

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

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

5. Lease Serial No.
NM-9019

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
Geronimo 19 Federal Com #1

9. API Well No.
30-025-37928

10. Field and Pool, or Exploratory Area
Shugart Morrow

11. County or Parish, State
Eddy County, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Mewbourne Oil Company 14744

3a. Address
PO Box 5270 Hobbs, NM 88240

3b. Phone No. (include area code)
505-393-5905

4. Location of Well (Footage, Sec., T. R., M., or Survey Description)

660' FSL & 1650' FWL Unit N Sec 19-T18S-R32E

12. CHECK 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"/> Fracture Treat	<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 <u>Test with rig pump</u>
	<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	

3. 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Mewbourne Oil Company received an approved APD on 06/06/06 for the above captioned well. After further review, MOC would like waive the low pressure test on both the 13 3/8" and 9 5/8" BOPE testing for it is not required as per BLM Onshore Oil & Gas Order #2. MOC would also like to test the 13 3/8" BOPE stack with rig pump to 70% of burst rate. MOC will test the 9 5/8" BOPE to 5000# and hydriil to 1500# with a third party testing company before drilling out of the 9 5/8" casing. MOC would also like to waive the 2nd testing of the 9 5/8" BOPE before the wolfcamp, but will test again in 30 days from the 1st test as per BLM Onshore Oil and Gas Order #2. If you have any questions, please call Terry Burke at (505) 390-7169.

The Sundry is denied with the following variance:
The 13-3/8" 48# casing with internal yield of 1730 psi may be tested to 1200 psi using the rig pump. A low pressure test from 200 to 300 psi will be required on all testing as per API RP 53 17.3.2. All testing shall be recorded on a pressure chart for future reference and shall be held for 10 minutes or until requirements of the test are met. The annular preventer shall be tested to 50% of the rated working pressure.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Kristi Green

Title Hobbs Regulatory

Signature

Date 06/07/06

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature)

Les Babyak

Name
(Printed/Typed) LES BABYAK

Title P.E.

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

Date

7/26/06

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.

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