; Form 3160-5 September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED OMB No. 1004-0135 Expires: January 31, 2004

5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter ar abandoned well. Use Form 3160-3 (APD) for such proposals.
abandoned well. Use Form 3160-3 (APD) for such proposals.

NM-56520 6. If Indian, Allottee or Tribe Name

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SUBMIT IN TRIPLICATE - Other instructions on reverse side				7. If Unit or C	CA/Agreement, Name and/or No.	
1. Type of Well ☐ Oil Well ☐ Other ☐ Other			8. Well Name and No.			
2. Name of Operator Manufacture Oil Company 14744			Milagro 28 Federal Com #1			
Mewbourne On Company 14744			- William Promise	9. API Well No. 30 - 015 - 35012		
3a. Address		3b. Phone No. (incl	ude area code			
PO Box 5270 Hobbs, NM 88240 505-393-5905			·	10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T. R., M., or Survey Description)				Happy Valley Morrow 11. County or Parish, State		
1500' FNL & 990' FWL Unit E Sec 28-T22S-R26E				Eddy County, NM		
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NAT	URE OF NOTICE, RI	·		
TYPE OF SUBMISSION		TYPE OF ACTION				
	Acidize [Deepen	Production (Start	/Resume) [Water Shut-Off	
Notice of Intent	Alter Casing	Fracture Treat	Reclamation	[Well Integrity	
	Casing Repair	New Construction	=	, [Other BOPE Test	
Subsequent Report	Change Plans	Plug and Abando	= '	undon		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal			
testing has been completed. Fin determined that the site is ready Mewbourne Oil Company receiv Smitz with BLM (Roswell office setting 1650' of 13 3/8" 54.5# J55 390-7169.	ed an approved APD on 06/05/0), MOC would like to change the ST&C casing to 1400' of 13 3/	filed only after all records of for the above cap are surface setting do set	puirements, including reclar brioned well. After furthe epth from 1650' of 17 1/2	r review and v "hole to 140 questions, ple	en completed, and the operator has verbal approval from John 0' of 17 1/2" hole and from	
14. 1 hereby certify that the foregoin Name (PrintedlTyped)	g is true and correct					
Kristi Green		Title I	Hobbs Regulatory			
Signature Pondt	i Ga	Date (06/26/06			
	THIS SPACE FO	MARKAGON CONTRACTOR OF THE ACTION	STATE OFFICE USE			
Approved by (Signature)			Name (Printed/Typed)	T	îtle	
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to determine the appl	attached. Approval of this notice all or equitable title to those rights conduct operations thereon.	does not warrant or in the subject lease	Office		Date	
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudule	tle 43 U.S.C. Section 1212, make it and statements or representations as t	a crime for any perso to any matter within it	on knowingly and willfully t	to make to any d	lepartment or agency of the United	