

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

DATE

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM 4609

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

## 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR MEWBOURNE OIL COMPANY		8. FARM OR LEASE NAME FEDERAL "E"
3. ADDRESS OF OPERATOR P. O. Box 7698, Tyler, TX 75711		9. WELL NO. 4
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1650' from North Line and 2310' from East Line		10. FIELD AND POOL, OR WILDCAT Undesignated
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 27-T18S-R32E
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3737.9 GL		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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Status Report - Spud - Set 8-5/8"</u>	
(Other) <input type="checkbox"/>		(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.)\*

Spud @ 11:50 A.M. 7/17/78.

Ran 30 jts. 8-5/8" casing, set @ 1220'. Cemented w/300 sx. lite with 1/4# flocele/sx. and 200 sx. Class C 2% CaCl. Circulated 35 sx. PD @ 6:30 P.M. 7/18/78.

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

SIGNED

*Marjorie Letz*

TITLE

Production Clerk

DATE 7/25/78

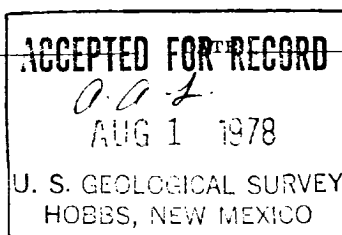
(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

\*See Instructions on Reverse Side



RECEIVED

AUG 8 1978

U.S. CONSERVATION COMMISSION  
ROBES, N. M.

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18 JUL 27 11 9 28