5 #/g w/1.76 yd. Tail w/200 sks HalCem-C w/1% CaCl2. Mixed @ 14.8 #/g w/1.34 yd. Plug down @ 11:00 PM 03/23/15. Circ 99 sks of cmt to the pit. At 8:00 P.M. 03/24/15, tested csg & BOPE to 1250# for 30 mins, held OK. WOC. Drilled out with 12 1/4" bit.

Chart & Schematic Attached.

Bond on file: NM1693 nationwide & NMB000919

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #296418 verified by the BLM Well Information System For MEWBOURNE OIL COMPANY, sent to the Hobbs</b>	
Name (Printed/Typed) JACKIE LATHAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 03/27/2015

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

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 (8 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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

26312

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.*

5. Lease Serial No.  
NMNM0127A

6. If Indian, Allottee or Tribe Name

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

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

8. Well Name and No.  
SALADO DRAW 9 A3CN FED COM 1H

9. API Well No.  
30-025-42437

10. Field and Pool, or Exploratory  
BONE SPRING

11. County or Parish, and State  
LEA COUNTY, NM

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
MEWBOURNE OIL COMPANY

Contact: JACKIE LATHAN  
E-Mail: jlathan@mewbourne.com

3a. Address  
PO 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 9 T26S R33E NENW 305FNL 2355FWL

**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 Drilling Operations
	<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.)

03/28/15 TD 12 1/4" hole @ 4950'. Ran 4950' of 9 5/8" 40# N80 LT&C csg. Cemented with 1200 sks EconoCem-HLC w/additives. Mixed @ 12.5 #/g w/2.12 yd. Tail w/200 sks Class C w/additives. Mixed @ 14.8 #/g w/1.33 yd. Plug down @ 7:00 AM 03/29/15. Circ 185 sks of cmt to the pit. Set wellhead slips w/150#k. Tested csg spool pack-off to 2000#. Tested BOPE to 3000# & Annular to 1500#. At 4:30 A.M. 03/30/15, tested csg to 1500# for 30 mins, held OK. Drilled out with 8 3/4" bit.

Chart & Schematic Attached.

Bond on file: NM1693 nationwide & NMB000919

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

**Electronic Submission #297697 verified by the BLM Well Information System  
For MEWBOURNE OIL COMPANY, sent to the Hobbs**

Name (Printed/Typed) JACKIE LATHAN Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission) Date 04/09/2015

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

27161

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBS OCD  
SEP 03 2015

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.*

5. Lease Serial No. NMNM0127A
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. SALADO DRAW 9 A3CN 1H
9. API Well No. 30-025-42437
10. Field and Pool, or Exploratory BONE SPRING
11. County or Parish, and State LEA COUNTY, NM

**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	
2. Name of Operator MEWBOURNE OIL COMPANY	Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com
3a. Address PO 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 9 T26S R33E Mer NMP NENW 305FNL 2355FWL	

**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
	<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.)

08/09/15 Frac Avalon Shale Bone Spring from 10100' MD (9802' TVD) to 14153' MD (9827' TVD). 760 holes, 0.42" EHD, 60 degree phasing. Frac in 20 stages w/7,447,756 gals slickwater, carrying 4,742,220# 100 Mesh sand, 1,872,280# 40/70 sand & 453,070# 40/70 Oil Plus sand.

Flowback well for cleanup.

08/25/15 PWOL for initial sales.

We are asking for an exemption from tubing at this time.

Bond on file: NM1693 nationwide & NMB000919

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #315105 verified by the BLM Well Information System For MEWBOURNE OIL COMPANY, sent to the Hobbs</b>	
Name (Printed/Typed) JACKIE LATHAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 09/01/2015

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	Title _____	Date _____
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**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**HOBBS OCD**  
**SLD 03 2015**  
**RECEIVED**

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

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

5. Lease Serial No.  
NNM0127A

1a. Type of Well  Oil Well  Gas Well  Dry  Other  
 b. Type of Completion  New Well  Work Over  Deepen  Plug Back  Diff. Rcvr.  
 Other \_\_\_\_\_

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

2. Name of Operator  
MEWBOURNE OIL COMPANY  
 Contact: JACKIE LATHAN  
 E-Mail: jlathan@mewbourne.com

8. Lease Name and Well No.  
SALADO 9 A3CN FED COM 1H

3. Address PO BOX 5270  
HOBBS, NM 88241

3a. Phone No. (include area code)  
Ph: 575-393-5905

9. API Well No.  
30-025-42437

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*  
 At surface NENW 305FNL 2355FWL  
 At top prod interval reported below NENW 847FNL 2333FWL  
 At total depth SESW FSL FWL

10. Field and Pool, or Exploratory  
AVALON BONE SPRING

11. Sec., T., R., M., or Block and Survey  
or Area Sec 9 T26S R33E Mer NMP

12. County or Parish  
LEA  
 13. State  
NM

14. Date Spudded  
03/22/2015

15. Date T.D. Reached  
04/16/2015

16. Date Completed  
 D & A  Ready to Prod.  
08/25/2015

17. Elevations (DF, KB, RT, GL)\*  
3308 GL

18. Total Depth: MD 14170  
TVD 9827

19. Plug Back T.D.: MD 14158  
TVD 9827

20. Depth Bridge Plug Set: MD  
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)  
CCL/CNL/GR/CBL

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

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
12.250	9.625 N80	40.0	0	119	0	0	0	0	0
17.500	13.375 H40	48.0	0	985	0	850	252	0	0
8.750	5.500 P110	17.0	0	14158	0	1500	796	0	0
12.250	9.625 J55	36.0	119	3024	0	0	0	0	0
12.250	9.625 N80	40.0	3024	4950	0	1400	500	0	0

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)

25. Producing Intervals

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) BONE SPRING	8941	14170	10100 TO 14153	0.420	760	OPEN
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
10100 TO 14153	7,447,756 GALS SLICKWATER, CARRYING 4,742,220# 100 MESH SAND & 1,872,280# 40/70 SAND & 453,070#

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
08/25/2015	08/26/2015	24	→	319.0	473.0	682.0		0.82	FLOWS FROM WELL
Choke Size	Tbg. Press. Flwg.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
64/64	SI	160.0	→	319	473	682	1483	POW	

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.	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas:Oil Ratio	Well Status	
	SI		→						

(See Instructions and spaces for additional data on reverse side)

ELECTRONIC SUBMISSION #315114 VERIFIED BY THE BLM WELL INFORMATION SYSTEM

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

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.)  
SOLD

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
					Mcas. Depth
BONE SPRING	8941	14170	OIL, WATER & GAS	RUSTLER TOP OF SALT CASTILE BASE OF SALT DELAWARE BELL CANYON BRUSHY CANYON BONE SPRING	844 1015 3195 4683 4913 4956 7509 8941

32. Additional remarks (include plugging procedure):  
Logs will be sent by mail.

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:      |                       |

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

Electronic Submission #315114 Verified by the BLM Well Information System.  
For MEWBOURNE OIL COMPANY, sent to the Hobbs

Name (please print) JACKIE LATHAN Title AUTHORIZED REPRESENTATIVE

Signature \_\_\_\_\_ (Electronic Submission) Date 09/01/2015

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.

**\*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\* ORIGINAL \*\***