# Form 3160-5 (June 2015)

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

	FORM APPROVED
	OMB NO. 1004-0137
E	pires: January 31, 2018

SUNDRY I  Do not use thi  abandoned wel	<ul><li>5. Lease Serial No. NMNM22080</li><li>6. If Indian, Allottee or Tribe Name</li></ul>								
SUBMIT IN 1	7. If Unit or CA/Agreement, Name and/or No.								
1. Type of Well Gas Well Oth	8. Well Name and No. TOMB RAIDER 1-12 FED 528H								
Name of Operator     DEVON ENERGY PRODUCT	9. API Well No. 30-015-44810-00-S1								
3a. Address 333 WEST SHERIDAN AVEN OKLAHOMA, OK 73102	3b. Phone No. (include area code) Ph: 405-552-6560			10. Field and Pool or Exploratory Area LIVINGSTON RIDGE					
4. Location of Well (Footage, Sec., T.	11. County or Parish, State								
Sec 1 T23S R31E 360FNL 98 32.340710 N Lat, 103.722954			EDDY COUNTY, NM						
12. CHECK THE AF	PROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE,	REPORT, OR OTH	ER DAT	A		
TYPE OF SUBMISSION	TYPE OF ACTION								
□ Notice of Intent	☐ Acidize	□ Dee	pen	en Production (Start/F		ne) Water Shut-Off			
_	☐ Alter Casing	☐ Hyd	raulic Fracturing	□ Reclam	ation	☐ Well	Integrity		
Subsequent Report	□ Casing Repair	Construction	☐ Recomp	olete	Other	•			
☐ Final Abandonment Notice ☐ Change Plans		Plug	and Abandon	☐ Tempor	Temporarily Abandon				
☐ Convert to Injection ☐ Plug			g Back	🛭 Water I	Water Disposal				
13. Describe Proposed or Completed Ope If the proposal is to deepen directions 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 fi Site Name: Tomb Raider 1-12	ally or recomplete horizontally, k will be performed or provide operations. If the operation re oandonment Notices must be fil inal inspection.	give subsurface the Bond No. or sults in a multip	locations and measure file with BLM/BIA e completion or reco	ared and true ve A. Required sul completion in a	ertical depths of all pertine bsequent reports must be to new interval, a Form 3160	ent markers filed within 0-4 must be	and zones. 30 days filed once		
Name(s) of formation(s) producing water on the lease: Leonard B  RECEVED									
2. Amount of water produced	from all formations in barr				A				
4. How water is stored on lease: 6-750bbl water tanks located at the Tomb Raider 1 CTB 3  ACCEPTED FOR RECORD FEB 1 4 2019  ACCEPTED FOR RECORD FEB 1 4 2019  NMOCD DISTRICT II-ARTESIA O.C.D.									
14. I hereby certify that the foregoing is	true and correct. Electronic Submission #	452829 verifie	d by the BLM We	II Informatio	n Svstem				
Comm	For DEVON ENERG	Y PRODUCTION	DN COM LP, sent	t to the Carls	bad				
Name (Printed/Typed) JENNIFEI	•		AH MCKINNEY on 02/01/2019 (19DLM0292SE) Title REGHLATORY COMPLIANCE ANALYSTIN						
		17	ACCEPT	ED FOR RECO					
Signature (Electronic Submission)			Date 02/01/2	2019					
THIS SPACE FOR FEDERAL OR STATE OFFICE REF = 7 2019									
4 12			Tide	Perse	o Asmlaue				
Approved By		Title	BUREAU	OF LAND MANAGEME	NT Dat	.c			
Conditions of approval, if any, are attache certify that the applicant holds legal or eq which would entitle the applicant to condu-	uitable title to those rights in the	Office	CARL	SBAD FIELD OFFICE					
Title 18 I I S.C. Section 1001 and Title 43	IISC Section 1212 make it a	crime for any n	erson knowingly and	d willfully to m	ake to any department or	agency of th	he United		

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

### Additional data for EC transaction #452829 that would not fit on the form

### 32.-Additional remarks, continued

- 5. How water is moved to the disposal facility: piped
- 6. Identify the Disposal Facility by:
- A. Facility Operators Name: a) Devon Energy Corp b) Mesquite SWD, Inc

- B. Facility or well name/number:
  a) Todd 2 Water Treatment Facility 2RF-114
  b) Bran SWD 1 API #30-025-43473 SWD-1558
  C. Type of Facility or well (WDW) (WIW): a) b) WDW
- D.1) Location: Section 2 Township 23S Range 31E
- D.2) Location: ?? SE/4 SE/4 Section 11 Township 24S Range 31E