

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

N. M. OIL CONVS. COMMISSION

P. O. BOX 1980

ROSWELL, NEW MEXICO 88240

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

Form approved.
Budget Bureau No. 42-R1424.

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, Texas 75711		9. WELL NO. 6	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FNL & 1980' FEL		10. FIELD AND POOL, OR WILDCAT Querecho Plains - Queen Associated Pool	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 27-18S-32E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3754.2' GL		12. COUNTY OR PARISH Lea	
		13. STATE N.M.	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

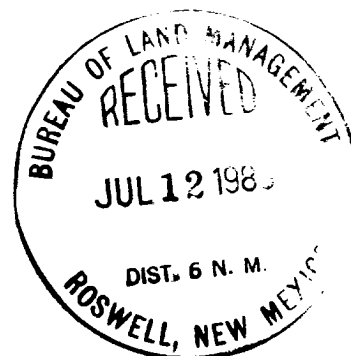
WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input checked="" type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

(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.)*

Spudded @ 6:00 PM 6/30/83.

7/2/83 - Ran 30 jts 8-5/8", 24#, J-55 ST&C casing set @ 1220' KB - cemented with 360 sacks PCL w/1/4# celloseal & 2% CaCl and 200 sacks Class "C" w/2% CaCl. Circulated 50 sacks. Plug down @ 10:15 A.M.



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

SIGNED [Signature] TITLE Exploration Secretary
(This space for Federal or State office use) **ACCEPTED FOR RECORD**

DATE 7/7/83

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE [Signature]
JUL 12 1983

DATE _____