

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Hobbs

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.
NMNM02965A

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.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. EL MAR 21 W1DM FED COM 3H ✓	
2. Name of Operator MEWBOURNE OIL COMPANY ✓		Contact: JACKIE LATHAN E-Mail: jlathan@mewbourne.com	9. API Well No. 30-025-42774-00-X1 ✓
3a. Address HOBBS, NM 88241		3b. Phone No. (include area code) Ph: 575-393-5905	10. Field and Pool, or Exploratory WC-025 G09 S263327G
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 21 T26S R33E NWNW 200FNL 660FWL ✓		11. County or Parish, and State LEA COUNTY, NM	

HOBBS OGD
NOV 30 2015
RECEIVED

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.)

9/20/2015 Spud 17 1/2" hole. TD hole at 910'. Ran 910' of 13 3/8" 54.5# J55 ST&O Csg. Cemented with 600 sks Class C w/ additives. Mixed @ 13.5#/g w/1.73 yd. Tail w/200 sks Class C w/1% CaCl2. Mixed @ 14.8#/g w/ 1.33 yd. Plug down @ 6:15 P.M. 09/21/2015. Circ 273 sks of cmt to the pit. WOC. Tested BOPE to 3000# & Annular to 2500#. At 9:30 p.m. 9/22/15, tested csg to 1500# for 30 min, held OK. Drilled out w/ 12 1/4" bit.

Charts and schematic attached.

Pump rate chart attached.

Bond on file: NM1693 nationwide & NMB000919

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

Electronic Submission #319806 verified by the BLM Well Information System For MEWBOURNE OIL COMPANY, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/30/2015 (16JAS0071SE)

Name (Printed/Typed) JACKIE LATHAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 10/14/2015

ACCEPTED FOR RECORD
NOV 9 2015
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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.

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

DEC 10 2015



PO Box 7
Lovington, NM 88260
(575) 224-2345 (575) 942-9472

Company Mouboine Date 9-27-15

Lease 1 Mar 21 WDM Fed Com 34 County Lea

Drilling Contractor Per # 243 Plug & Drill Pipe Size 1 3/8 4 1/2 f

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 1300 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 1.23. 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}



PO Box 7
 Lovington, NM 88260
 (575) 942-9472

Invoice
B 6520

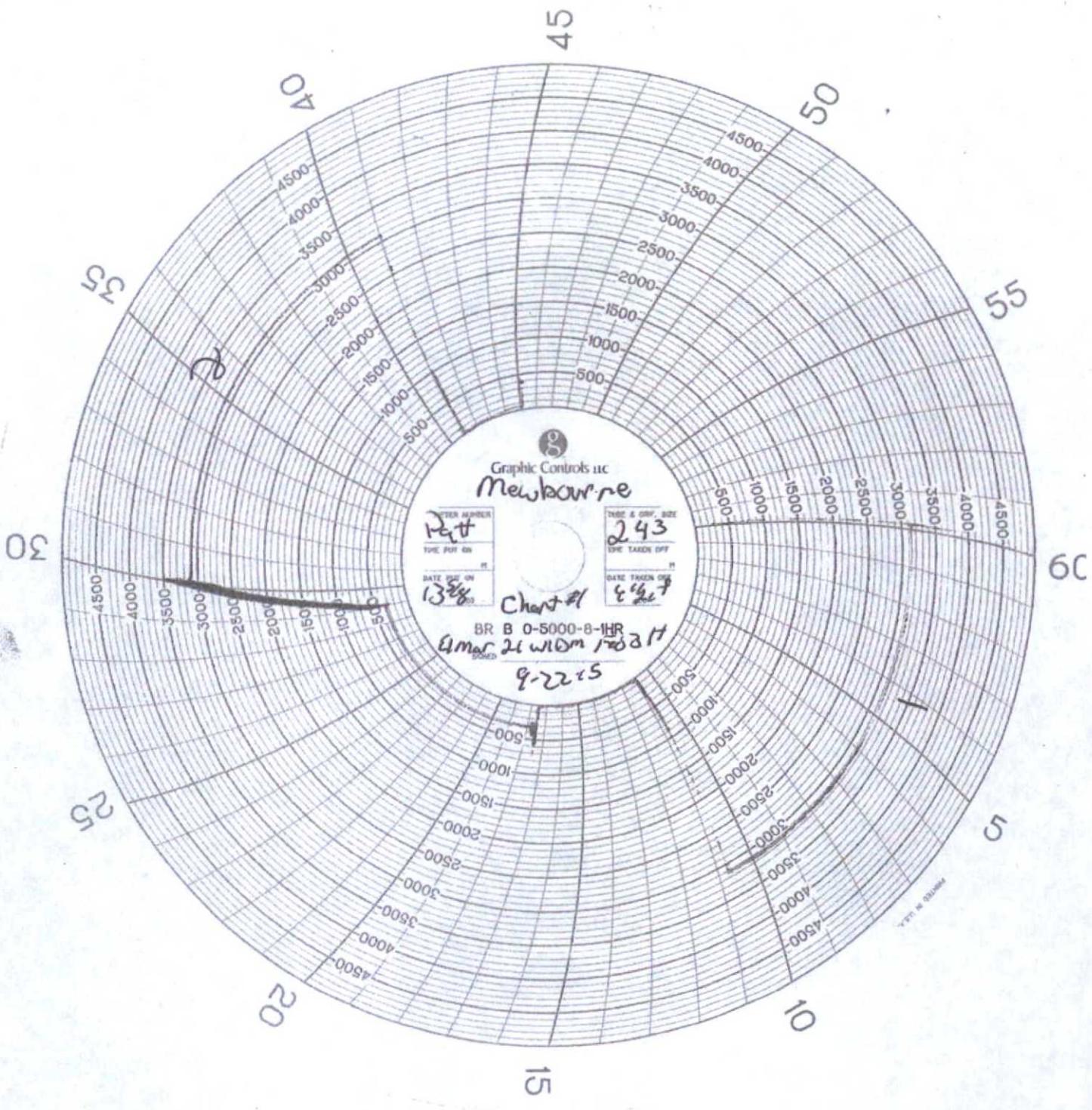
Date 9-22-15 Start Time _____ am pm
 Company Mowbrine State NM County Lea
 Lease 1 Mar 21 WIDM Fed 3H
 Company Man _____ Tester Patton Truck # 49
 Tool Pusher _____ Plug Size 1 3/8
 Drilling Contractor Patton Rig # 243 Pipe Thread Size 4 1/2"

Test Pressures
 BOP: _____
 Annular: _____
 Casing: _____
 Pumps: _____

Test #	Items tested	Low Test		High Test		Remarks
		PSI	Min.	PSI	Min.	
1	Truck			300	10	Per Company Man Runs
2	3, 4, 5, 8, 10, 12	250	10	300	10	Min. hold. Top drive, floor valves
3	7, 9, 12	250	10	300	10	300psi Annular at 2500psi
4	8, 11, 12	250	10	300	10	Test #4 leak worked HCR test
5	8, 11, 15	250	10	250	10	(good)
6	16	250	10	300	10	Test #9 leak worked air test
7	17	250	10	300	10	good.
8	18	250	10	300	10	
9	19	250	10	300	10	
10	1, 2, 6, 11, 13	250	10	300	10	
11	2, 5, 6, 11, 13	250	10	300	10	

Mileage 200 @ 1 /mile = 200
 Methanol _____ = _____
 Cup Test _____ = _____
4 HR @ 1100 = 1100
2 @ 110HR = 220
 _____ @ _____ = _____
 Subtotal = 1520⁰⁰
 Tax = 83⁰⁰
 TOTAL = 1,603⁰⁰

Test accepted by: Art Hilliard



Graphic Controls Inc
Newbourne

ENTER NUMBER
14th

TAPE & COPY SIZE
243

TYPE PUT ON

TYPE TAKEN OFF

DATE PUT ON

DATE TAKEN OFF

13.8 kHz

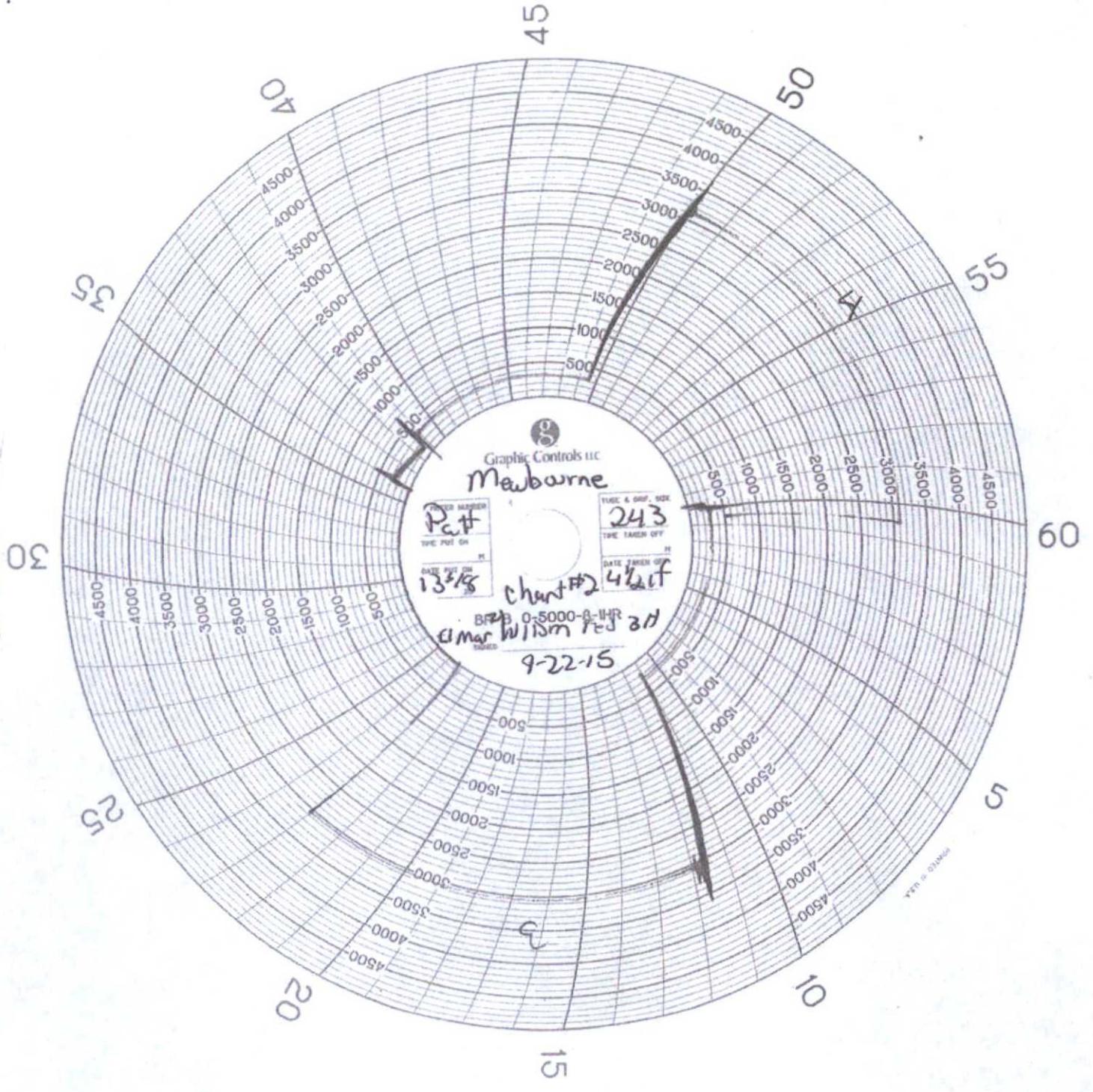
Chart #1

8-22-85

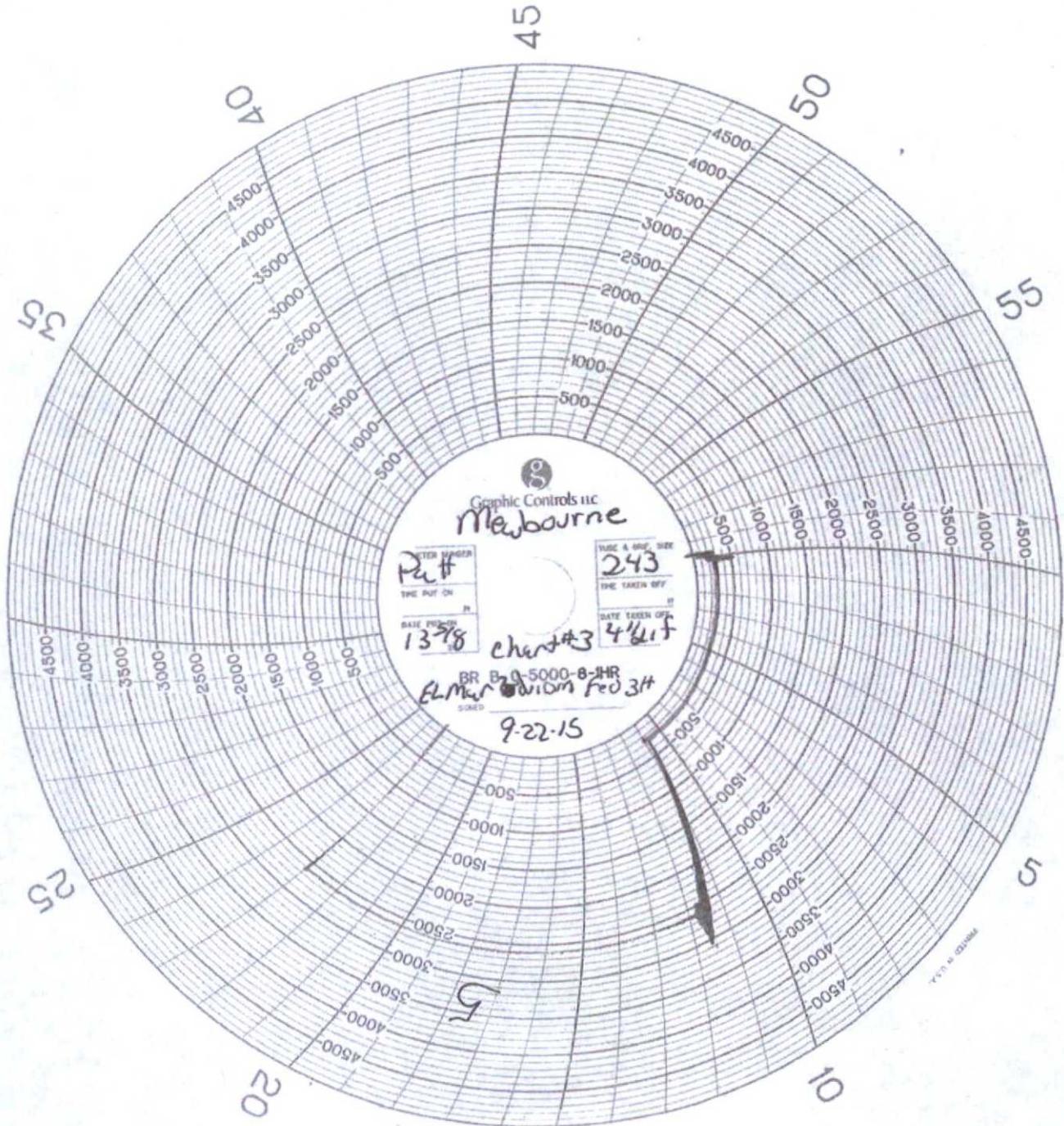
BR B 0-5000-8-1HR
4 Mar 21 WIDM 1983 H

9-22-85

MADE IN U.S.A.



MADE IN U.S.A.



Graphic Controls Inc
Melbourne

METER NUMBER
Pct
 THE PUT ON

SCALE & SIZE, SER.
243
 THE TAKEN OFF

DATE PUT ON
13-78

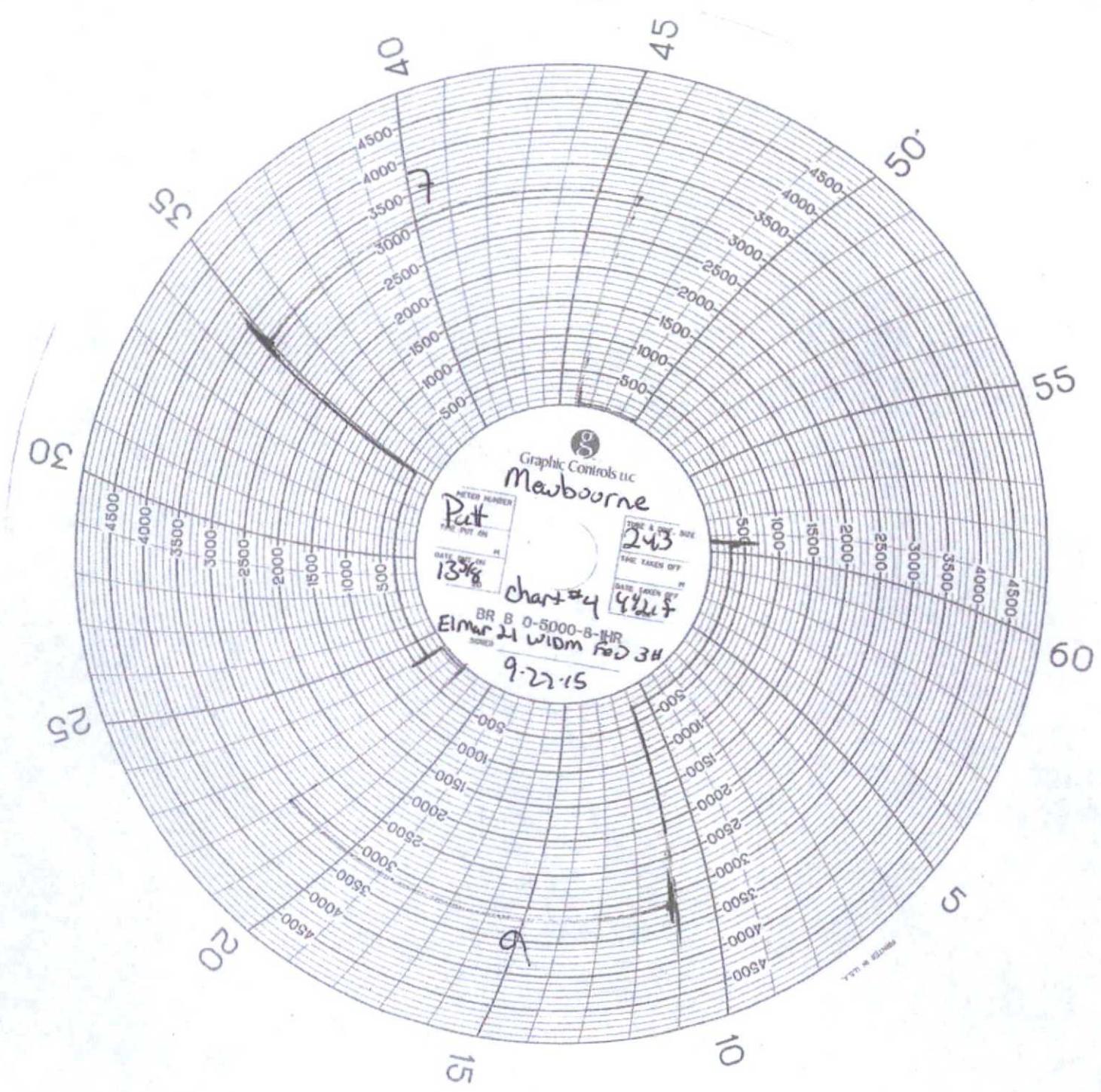
DATE TAKEN OFF
4/8/11

chart #3

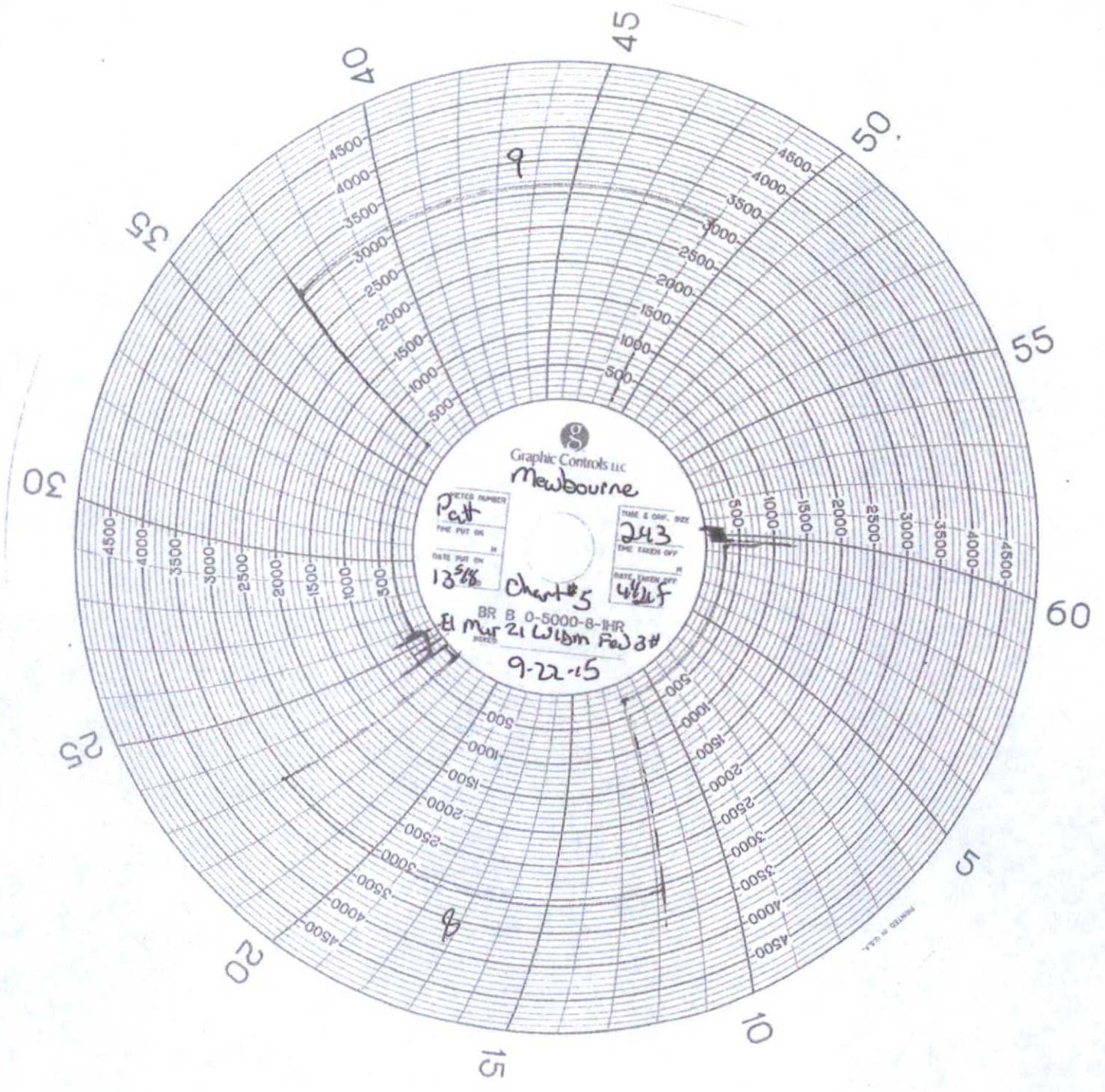
BR B-0-5000-8-1HR
 ELMER WIDOM Fed 3H

9-22-15

MADE IN U.S.A.



PRINTED IN U.S.A.



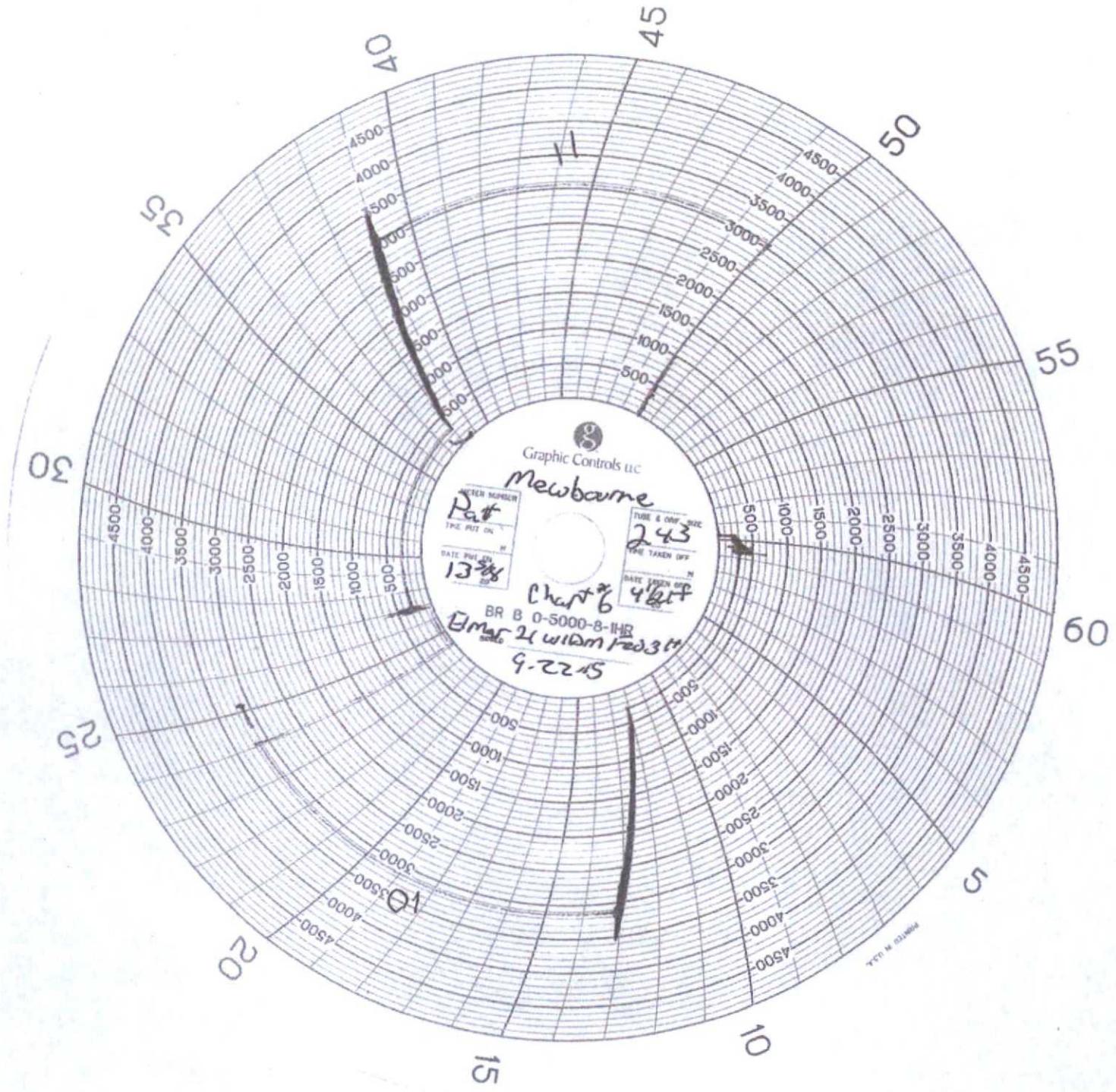
Graphic Controls LLC
Newbourne

METER NUMBER
Pat
DATE PUT ON
13/5/8

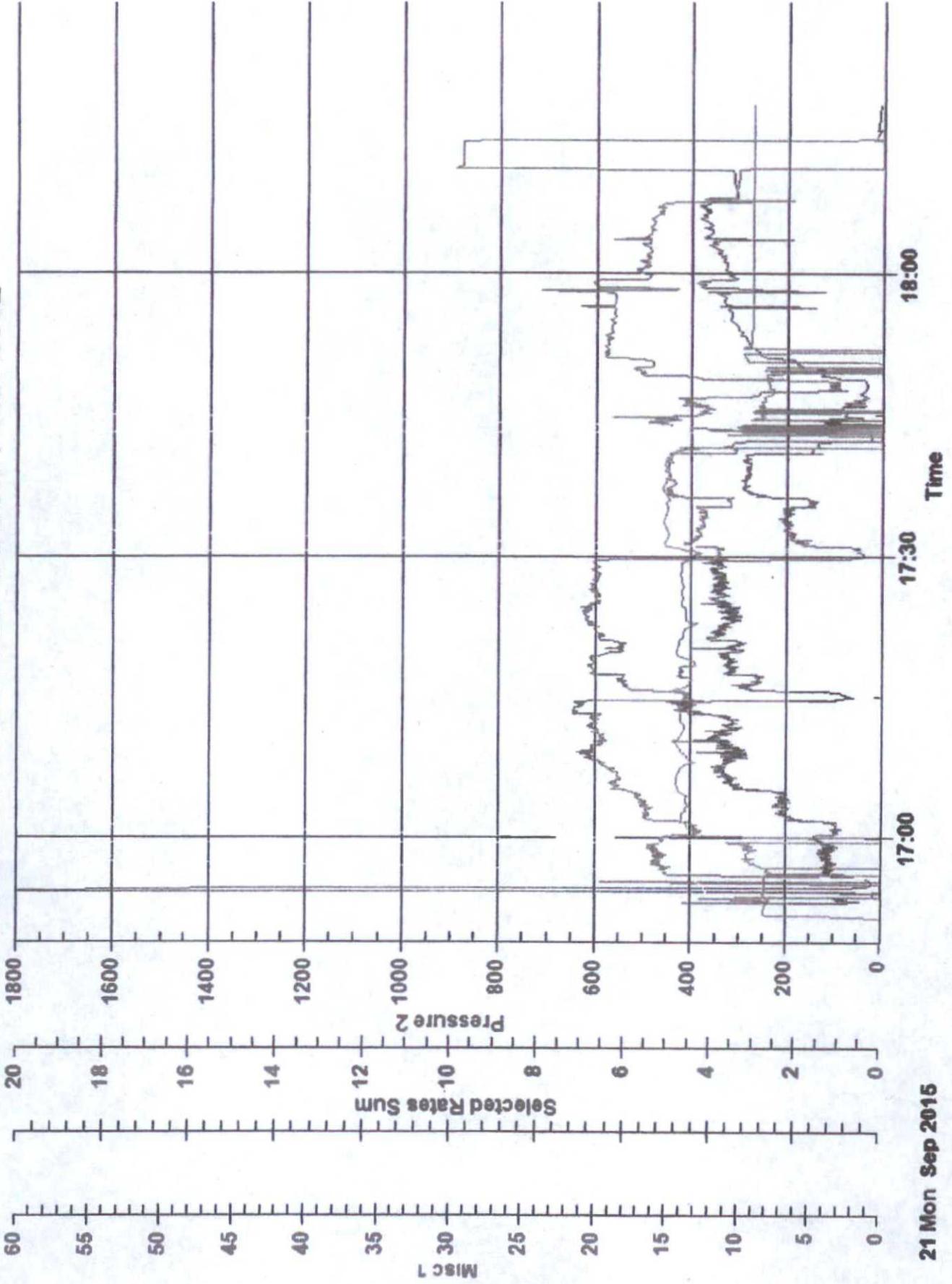
TIME & DATE, BOX
243
DATE TAKEN OFF
4/2/15

Chart #5
BR B 0-5000-8-IHR
El Mar 21 Wldm Fed 3#
9-22-15

PRINTED IN U.S.A.



EL-MAR-21-W1DM-FED-COM3H-PUMP2002



21 Mon Sep 2015