

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NMOCD  
Hobbs

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**

**HOBBS OGD**  
**APR 18 2018**  
**RECEIVED**

5. Lease Serial No.  
NMNM13641

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
PRONGHORN 15 B3CN FED COM 1H

9. API Well No.  
30-025-44011

10. Field and Pool or Exploratory Area  
ANTELOPE RIDGE WEST/BONE

11. County or Parish, 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  
HOBBBS, 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 15 T23S R34E Mer NMP NWNW 185FNL 1700FWL

**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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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.

03/26/2018 TD'ed 6 1/8" hole @ 16025' MD. Ran 15980' of 4 1/2" 13.5# HCP110 DQX csg. Cmt w/525 sks Lite Class H (50:50:2) w/additives. Mixed @ 14.2#/g w/1.35 yd. Released dart. Displaced w/194 bbls BW. Plug down @ 11:00 A.M. 03/28/18. Bump plug w/5200#. Set packer w/45k# & release from liner. Displaced 7" csg w/300 bbls BW. Circ 125 sks of cmt off of liner top to the pits. At 12:30 P.M., 03/28/18, test liner top to 1500# for 30 mins, held OK. Top of liner @ 10731'

Rig released on 03/29/18 @ 6:00 AM

Bond on file: NM1693 nationwide & NMB000919

14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #410226 verified by the BLM Well Information System  
 For MEWBOURNE OIL COMPANY, sent to the Hobbs  
 Committed to AFMSS for processing by JENNIFER SANCHEZ on 04/04/2018 ()**

Name (Printed/Typed) JACKIE LATHAN Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission) Date 04/03/2018

**ACCEPTED FOR RECORD**

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

APR 5 2018  
**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.

(Instructions on page 2) **\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***