

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM 4609

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 WELL ☐ GAS WELL ☒ OTHER		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR MEWBOURNE OIL COMPANY		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR Box 7698, Tyler, TX 75711		8. FARM OR LEASE NAME FEDERAL "C"	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' from West Line and 1980' from South Line		9. WELL NO. 1	
14. PERMIT NO.		10. FIELD AND POOL, OR WILDCAT North Lusk Morrow Gas	
15. ELEVATIONS (Show whether DP, RT, CG, etc.) 3727.7 GR		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 27-18S-32E	
		12. COUNTY OR PARISH Lea	13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☐	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANS ☐	(Other) <u>Set intermediate</u>	

(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 pertinent to this work.) *

Ran 55 jts. 32# and 48 jts. 24# 8-5/8" casing, set @ 4505'. Cemented w/1200 sx. Halliburton lite and 1/4# flocele per sx., 15% salt per sx, 300 Class "C" w/1/4# flocele/sx. PD @ 2:10 a.m. 7/02/78. Circulated 30 sx. WOC 18 hrs. Pressure tested to 1000#.

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

SIGNED Mary Jane Lotz TITLE Production Clerk DATE 7/19/78

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

