

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD

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.

HOBBS OCS
RECEIVED
SEP 22 2017

SUBMIT IN TRIPLICATE - Other instructions on page

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM85933
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. BILBREY 34/27 B2MD FED COM 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 34 T21S R32E Mer NMP SWSW 270FSL 405FWL		9. API Well No. 30-025-43872
		10. Field and Pool or Exploratory Area 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 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 recomplate 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.

08/22/17..TD'ed 8 3/4" hole @ 11213'. Ran 11202' of 7" 26# & 29# HCP110 LT&C Csg. Cemented 1st stage w/350 sks Lite Class C (35:65:5) w/additives. Mixed @ 12.5#/g w/2.02 yd. Tail w/400 sks Lite Class H (50:50:0) w/additives. Mixed @ 14.2#/g w/ 1.24 yd. Displaced w/427 bbls mud. Plug down @ 11:15 AM 08/23/17. Set ECP w/3780#. Tested csg to 7500#. Drop bomb & open DV tool w/700#. Circ 112 sks of cmt off of DV tool to the pits. Cmt 2nd stage w/225 sks Class C. Mixed @ 13.5#/g w/1.73 yd. Displaced w/228 bbls mud. Plug down 2:00 P.M. 08/23/17. Did not circ cmt. Lift pressure @ 500# @ 3 BPM. Estimated TOC @ 4479'. Closed DV tool & test to 5000#, held OK. At 8:30 PM 8/24/2017, tested csg to 5000# for 30 mins, held OK. FIT test to 10.0 PPG EMW. Drilled out with 6 1/8" bit.

Bond on file: NM1693 nationwide & NMB000919

500' tie backs needed Potash Secretary's

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

Electronic Submission #388640 verified by the BLM Well Information System For MEWBOURNE OIL COMPANY, sent to the Hobbs Committed to AFSSS for processing by JENNIFER SANCHEZ on 09/18/2017 ()

Name (Printed/Typed) JACKIE LATHAN	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 09/15/2017

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.

(Instructions on page 2)

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

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