

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

OCD-HOBBS
HOBBSDCD
APR 02 2018
RECEIVED

SUNDRY NOTICES AND REPORTS ON WELLS		5. Lease Serial No. NMNM02965A
<i>Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.</i>		6. Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE - Other instructions on page 2		7. If Unit of CA/Agreement, Name and/or No.
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" 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		9. API Well No. 30-025-42774
3a. Address 701 S. CECIL ST HOBBS, NM 88240	3b. Phone No. (include area code) (575) 393-5905	10. Field and Pool or Exploratory Area WC-025 G09 S263327G
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 200' FNL & 660' FWL, SEC. 21, T26S, R33E		11. Country or Parish, State LEA CO., NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 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 checked="" 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 must 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 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 detennined that the site is ready for final inspection.)

SEE ATTACHED



14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) KLAY KIRKES		ENGINEER Title
Signature <i>KLK</i>		Date 12/01/2016

THE 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)

WATER PRODUCTION & DISPOSAL INFORMATION

In order to process your disposal request, the following information must be completed:

1. Name of formations producing water on the lease. WOLF CAMP
2. Amount of water produced from all formations in barrels per day. 1000 BWPD
3. Attach a current water analysis of produced water from all zones showing at least the total dissolved solids, ph, and the concentrations of chlorides and sulfates. (One sample will suffice if water is commingled.)
4. How water is stored on lease. TANK BATTERY
5. How water is moved to the disposal facility. PUMPS
6. Identify the Disposal Facility by:
 - A. Facility Operators name. OWL
 - B. Name of facility or well name and number. BROWN #005
 - C. Type of facility or well (WDW) (WIW) etc. WDW
 - D. Location by 1/4 1/4 E. Section 25 Township 25S Range 36E
7. Attach a copy of the State issued permit for the Disposal Facility.

Submit to this office, 620 EAST GREENE ST, CARLSBAD NM, 88220, the above required information on a Sundry Notice 3160-5. Submit 1 original and 3 copies, within abatement period. (This form may be used as an attachment to the Sundry Notice.)

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FILE		
U.S.G.S.		
LAND OFFICE		
OPERATOR		

NEW MEXICO OIL CONSERVATION COMMISSION

Form C-103
Supersedes Old
C-102 and C-103
Effective 1-1-65

5a. Indicate Type of Lease	
State <input type="checkbox"/>	Fee <input checked="" type="checkbox"/>
5. State Oil & Gas Lease No.	
7. Unit Agreement Name	
8. Farm or Lease Name	
9. Well No.	
10. Field and Pool, or Wildcat	
12. County	

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>
2. Name of Operator Apollo Oil Company
3. Address of Operator c/o Oil Reports & Gas Services, Inc., Box 763, Hobbs, New Mexico
4. Location of Well UNIT LETTER E 1650 FEET FROM THE North LINE AND 990 FEET FROM THE West LINE, SECTION 25 TOWNSHIP 25 S RANGE 36 E NMPM.
15. Elevation (Show whether DF, RT, GR, etc.) 3066

7. Unit Agreement Name
8. Farm or Lease Name Brown
9. Well No. 5
10. Field and Pool, or Wildcat Jalnat
12. County Lea

Check Appropriate Box To Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	OTHER <input type="checkbox"/>

SUBSEQUENT REPORT OF:

REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
CASING TEST AND CEMENT JOBS <input type="checkbox"/>	OTHER <input checked="" type="checkbox"/> Convert to Water Injection

17. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

In accordance with OCC Order R-5196, ran 2 3/8 plastic lined tubing with Baker AD-1 Tension type packer set at 3150. The casing-tubing annulus was loaded with fresh water treated with Kontrol-Kem #208. Injection started May 1, 1976.

18. I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNED *[Signature]* TITLE Agent DATE 5/7/76

APPROVED BY *[Signature]* TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

EL MAR 21 W1DM FED COM #3H - SFD

LOCATION OF SITE SECURITY PLAN	701 S. CECIL ST.; HOBBS, NM 88240
OPERATOR	MEWBOURNE OIL COMPANY
FACILITY NAME	EL MAR 21 W1DM FED COM #3H
FACILITY LOCATION	UNIT D; SEC. 21, T26S, R33E; LEA CO., NM
LEASE NUMBER	NMNM02965A
OIL SALES: VOLUME BY LACT, PUMPED TO CRUDE PL	
SEAL REQUIREMENTS: SINCE ON LACT, NO SEALS REQUIRED DURING PRODUCTION OR SALES PHASE EXCEPT ON TRUCK LOAD LINE.	

