Form 3160-5 June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N.M. OIL CONS DAMISSION FORM APPROVED P.O. BOX 1980 HOSBS, NEW MEXICO

Budget Bureau No 1004-0135

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		Designat			

NM-40452

CHAIDDY	NOTICES	AND	REPORTS	ON	WELLS
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۱ ۸	16	Indian	Allones	or Tribe	Non	

Water Shut-Off Conversion to Injection

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

Dispose Water

Do not use this form for proposals to dri Use "APPLICATION FOR	6. If Indian, Allonee of Inde Name		
SUBMIT	7. If Unit or CA, Agreement Designation		
1. Type of Well Oil Well Well Other INJECTION 2. Name of Operator MEWBOURNE OIL COMPANY 3. Address and Telephone No P.O. BOX 5270, HOBBS, NM 88 4. Location of Well (Footage, Sec., T., R., M., or Survey Delay 1980' FSL & 660' FEL SEC 14-T18S-R32E	8. Well Name and No. QPBSSCC 12C-4 SHINNERY "14" FED # 4 9. API Well No. 30-025-30643 10. Field and Pool, or Exploratory Area OUERECHO PAINS BONE SPRING 11. County or Parish, State LEA COUNTY, NM		
12. CHECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPOR	RT, OR OTHER DATA	
TYPE OF SUBMISSION TYPE OF ACTION			
Notice of Intent Subsequent Report	Abandonment Recompletion Plugging Back	Change of Plans New Construction Non-Routine Fracturing	

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.)*

Other INTEGRITY TEST

AN INTEGRITY TEST HAS BEEN PERFORMED ON THE SHINNERY FED. #4. THIS WELL IS INCLUDED IN THE MEWBOURNE OIL COMPANY'S QUERECHO PLAINS WATERFLOOD. THIS TEST WAS PERFORMED ON DEC. 23, 1993 AND WAS WITNESSED BY GARY WINK OF THE NMOCCD. THE CHART FOR THIS TEST IS ATTACHED.

Title (This space for Federal or State office use) Title

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 states.

ENGINEER

or representations as to any matter within its jurisdiction

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

Subsequent Report

Final Abandonment Notice

"See instruction on Reverse Bide"

