

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRII  
(Other instruction  
verse side)

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

LEASE DESIGNATION AND SERIAL NO.

NM-4609

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, Texas 75711		9. WELL NO. 13	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface  1980' FNL & 1980' FWL		10. FIELD AND POOL, OR WILDCAT Querecho Plains - Upper Bone Springs	
14. PERMIT NO. API #30-025-29994		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA 27-18S-32E	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3725' GR		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:		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) Set Intermediate Pipe <input checked="" 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.)

8/21/87 - Ran 8-5/8" intermediate casing as follows:

1	Guide Shoe	1.54'
1	Shoe Joint	45.92'
1	Float Collar	1.84'
49 jts.	32# New LS casing	2219.39'
44 jts.	24# New K-55 casing	1845.98'
3 jts.	32# New LS casing	139.79'
Total		4254.46'

Set @ 4248'. WEstern cemented with 1200 sacks of Pacesetter Lite "C" w/6% gel + 1# of Hy-seal per sack followed by 300 sacks Class "C" w/1% CaCl<sub>2</sub>. Plug down to 4205' @ 3:45 PM 8/20/87. Float held OK. Circulated 50 sacks.

RECEIVED

AUG 27 10 43 AM '87

CARLSBAD, NEW MEXICO

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

SIGNED

TITLE

Engr. Oprns. Sec.

DATE

8/24/87

(This space for Federal or State office use)

APPROVED BY

TITLE

ACCEPTED FOR RECORD

DATE

CONDITIONS OF APPROVAL, IF ANY:

AUG 31 1987

\*See Instructions on Reverse Side

CARLSBAD, NEW MEXICO

RECEIVED

SEP 8 1987

OCD  
HOBBS OFFICE