

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other Instructions on
reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 6863

6. IF INDIAN, ALLOTTEE, OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Anadarko Federal #

9. WELL NO.

10. FIELD AND POOL, OR WILDCAT

Querecho Plains Queen ~~Pemrose~~

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

27-T18S-R32E

12. COUNTY OR PARISH 13. STATE

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-" for such proposals.)

1. OIL ☒ GAS ☐
WELL ☒ WELL ☐ OTHER

2. NAME OF OPERATOR

Mewbourne Oil Company

3. ADDRESS OF OPERATOR

Box 5270 Hobbs, New Mexico 88241

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

990' FWL & 1650' FSL Unit L

XXXXXXXXXXXXXXXXXXXX

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

16

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other) Temporarily Abandon

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any
proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perti-
nent to this work.)*

7" CIBP set a 3750' and capped with 30 sks. of cement. Hole was loaded w/ 2% KCL
and casing was pressure tested to 500# for 3 hrs. 30 mins. Held O. K. Test
was witnessed by Jack Johnson with the Hobbs BLM office. Chart has been submitted o
to Adam Salameh with Carlsbad BLM.

RECEIVED
OCT 31 12 05 PM '91
CARLSBAD
AREA HEADQUARTERS

18. I hereby certify that the foregoing is true and correct

SIGNED

Bill Pierce

TITLE Production SUPT.

DATE 10/28/91

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

