

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM100561
2. Name of Operator DEVON ENERGY PRODUCTION CO, LP		6. If Indian, Allottee or Tribe Name
3a. Address 333 WEST SHERIDAN AVENUE OKLAHOMA CITY, OK 73102		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 405-552-3622		8. Well Name and No. STRAWBERRY 7 FED COM 11H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 7 T19S R31E NENE 900FNL 125FEL		9. API Well No. 30-015-42490
		10. Field and Pool, or Exploratory HACKBERRY; BONE SPRING, N
		11. County or Parish, and State EDDY COUNTY COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

(5/25/15-5/27/15) Spud @ 16:30. TD 17-1/2? hole @ 640?. RIH w/ 16 jts 13-3/8? 48# H-40 LTC, set @ 640?. Lead w/ 492 sx C/C, yld 1.73 cu ft/sk. Tail w/ 200 sx C/C, yld 1.33 cu ft/sk. Disp w/ 94 bbls FW. Circ 50 bbls cmt to surf. PT BOPE @ 250/3000 psi, held each test 10 min, OK. PT csg to 1200 psi, held 30 min, OK.

(5/30/15-5/31/15) TD 12-1/4? hole @ 3375?. RIH w/ 79 jts 9-5/8? 36# J-55 LTC csg, set @ 3375?. Lead w/ 991 sx POZ 60/40/0/C, yld 1.73 cu ft/sk. Tail w/ 350 sx POZ 60/40/0/C, yld 1.38 cu ft/sk. Disp w/ 257 bbls FW. Circ 110 bbls cmt to surf. PT BOPE @ 250/3000 psi, held each test 10 min high & 10 min low, OK. PT csg to 1500 psi for 30 min, OK.

(6/11/15-6/16/15) TD 8-3/4? hole @ 12446?. RIH w/ 276 jts 5-1/2? 17# L-80 BT csg, set @ 12446?. 1st lead w/ 537 sx C/H, yld 2.01 cu ft/sk. Tail w/ 1421 sx C/H, yld 1.28 cu ft/sk. Disp w/ 288 bbls FW.

NM OIL CONSERVATION
ARTESIA DISTRICT

OCT 05 2015

RECEIVED

RWD 10/6/15
Accepted for record
NMOC

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

Electronic Submission #306572 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO, LP, sent to the Carlsbad

Name (Printed/Typed) MEGAN MORAVEC	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 06/24/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Additional data for EC transaction #306572 that would not fit on the form

32. Additional remarks, continued

Drop bomb, open DVT set @ 4520.7?. 2nd lead w/ 412 sx CIC, yld 2.89 cu ft/sk. Disp w/ 105 bbis FW.
TOC @ surf. RR @ 06:00.