

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD

Hobbs

HOBBS OCD

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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 page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM13641
2. Name of Operator MEWBOURNE OIL COMPANY		6. If Indian, Allottee or Tribe Name
3a. Address PO BOX 5270 HOBBS, NM 88241		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 575-393-5905		8. Well Name and No. PRONGHORN 15 B3DM FED COM 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 15 T23S R34E Mer NMP NWNW 185FNL 450FWL		9. API Well No. 30-015-42968
		10. Field and Pool or Exploratory Area ANTELOPE RDGE BONE SPRING
		11. County or Parish, State LEA COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

01/02/17 Spud 17 1/2" hole. TD hole @ 1720'. Ran 1720' of 13 3/8" 61# J55 ST&C csg. Cemented with 1300 sks Class C w/additives. Mixed @ 13.7 #/g w/1.67 yd. Tail w/200 sks Class C w/2% CaCl2. Mixed @ 14.8#/g w/1.34 yd.

Plug down @ 7:45 AM 01/04/17. Circ 390 sks of cmt to the pits. Tested wellhead to 800#. Tested BOPE to 2000# & Annular to 1000#.

At 10:30 AM 01/05/17, tested csg to 1500# for 30 mins, held OK.

Drilled out with 12 1/4" bit.

Chart & Schematic Attached.

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

Electronic Submission #363091 verified by the BLM Well Information System
For MEWBOURNE OIL COMPANY, sent to the Hobbs
Committed to AFMSS for processing by DEBORAH MCKINNEY on 01/24/2017 ()

Name (Printed/Typed) JACKIE LATHAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 01/06/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By: DAVID R. GLASS	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.

(Instructions on page 2)

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

KG

Additional data for EC transaction #363091 that would not fit on the form

32. Additional remarks, continued

Bond on file: NM1693 nationwide & NMB000919

MAN WELDING SERVICES, INC

Company Mexborne Date 1/5/17

Lease Pronghorn 15 B3D41 Feed Com #14 County Lea County, NM

Drilling Contractor Patterson 2nd Plug & Drill Pipe Size 12" czz cet39, 4 1/2 IF

Accumulator Pressure: 3000 Manifold Pressure: 1500 Annular Pressure: 1000

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 1350 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 1:06. 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}



MAN WELDING SERVICES

WELDING • BOP TESTING
 NIPPLE UP SERVICE • BOP LIFTS • TANDEM
 MUD AND GAS SEPARATORS
 Lovington, NM • 575-398-4540

Pg. 1 of 2

Company: Mewbourne Date: 1/4/17 Invoice #: B83747

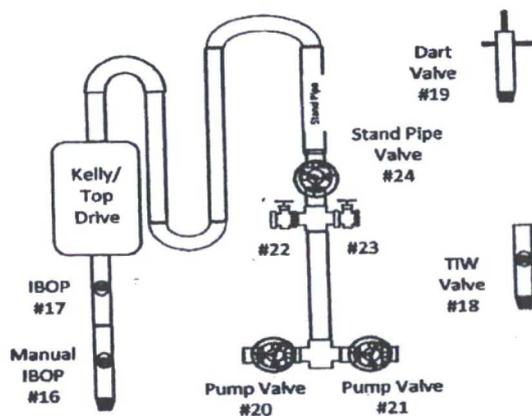
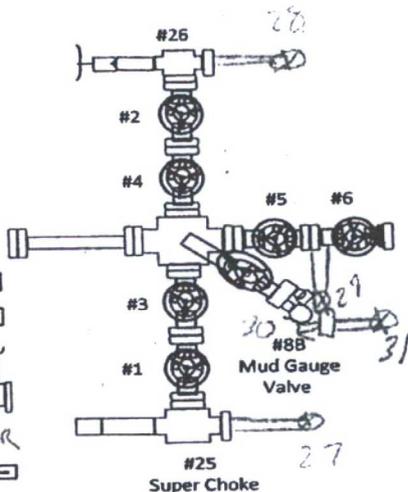
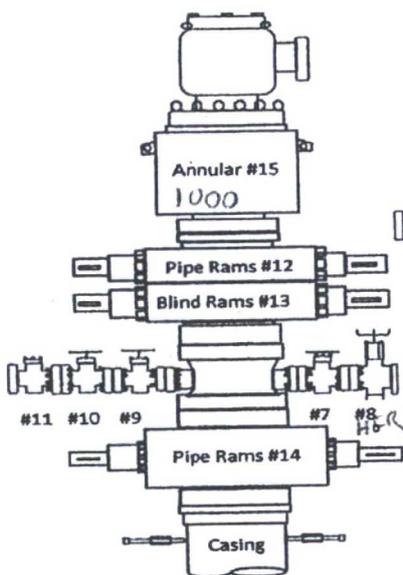
Lease: Proghorn 15 B3DM Fed Cont #14 Drilling Contractor: Patterson Rig #: 231

Plug Size & Type: 12" C22 Drill Pipe Size: 4 1/2 IF / CET39 Tester: Matthew Davis, Junior Otago

Required BOP: _____ Installed BOP: _____

Appropriate Casing Valve Must Be Open During BOP Test

* Check Valve Must Be Open/Disabled To Test Kill Line Valves *

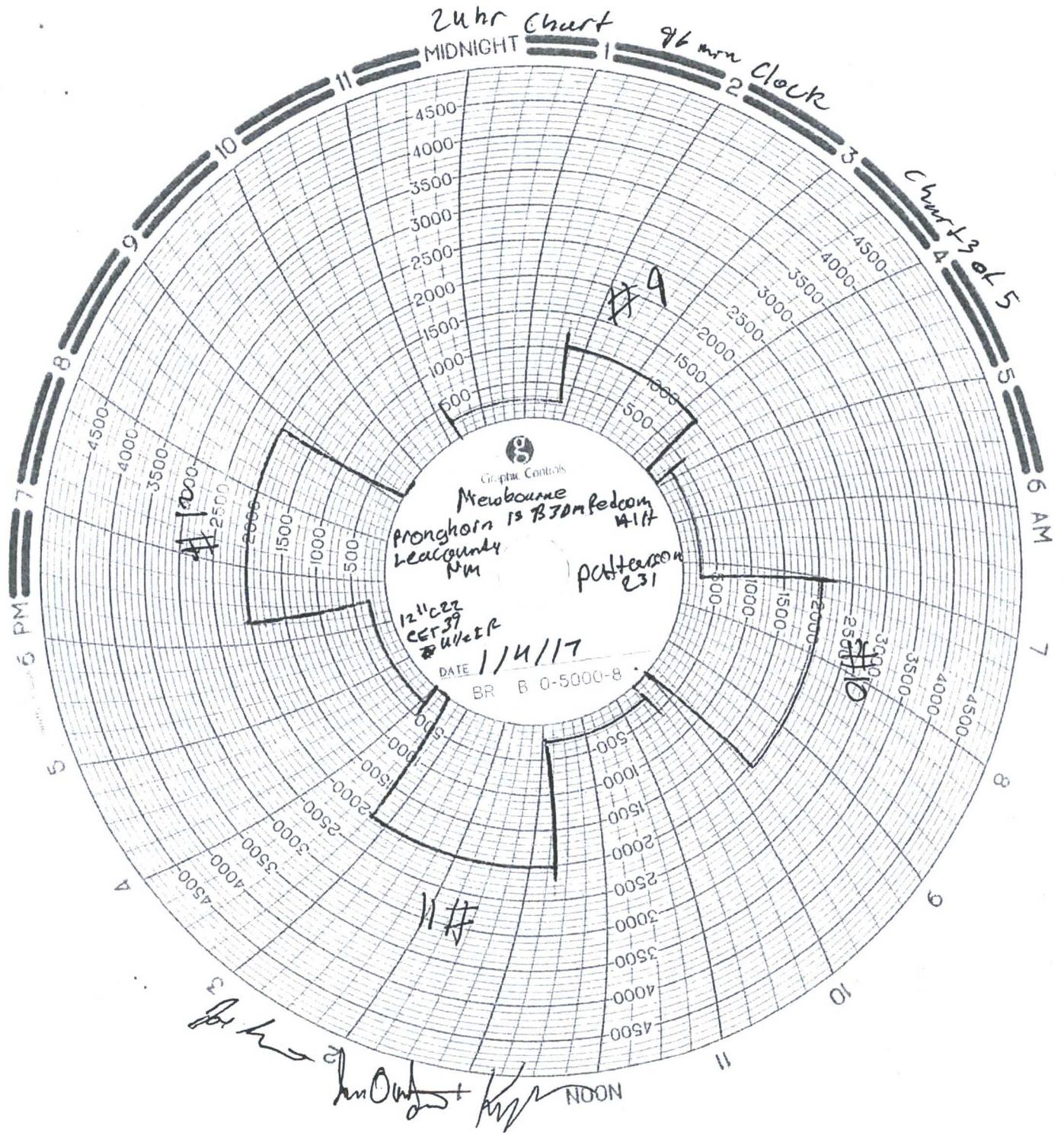


TEST #	ITEMS TESTED	TEST LENGTH	LOW PSI	HIGH PSI	REMARKS
1	19 - CET39	10/10	250	2000	Pass
2	18 - CET39	10/10	250	2000	Pass
3	19 - 4 1/2 IF	10/10	250	2000	Pass
4	18 - 4 1/2 IF	10/10	250	2000	Pass
5	28, 27, 31, 6, 7	10/10	250	2000	All Test, Leaking at Flange Between Valves #29 & #30, Ried off pressure, moved to next test
6	28, 27, 29, 6, 7	10/10	250	2000	Pass
7	2, 1, 5, 7	10/10	250	2000	Pass
8	4, 3, 5, 7	10/10	250	2000	Pass
9	15, 9, 7	10/10	250	1000	Pass
10	17, 9, 7	10/10	250	2000	Pass
11	12, 10, 8	10/10	250	2000	Pass
12	12, 10, 8B, 5, 4, 7	10/10	250	2000	Pass
13	14	10/10	250	2000	Pass
14	13, 11, 5, 4, 3	10/10	250	2000	Pass
15	13, 11, 5, 4, 3 31, 6, 7, 4, 3	10/10	250	2000	Retest - Pass
16	25, 26, 30, 6, 7	Bump	-	2000	Pass

24 hr Chart

96 min Clock

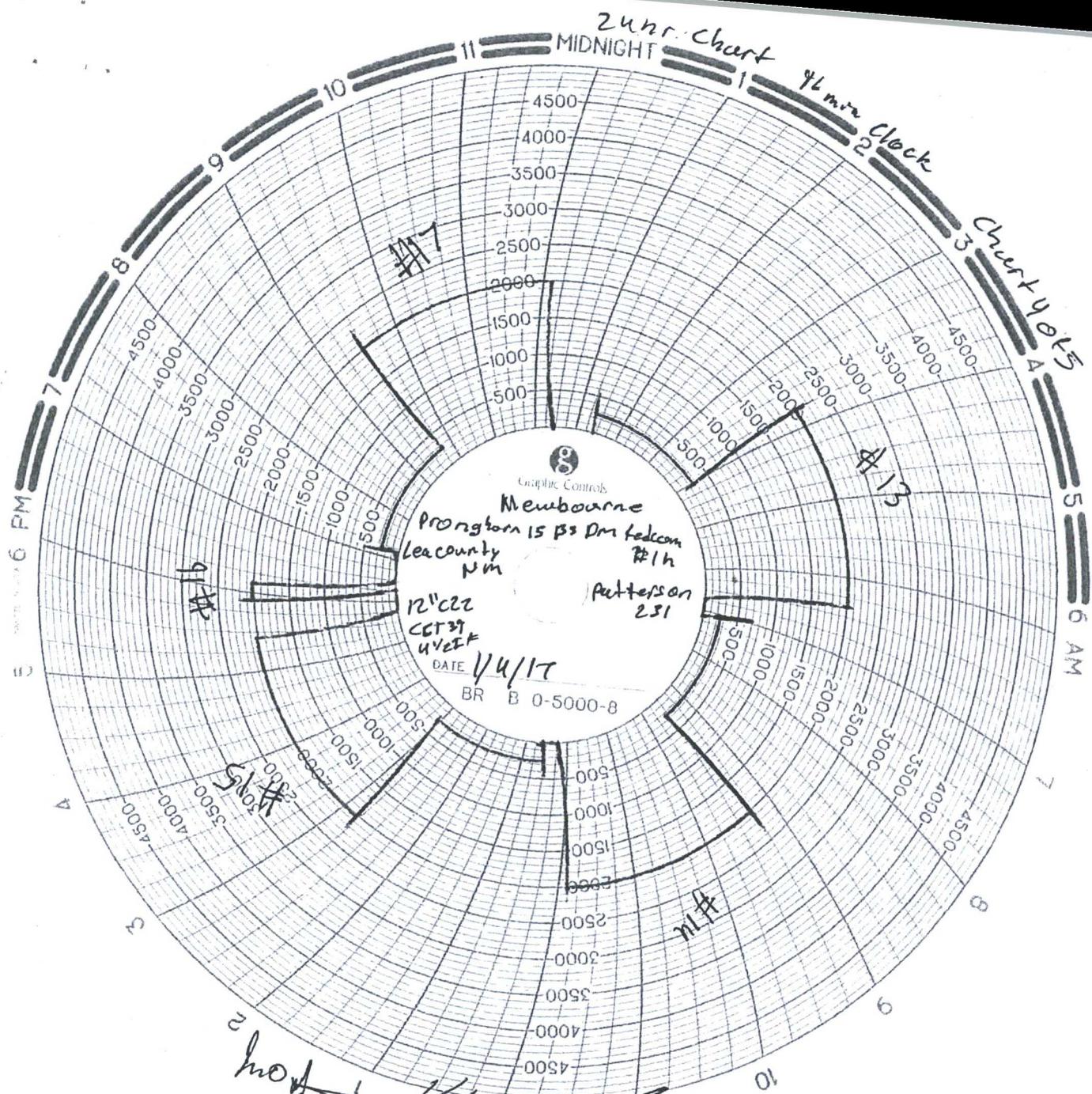
Chart 3 of 5



11
10
9
8
7
6 PM

MIDNIGHT
1
2
3
4
5
6 AM
7
8
9
10
11

NOON



24 hr. Chart

96 min. Clock

Chart 4 of 5

Graphic Controls

Newbourne

Prorogton 15 BS DM Fedcom
Leacounty NM

Patterson 231

12122
CCT 37
4421

DATE 1/4/17

BR B 0-5000-8

11 noon
12 noon
13 noon

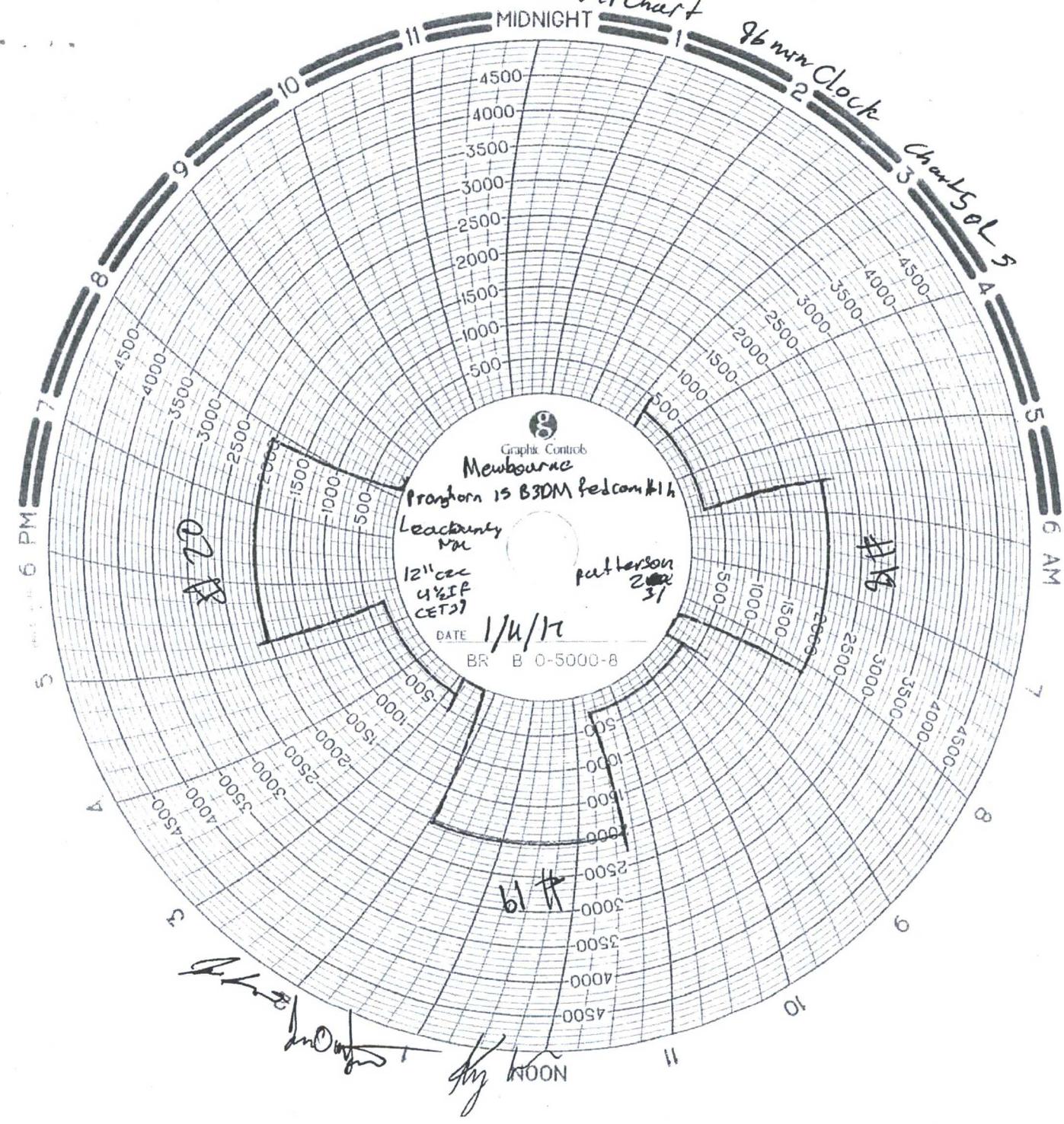
6 PM

6 AM

Zuhrchart

96 min Clock

Chart 50L 5



Graphic Controls
 Mewbourne
 Pranghorn 15 B3DM fed cam 1h
 Leachbury NW
 12" ccc
 4 1/2 IF
 CET 27
 DATE 1/4/17
 BR B 0-5000-8

QD #

#

61 #

[Handwritten signature]

[Handwritten signature]

NOON

6 PM

6 AM

4

8

3

9

10

11

10

9

8

7

MIDNIGHT

1

2

3

5

7