Form 3160-5 (March 2012)	DEPA	UNITED STATE		OCD Artesia		FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2014	
BUREAU OF LAND MANAGEME						Expires: October 31, 2014 5. Lease Serial No, NMNM099040	
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an						6. If Indian, Atlottee or Tribe Name	
bo not abandon	use this fo ed well. U	rm for proposals t se Form 3160-3 (A	o drill or to PD) for suc	o re-enter ar ch proposal	n Is.		
SUBMIT IN TRIPLICATE - Other instructions on page 2.						7. If Unit of CA/Agreeme	ent, Name and/or No.
1. Type of Well		· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	·•·			
Oil Well Gas Well Other						8. Well Name and No. 1) Arcturus 18 Fed 7H	2) Sirius 17 Fed Com 7H
2. Name of Operator Devon Energy Production Co LP (6137)						9. API Well No. 1) 30-015-42618 2) 30-015-41762	
3a. Address 3b. Phone 1				, ,		10. Field and Pool or Exp	•
PO BOX 250, ARTESIA, NM 88211 575-748						Hackberry; Bone	·
<ol> <li>4. Location of Well (Foo</li> <li>1) 2080 FSL &amp; 20 FWL, L-17</li> <li>2) 2080 FSL &amp; 70 FWL, L-17</li> </ol>	)	11. County or Parish, State Eddy County, NM					
	12. CHECK	THE APPROPRIATE BO	X(ES) TO IND	ICATE NATUR	E OF NOTIO	CE, REPORT OR OTHER	DATA
TYPE OF SUBMISSION TYPE OF ACTION							
Notice of Intent		Acidize	Deep	en	Prod	oduction (Start/Resume) Water Shut-Off	
		Alter Casing	Fract	ure Treat	Recl	amation	Well Integrity
Subsequent Report		Casing Repair	New New	Construction		mplete	Other
		Change Plans		and Abandon	_	porarily Abandon	Downsizing
Final Abandonment		Convert to Injection	Plug			or Disposal	nd approximate duration thereof. If
т	HIS LOCATIC	N HAS BEEN DOWNSI	ZED. ACRES	S RECLAIMED	= 0.4360	Accepte N	ed for record MOCD
NM OIL CONSERVATION ARTESIA DISTRICTAccepted for Record Purposes. Approval Subject to Onsite Inspection. If BLM Objectives are not achieved, additional work may be required. Date: 3-2-10MAR 1 4 2016Date: 3-2-10Signature:Comparison of the second purposes. Approval Subject to Onsite Inspection.							
RECEIVED							
14. I hereby certify that the	e foregoing is tru	e and correct Name (Printe	ed/Typed)		_	$\checkmark$	
Denise Menoud (575-746-5544) Title Admin Field Support							
Signature denise Manaud Date 02/10/2016							
		THIS SPACE	FOR FEDE	RAL OR ST	TATE OF	FICE USE	
Approved by							
that the applicant holds lega entitle the applicant to cond	al or equitable tit luct operations th		ect lease which w	ould Office		Da	
		S.C. Section 1212, make it entations as to any matter w			and willfully	to make to any department of	or agency of the United States any false,
(Instructions on page 2)							

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