

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions  
verse side)

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

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"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-4609	
2. NAME OF OPERATOR Mewbourne Oil Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR P. O. Box 7698, Tyler, Texas 75711		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1980' FNL & 660' FEL 330		8. FARM OR LEASE NAME Federal "E"	
14. PERMIT NO. API #30-025-29629		9. WELL NO. 12	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3751' GR		10. FIELD AND POOL, OR WILDCAT Querecho Plains - Upper Bone Springs	
		11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA 27-18S-32E	
		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 type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <u>Set Intermediate Casing</u> <input checked="" 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.) \*

3/25/86 - Ran guide shoe, 42.27' shoe joint, float collar, 5 centralizers, 55 joints 8-5/8" 32# J-55 ST&C (2147'), 47 joints 8-5/8" 24# J-55 ST&C (2036.94'), 2 joints 8-5/8" 32# J-55 ST&C (85.38'). Total 4313.09', set at 4310'. Howco cemented with 1600 sxs Class "C" lite with 5# salt and 3# gilsonite and 200 sxs of "C" neat. PD to 4269' at 1:00 A.M. 3/25/86. Circ. 50 sxs.

ACCEPTED FOR RECORD

MAR 28 1986

CARLSBAD, NEW MEXICO

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

SIGNED [Signature] TITLE Engr. Oprns. Sec.

DATE 3/25/86

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side