Form	3160-5
(Aprıl	2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
OM B No 1004-0137
Expires March 31, 200
Dispired Transfer DI, 20

BOREAU OF EARLD MANAGEMENT			Ī	5. Lease Senal No	
SUNDRY NOTICES AND REPORTS ON WELLS			<u> </u>	NM 03356	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160 - 3 (APD) for such proposals.				6 If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE- Other instructions on reverse side.			1	7. If Unit or CA/Agreement, Name and/or No. Northeast Blanco Unit	
1. Type of Well				8 Well Name and No	
2 Name of Operator			NEBU 32	NEBU 324N	
2 Name of Operator Devon Energy Production Company, L.P.				9 API Well No 30-045-34340	
		3b Phone No (include area code) 405-552-7917		10 Field and Pool, or Exploratory Area	
4 Location of Well (Footage, Sec., T, R, M, or Survey Description)				Basin Dakota 11 County or Parish, State San Juan, NM	
SL - 60' FSL & 520' FWL, SW SW, Unit M, Sec. 11, T31N, R7W BHL - x,x FxL & x,x' FxL, NW NW, Unit D, Sec. 14, T31N, R7W					
12. CHECK AF	PPROPRIATE BOX(ES) T	O INDICATE NATURE OF NO	TICE, REPORT, OR	OTHER DATA	
TYPE OF SUBMISSION		TYPE OF ACT	TION		
Notice of Intent ✓ Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans	Fracture Treat Recla New Construction Record Plug and Abandon Temp	nction (Start/Resume) mation mplete oranly Abandon	Water Shut-Off Well Integrity Other	
Final Abandonment Notice	Convert to Injection	Plug Back Water	r Disposal		
testing has been completed Fit determined that the site is ready On 8/7/07 the above well wholes. On the same date the	nal Abandonment Notices shall for final inspection) was perforated in the Dakothee well was fracture treated	on results in a multiple completion or reco be filed only after all requirements, include a zone from 8,161' to 8,293' with 4 S with 70,367 gal Delta 200 with 55,4 adient was 0.79 psi/ft.	ling reclamation, have been PF, 0.34" EHD, 120 deg 73# 20/40 Ottawa sand.	completed, and the operator has gree phasing, for a total of 28	
14 Thereby certify that the fore Name (Printed/Typed)	going is true and correct			3 09	
Melisa Castro	,	Title Senior Staff	Operations Technician	~	
Signature Signature		Date Au	sust 17.	2007	
	THIS SPACE FOR	R FEDERAL OR STATE Ó	FFICE USE		
Approved by		Title	Da	ite	
Conditions of approval, if any, are a certify that the applicant holds legal which would entitle the applicant to	or equitable title to those right conduct operations thereon	ts in the subject lease Office			
Title 18 U.S.C. Section 1001 and Title States any false, fictitious or fraudul	e 43 U.S.C. Section 1212, make	it a crime for any person knowingly and	d willfully to make to any	department or agency of the United	

(Instructions on page 2)

ACCEPTED FOR RECORD

AUG 2 2 2007



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