Form 3160-5 (February 2005)

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

SUN

FORM APROVED OMB NO. 1004-0135 EXPIRES: March 31, 2007

5. Lease Serial No.

DONE TO OF ENTRY WITH TO EMELTY	
NDRY NOTICES AND REPORTS ON WELLS	OCD-ARTESI

	n for proposals to drill or to re-enter an e Form 3160-3 (APD) for such proposals	SHL: NMNM012121 BHL: NM 036379 6. If Indian, Allottee or Tribe Name
	BMIT IN TRIPLICATE	S. II Iliquali, Allottee of Pribe Name
	DIVIT IN TRIPLICATE	7. Unit or CA Agreement Name and No.
1a. Type of Well 🔃 Ga	s Well Other	8 Well Name and No.
2. Name of Operator .  DEVON ENERGY PRODUCT	TON COMPANY, LP	9. API Well No.
Address and Telephone No.		30-015-38607
20 N. Broadway, Oklah	oma City, Ok 73102-8260 405-235-3611	10. Field and Pool, or Exploratory
	ly and in accordance with Federal requirements)* 24S R31E	Poker Lake East; Delaware  11. County or Parish State
BHL: 200 FNL & 660 FWL		Eddy NM
· · · · · · · · · · · · · · · · · · ·	( APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO	<u> </u>
TYPE OS SUBMISSION	TYPE OF ACTION	
deepen directionally or recomplete horizontally, give s the Bond No. on file with BLM/BIA. Required subsequinterval, a Form 3160-4 shall be filed once testing has determined that the site is ready for final inspection)  Devon Energy Production Comp	Alter Casing Fracture Treat Reclama Casing Repair New Construction Recomplement Change Plans Plug and Abandon Tempora Convert to Injection Plug Back Water Dearly state all pertinent details, and give pertinent dates, including estimated date of starting a ubsurface location and measured and true vertical depths of all pertinent markers and zones. If the been completed. Final Abandonment Notices shall be filed only after all requirement, including any L. P. will complete the following action:    Application   Plug Back   Water Dearly State   Water De	lete Other  arily Abandon isposal any proposed work and approximate duration thereof. If the proposal Attach the Bond under which the work will be performed or provide e operation results in a multiple completion or recompletion in a new g reclamation, have been completed, and the operator has
	RECEIVED  APR 11 2011  NMOCD ARTESIA	APR 5 2011 /s/ JD Whitlock Jr BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
14. I hereby certify that the foregoing is true and correct		
Signed June 2	Name Judy A. Barnett X8699 Title Regulatory Specialist	Date 4/1/2011
(This space for Federal or State Office us	e)	
Approved by Conditions of approval, if any:	Title	Date
Trille 10 0.5.5. Section 1501, makes it a chiffe for any	person knowingly and willtainy to make any department or agency of the office distribution.  within its judiciliotion.	96, понивав от наивинет этакетістів от тергезентаціоніз то шту тисцег

\*See Instruction on Reverse Side

11-81-4 BCG Accepted for record - NMOCD