

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

| | | |
|--|---|--|
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 5. Lease Serial No. NM-105562 (SL) NM-27507 (BHL) |
| 2. Name of Operator Mewbourne Oil Company 14744 | | 6. If Indian, Allottee or Tribe Name |
| 3a. Address PO Box 5270 Hobbs, NM 88241 | 3b. Phone No. (include area code) 575-393-5905 | 7. If Unit or CA/Agreement, Name and/or No. |
| 4. Location of Well (Footage, Sec., T, R., M., or Survey Description) 380' FNL & 380' FWL, Sec 22-T26S-R32E Unit Letter D | | 8. Well Name and No. Red Hills West 22 Fed Com #1H |
| | | 9. API Well No. 30-025-39901 |
| | | 10. Field and Pool, or Exploratory Area Wildcat Bone Spring |
| | | 11. County or Parish, State Lea County, NM |

12. CHECK 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"/> 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 type="checkbox"/> Other Casing & Cmt |
| | <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.)

12/14/10...TD 8 3/4" hole at 9648'. Ran 9648' of 7" 26# P1100 BT&C & LT&C csg. Cemented with 400 sks BJ Lite Class H (35:65:6) w/additives. Mixed @ 12.0 #/g w/ 2.47 yd. Tail w/400 sks Class H w/additives. Mixed @ 15.6 #/g w/ 1.18 yd. Plug down @ 7:00 pm 12/14/10. Slow rate lift pressure @ 2150# @ 2.8 BPM. Did not circ cmt. TOC @ 4000'. On 12/14/10 tested BOPE to 3000# & annular to 1500#. Chart & schematic attached. Drilled out with 6 1/8" bit.

RECEIVED

JAN 05 2011
HOBBSOCD

ACCEPTED FOR RECORD

JAN 2 2011

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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

Jackie Lathan

Title Hobbs Regulatory

Signature

Date 12/23/10

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature)

Name
(Printed/Typed)

Title

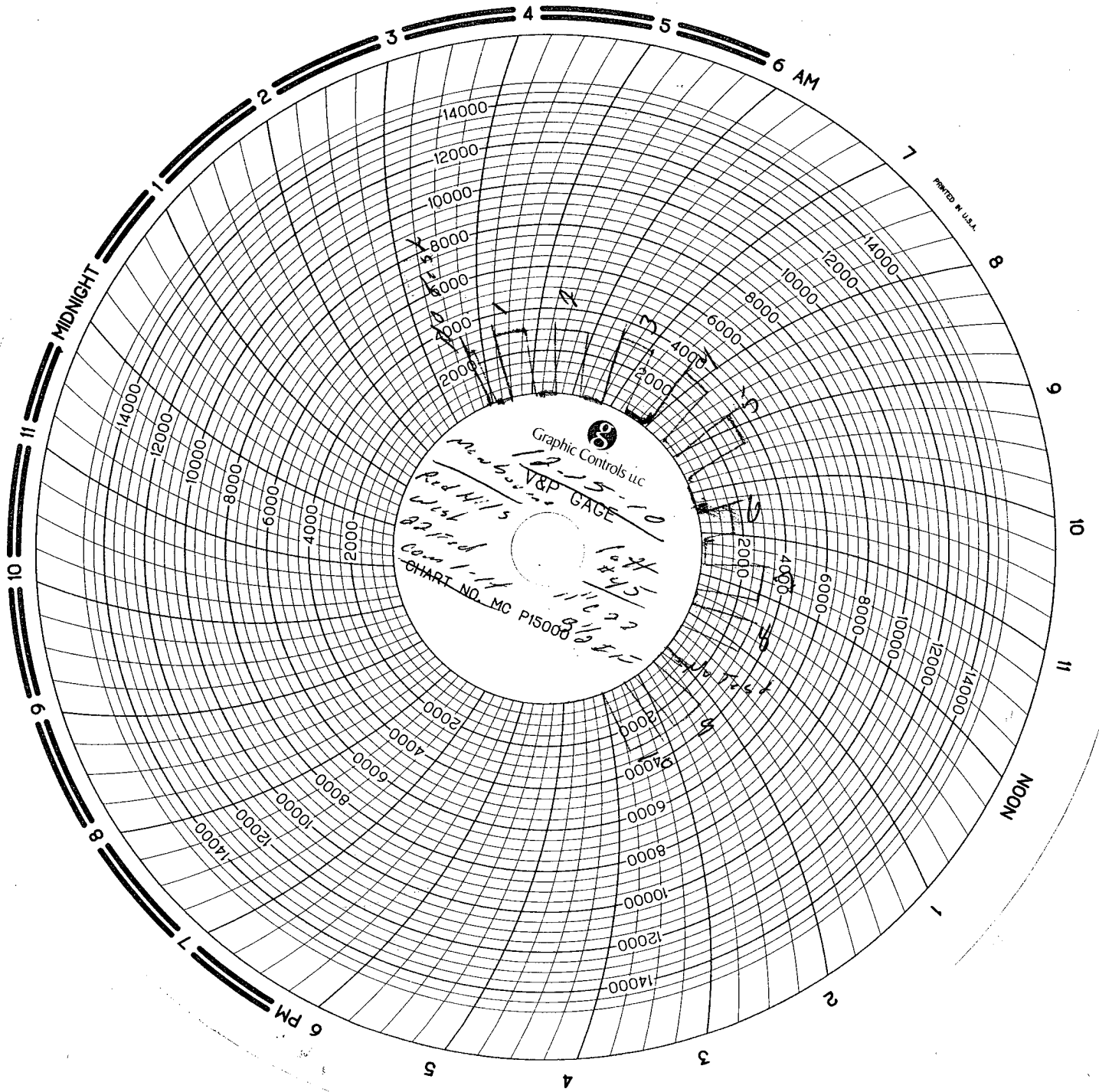
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Date

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.

(Continued on next page)

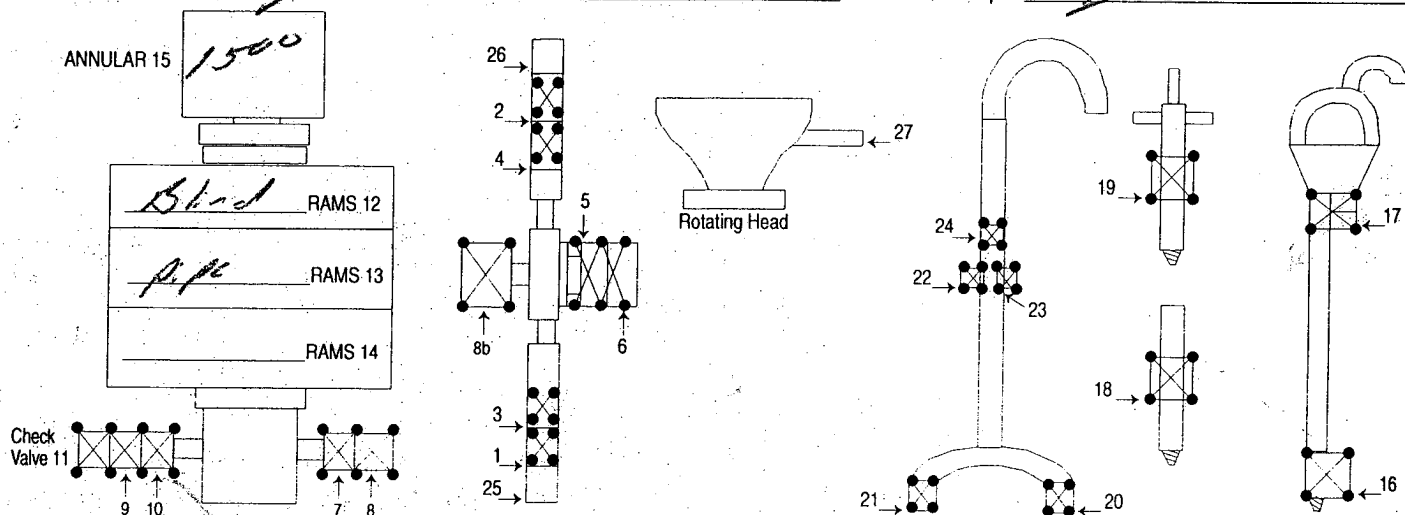




INVOICE

B 12156

Company New Bore Date 12-10-10 Start Time 11:00 ☐ am ☒ pm
Lease Ard Hills West 22 Fed Lm 1-A County Lee State W. Va.
Company Man _____
Wellhead Vendor _____ Tester Sal O'Neil
Drig. Contractor P. H. Henson Rig # 45
Tool Pusher _____
Plug Type C22 Plug Size 11" Drill Pipe Size 3 1/2 IF
Casing Valve Opened 4-3 Check Valve Open 4-3

[illegible]

8 HR @ \$4.50
2 HR @ \$100.00
Mileage 170 @ \$1.70
MASTER PRINTERS 575.396.3661

SUB TOTAL 1620
TAX 8.90
TOTAL 1710

MAN WELDING SERVICES, INC

Company Newberr Date 12-15-10

Lease Ridgely 11/3 11/22 11/22 11/22 11/22 County La

Drilling Contractor Paterson 45 Plug & Drill Pipe Size 11" 122 3 1/2 EF

Accumulator Function Test - OO&GO#2

To Check - USABLE FLUID IN THE NITROGEN BOTTLES (III.A.2.c.i. or ii or iii)

- Make sure all rams and annular are open and if applicable HCR is closed.
- Ensure accumulator is pumped up to working pressure! (Shut off all pumps)
 1. Open HCR Valve. (If applicable)
 2. Close annular.
 3. Close **all** pipe rams.
 4. Open one set of the pipe rams to simulate closing the blind ram.
 5. For 3 ram stacks, open the annular to achieve the 50+ % safety factor. (5M and greater systems).
 6. Record remaining pressure 1460 psi. Test Fails if pressure is lower than required.
- a. {950 psi for a 1500 psi system} b. {1200 psi for a 2000 & 3000 psi system }
- 7. If annular is closed, open it at this time and close HCR.

To Check - PRECHARGE ON BOTTLES OR SPHERICAL (III.A.2.d.)

- Start with manifold pressure at, or above, maximum acceptable pre-charge pressure:
 - a. {800 psi for a 1500 psi system} b. {1100 psi for 2000 and 3000 psi system}
- 1. Open bleed line to the tank, slowly. (gauge needle will drop at the lowest bottle pressure)
- 2. Close bleed line. Barely bump electric pump and see what pressure the needle jumps up to.
- 3. Record pressure drop 100 psi. Test fails if pressure drops below minimum.
- Minimum: a. {700 psi for a 1500 psi system} b. {900 psi for a 2000 & 3000 psi system}

To Check - THE CAPACITY OF THE ACCUMULATOR PUMPS (III.A.2.f.)

- Isolate the accumulator bottles or spherical from the pumps & manifold.
- Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
 1. Open the HCR valve, {if applicable}
 2. Close annular
 3. With **pumps** only, time how long it takes to regain the required manifold pressure.
 4. Record elapsed time 70 sec. Test fails if it takes over 2 minutes.
- a. {950 psi for a 1500 psi system} b. {1200 psi for a 2000 & 3000 psi system}