Form 3160-5 (August 2007) OCD Artesia

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010

5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.					NMNM89052		
					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well		8. Well Name and No. APACHE 25 FED 17H					
☑ Oil Well ☐ Gas Well ☐ Oth	<del></del>						
2. Name of Operator Contact: ERIN L WORKMAN DEVON ENERGY PRODUCTION CO EMail: ERIN.WORKMAN@DVN.COM					9. API Well No. 30-015-41116-00-X1		
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102  3b. Phone No. Ph: 405-55.			(include area code !-7970				
4. Location of Well (Footage, Sec., T	11. County or Parish, and State						
Sec 25 T22S R30E NESE 145			EDDY COUNTY	, NM			
12. CHECK APPI	ROPRIATE BOX(ES) TO	) INDICATE	NATURE OF	NOTICE, RE	PORT, OR OTHER	R DATA	
TYPE OF SUBMISSION			F ACTION	,			
	☐ Acidize	Acidize		☐ Production	on (Start/Resume)	■ Water Shut-Off	
■ Notice of Intent	☐ Alter Casing	☐ Fract	ure Treat	□ Reclama	tion	■ Well Integrity	
☐ Subsequent Report	Casing Repair	□ New	Construction	□ Recompl	ete	Other	
☐ Final Abandonment Notice	□ Change Plans	Plug	and Abandon	☐ Temporarily Abandon		Change to Original A PD	
	☐ Convert to Injection	☐ Plug Back ☐ Wate		■ Water Di	sposal	. •	
Attach the Bond under which the wor following completion of the involved testing has been completed. Final At determined that the site is ready for fine Devon Energy respectfully recommanded. Please see the attachment: Pressure Test Conditions of A	operations. If the operation repandonment Notices shall be fill in all inspection.)  quests a change in the contached documentation of the crifficate	sults in a multiple ed only after all ruffer on Scan The specification	exas due to the ns and pressu	completion in a no ding reclamation e prior hose b re test chart.	ew interval, a Form 316, have been completed, a eing	0-4 shall be filed once	
14. I hereby certify that the foregoing is  Comm  Name(Printed/Typed) ERIN L W	# Electronic Submission For DEVON ENERO itted to AFMSS for proces	GY PRODUCT <b>(</b> C	ON CO LP, sent IY DICKERSON	to the Carlsba on 04/24/2013	ıd		
Signature (Electronic S	Submission)		Date 04/23/2	2013			
	THIS SPACE FO	OR FEDERA	L OR STATE	OFFICE US	SE .		
Approved By CHRISTOPHER WALLS			TitlePETROLEUM ENGINEER Date 04/2		Date 04/25/2013		
ertify that the applicant holds legal or equitable title to those rights in the subject lease thich would entitle the applicant to conduct operations thereon.			Office Carlsbad				





Du-Tex; Inc. Ph: (361) 887-9807 Töll Free: (888) 887-9807 Fax: (361) 887-0812 134-44th St. Corpus Christl, TX 78405

e-mail: dutex@dutex.com

## PRESSURE TEST CERTIFICATE

Customer:	P & W.SALES	Test Date:		6/17/2009	
Customer Ref::	VERBAL - BRANDON	Ĉertificate No. :	D-061709-2	er i gegen ergene.	
învolce No.:	160770	Created By:	RORY BOYO		
			A Chapter To see that	•	
		in to see			
Product Description:	10K3.040.0CK31/1610KFLANGE				
	<del></del>				
End Fitting 1:	3 1/16 10K FLANGE	End fitting 2:	3 1/10 10K FLANGE		
Gales Part No. :	4779-4291	Hosê Serlət No. ;	L27714071808D-061709-2	** **** ** ** ** ** ** ** ** ** ** ** *	
Assembly Code:	L27714071808	Test Pressure:	15,000 PSI		
Working Pressure;	10,000 PSI			15. 41	

Du-Tex, Inc. certifies that the above hose assembly has been tested to the APL7K Specification requirements and passed the hydrostatic test per, Fourth Edition, Addendum 2, Test Pressure 9.10.7.1 and per table C.1 to 15,000 psi in accordance with this product number. Hose burst pressure 9:10:7.2 exceeds the minimum of 2.5 times the working pressure per table C.1.

Quality Manager:

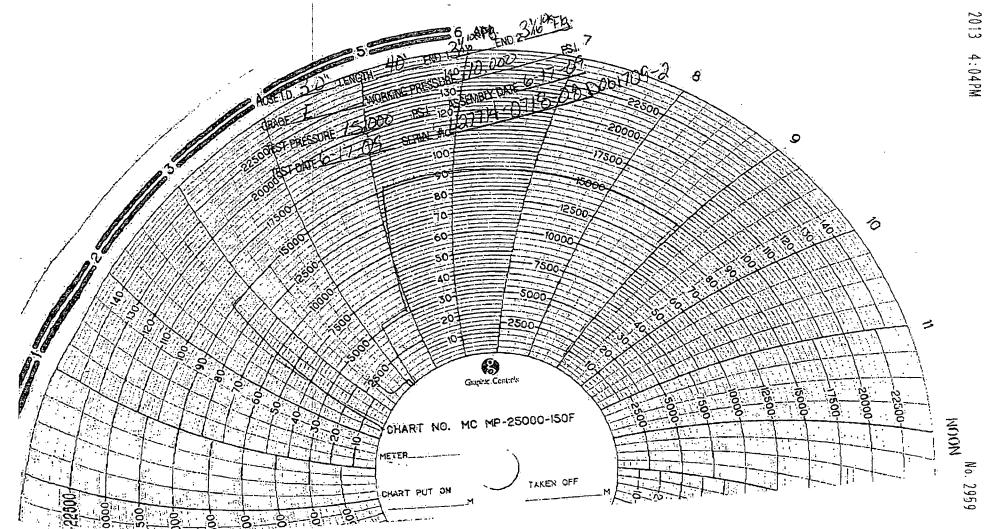
Dalo: Signaturo: RORY B. 9/14/2012

Technical Supervisor:

Date:

Signature:

3/24/2012



## **Co-Flex line Conditions of Approval**

Variance approved to use flex line from BOP to choke manifold. Check condition of flexible line from BOP to choke manifold, replace if exterior is damaged or if line fails test. Line to be as straight as possible with no hard bends and is to be anchored according to Manufacturer's requirements. The flexible hose can be exchanged with a hose of equal size and equal or greater pressure rating. Anchor requirements, specification sheet and hydrostatic pressure test certification matching the hose in service, to be onsite for review. If the BLM inspector questions the straightness of the hose, a BLM engineer will be contacted and will review in the field or via picture supplied by inspector to determine if changes are required (operator shall expect delays if this occurs).