

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPlicate
(Other instructions on
reverse side)

88240

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 50920

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Federal "I"

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Reeves - Penn

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

14-T18S-35E

12. COUNTY OR PARISH 13. STATE

Lea

N.M.

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

2. NAME OF OPERATOR

Mewbourne Oil Company

3. ADDRESS OF OPERATOR

P.O. 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

1980' FSL & 1980' FEL

14. PERMIT NO.

API 30-025-29345

15. ELEVATIONS (Show whether DE, RL, OR, etc.)

3876.4 GL

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

NOTICE OF INTENTION TO

TEST WATER SHUT OFF

PLUG OR AFTER CLOSING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

X

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS. Afford 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.*

1. Set CIBP @ 10,850' and dump 35' of cement on top.

2. Set CIBP @ 10,350' and dump 35' of cement on top.

3. Perforate Basal Bone Springs from 9982' - 10,002' w/ 1 SPF.

4. Acidize perms. w/2500 gals. of acid.

5. Production test well.

Existing CIBP'S at 12,170' & 11,047'

Commence operations upon BLM approval.

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

SIGNED *W. H. Navy*

TITLE District Superintendent DATE 02/27/86

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE 3-5-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

RECEIVED
MAR 10 1986
C.C.D.
HOBBS OFFICE