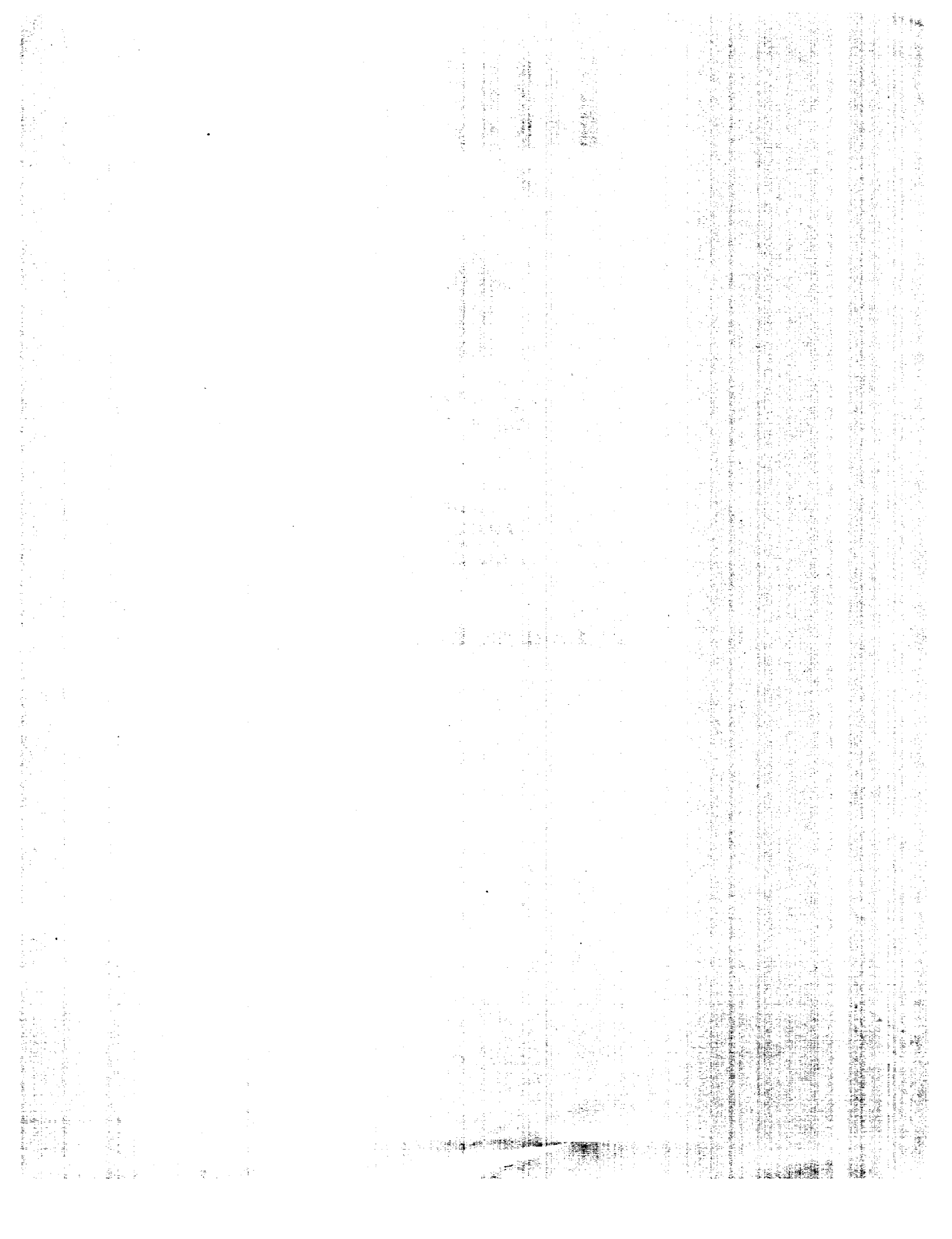


**LTR**



**Job separation sheet**



**AMENDED AS TO NAME**

Submits 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Grande Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION**

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

I. Operator <b>Mewbourne Oil Company</b>		Well AM No. <b>30-025- 30129</b>
Address <b>P. O. Box 7698, Tyler, Texas 75711</b>		
Reason(s) for Filing (Check proper box)		
New Well <input type="checkbox"/>	Change in Transporter of: Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	Other (Please explain) <b>Change Well Name. Effective Date: November 1, 1993 Old Name: Federal "L" #4 QBSSU 13 #4</b>
If change of operator give name and address of previous operator		

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name <b>QBSSU 3</b>	Well No. <b>4</b>	Pool Name, including Formation <b>Querecho Plains - Upper Bone Spring</b>	Kind of Lease <input checked="" type="checkbox"/> Federal <input type="checkbox"/>	Lease No. <b>NM-0554244</b>
Location				
Unit Letter <b>B</b>	<b>660</b>	Feet From The <b>North</b> Line and <b>1650</b>	Feet From The <b>East</b> Line	
Section <b>23</b>	Township <b>18-South</b>	Range <b>32-East</b>	NMPM, Lea County	

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil or Condensate <input checked="" type="checkbox"/> <b>Phillips Petroleum - Trucks</b>	Address (Give address to which approved copy of this form is to be sent) <b>4001 Penbrook, Odessa, Texas 79762</b>
Name of Authorized Transporter of Casinghead Gas or Dry Gas <input type="checkbox"/> <b>GPM Gas Corporation</b>	Address (Give address to which approved copy of this form is to be sent) <b>Bartlesville, Oklahoma 74004</b>
If well produces oil or liquids, give location of tanks.	
Unit <b>0</b> Sec. <b>23</b> Twp. <b>18S</b> Rge. <b>32E</b>	In gas actually connected? <b>Yes</b> When?

If this production is commingled with that from any other lease or pool, give commingling order number:

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> New Well <input type="checkbox"/> Workover <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Same Res'v <input type="checkbox"/> Diff Res'v <input type="checkbox"/>
Date Spudded	Date Compl. Ready to Prod.
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation
Perforations	Top Oil/Gas Pay
TUBING, CASING AND CEMENTING RECORD	
HOLE SIZE	CASING & TUBING SIZE
DEPTH SET	
SACKS CEMENT	

**V. TEST DATA AND REQUEST FOR ALLOWABLE**

OIL WELL. (Test must be after recovery of total volume of liquid oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)			
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

**GAS WELL.**

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

**VI. OPERATOR CERTIFICATE OF COMPLIANCE**

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature  
**Gaylon Thompson, Engr./Opns. Secretary**  
Printed Name  
October 27, 1993 (903) 561-2900  
Date Telephone No.

**OIL CONSERVATION DIVISION  
FEB 15 1994**

Date Approved

By

Orig. Signed by  
**Paul Kautz**  
Geologist

Title

**INSTRUCTIONS:** This form is to be filed in compliance with Rule 1104

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance Rule 111.

2) Forms of this form must be filled out for allowable on new and recompleted wells.

3) Only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such.

4) See Form C-104 must be filed for each well.



**LTR**



**Job separation sheet**

*(continued)*

The map shows the northern Adriatic coastline of Italy. Sampling stations are indicated by numbers 1 to 10. Station 1 is near the Gulf of Genoa, station 2 is further east, and stations 3 through 10 are distributed along the coast from Liguria to the Veneto region. The map includes a latitude scale from 44°N to 45°N and a longitude scale from 10°E to 12°E. A scale bar indicates distances up to 100 km.

**RESEARCH**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. OIL CONS. COMMISSION  
P.O. BOX 1980  
HOBBS, NEW MEXICO 88240  
FORM APPROVED  
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well  
☐ Oil Well ☐ Gas Well ☒ Other INJECTION WELL

2. Name of Operator  
MEWBOURNE OIL COMPANY

505-393-5905

3. Address and Telephone No.  
P.O. BOX 5270 HOBBS, NM 88241

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
660' FNL & 1650' FNL SEC 23-T18S-R32E  
FEL

5. Lease Designation and Serial No.  
BLM UNIT # NMNM88523-X

6. If Indian, Allottee or Tribe Name  
LEASE # NM-0554244

7. If Unit or CA, Agreement Designation  
UNITIZATION ORDER R-9985  
INJECTION ORDER R-9737-A

8. Well Name and No.  
OPBSSU 3-4

9. API Well No.  
30-025-30129

10. Field and Pool, or Exploratory Area  
QUERECHO PLAINS BONE SPRINGS

11. County or Parish, State  
LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input checked="" type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other	<input type="checkbox"/> Dispose Water

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

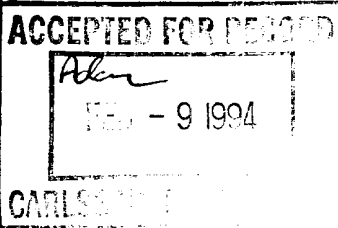
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

12-03-93 MIRU RAM WELL SERVICING RIG, POOH AND LAY DOWN RODS AND PUMP, POOH AND SCAN-A-LOG TBG.

12-04-93 RIH W/ PERMA-LATCH PACKER AND POLYETHYLENE LINED TBG, SET PACKER @ 8341'. CIRCULATED PACKER FLUID.

12-06-93 RAN INTEGRITY TEST ON ANNULUS.

12-12-93 START INJECTION.



RECEIVED  
JAN 18 11 25 AM '94  
CAPT. ...  
AREA ...

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

Signed

Title

ENGINEER

Date 1-06-94

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

\*See instruction on Reverse Side

## GENERAL INSTRUCTIONS

This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special in-

structions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

## SPECIFIC INSTRUCTIONS

*Item 4*—If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

*Item 13*—Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive

zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

## NOTICE

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

**AUTHORITY:** 30 U.S.C. 181 et. seq., 351 et. seq., 25 U.S.C. et. seq.; 43 CFR 3160.

**PRINCIPAL PURPOSE** — The information is to be used to evaluate, when appropriate, approve applications, and report completion of secondary well operations, on a Federal or Indian lease.

**ROUTINE USES:**

- (1) Evaluate the equipment and procedures used during the proposed or completed subsequent well operations.
- (2) Request and grant approval to perform those actions covered by 43 CFR 3162.3-2(2).
- (3) Analyze future applications to drill or modify operations in light of data obtained and methods used.
- (4)(5) Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

**EFFECT OF NOT PROVIDING INFORMATION** — Filing of this notice and report and disclosure of the information is mandatory once an oil or gas well is drilled.

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501, et. seq.) requires us to inform you that: This information is being collected in order to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

This information will be used to report subsequent operations once work is completed and when requested, to obtain approval for subsequent operations not previously authorized.

Response to this request is mandatory for the specific types of activities specified in 43 CFR Part 3160.

## BURDEN HOURS STATEMENT

Public reporting burden for this form is estimated to average 25 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management, (Alternate) Bureau Clearance Officer, (WO-771), 18 and C Streets, N.W., Washington, D.C. 20240, and the Office of Management and Budget, Paperwork Reduction Project (1004-0135), Washington, D.C. 20503.