

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS**
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*5. Lease Serial No.
NM89057

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.

SNAPPING 12-1 FED 523H

2. Name of Operator

DEVON ENERGY PRODUCTION COMPANY

Contact: LINDA GOOD

Email: linda.good@dvn.com

9. API Well No.

30-015-44758-00-X1

3a. Address

333 WEST SHERIDAN AVENUE
OKLAHOMA, OK 73102

3b. Phone No. (include area code)

Ph: 405-552-6558

10. Field and Pool or Exploratory Area

PURPLE SAGE-WOLF CAMP (GAS)

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 12 T26S R31E SENW 2325FNL 1880FWL
32.058487 N Lat, 103.734222 W LonAccepted For Record
NMOC D
1-16-19

11. County or Parish, State

EDDY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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 Drilling Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

(12/3/2018 - 12/6/2018) Spudded @ 18:00 MST. TD 17-1/2" hole @ 1098'. RIH w/25 jts 13-3/8" 54.50# J-55 BTC csg, set @ 1083'. Lead w/1128 sx CIC, yld 1.35 cu ft/sx. Disp w/161 bbl cmt to surf. PT BOPE 250/5000 psi, held each test 10 min, OK. PT csg to 1500 psi for 30 min, OK.

(12/7/2018 - 12/8/2018) TD 12-1/4" hole @ 4200'. RIH w/97 jts 40# J-55 BTC csg, set @ 4186'. Lead w/1165 sx CIC, yld 1.87 cu ft/sx. Tail w/425 sx CIC, yld 1.33 cu ft/sx. Disp w/314 bbl frsh wtr. Circ 125 bbl cmt to surf. PT BOPE 250/5000 psi, held each test 10 min, OK. PT csg to 2765 psi for 30 min, OK.

(12/16/2018 - 12/17/2018) TD 8-3/4" hole @ 9148' & 8-1/2" hole @ 16,207'. RIH w/393 jts 5-1/2" 17# P110RY CDC-HTQ csg, set @ 16,195'. Lead w/1165 sx CIC, yld 1.87 cu ft/sx. Tail w/425 sx CIC, yld 1.33 cu ft/sx. Disp w/375 bbl frsh wtr. No cmt returned to surf. Full returns throughout

ENTERED
12/16/19

RECEIVED

JAN 10 2019

DISTRICT II-ARTESIA O.C.D.

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

Electronic Submission #448154 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION COMPANY, sent to the Carlsbad
Committed to AFMSS for processing by PRISCILLA PEREZ on 12/18/2018 (19PP0645SE)

Name (Printed/Typed) LINDA GOOD

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 12/18/2018

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

DEC 18 2018

/s/ Jonathon Shepard

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.

(Instructions on page 2)

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

Additional data for EC transaction #448154 that would not fit on the form

32. Additional remarks, continued

job. PT BOPE 5000 psi for 15 min each test, OK. RR: 14:00 MST.