

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

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

J.	Lease Senai No.
	NMNM98826

SUNDRY N	OTICES AI	ND REPORTS	S ON WELLS
Do not use this	form for pro	posals to dril	l or to re-enter_ag
abandoned well	Hen form 2	460-2 (A DD) &	or cuch prome

ELLS OCD Hobbs 6. If Indian, Allottee or Tribe Name SUBMIT IN TRIPLICATE - Other instructions on page 2 MAY If Unit or CA/Agreement, Name and/or No. NMNM138943 Well Name and No. STRAY CAT 8-5 FED COM 213H 1. Type of Well ☑ Oil Well ☐ Gas Well ☐ Other 2. Name of Operator Contact: JENNIFER H
DEVON ENERGY PRODUCTION CONS-Mail: jennifer.harms@dvn.com 9. API Well No. JENNIFER HARMS 30-025-44600-00-X1 3a. Address 3b. Phone No. (include area code) 10. Field and Pool or Exploratory Area P O BOX 250 Ph: 405-552-6560 SAND DUNES ARTESIA, NM 88201 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 11. County or Parish, State Sec 8 T23S R32E 602FSL 1989FEL LEA COUNTY, NM 32.313469 N Lat, 103.694603 W Lon 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION □ Acidize Deepen □ Production (Start/Resume) ■ Water Shut-Off Notice of Intent □ Alter Casing ☐ Hydraulic Fracturing □ Reclamation ■ Well Integrity ☐ Subsequent Report ■ New Construction Other □ Casing Repair ☐ Recomplete ☐ Final Abandonment Notice □ Change Plans □ Plug and Abandon □ Temporarily Abandon ☐ Convert to Injection ☐ Plug Back ■ 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 recomplete 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. Site Name: Stray Cat 8-5 Fed Com 213H Name(s) of formation(s) producing water on the lease: Sand Dunes; Bone Spring Amount of water produced from all formations in barrels per day: 5538bbls per day 4. How water is stored on lease: 6-750bbl water tanks located at the Stray Cat 8 CTB 2 14. I hereby certify that the foregoing is true and correct Electronic Submission #459334 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION COM LP, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 03/27/2019 (19PP1446SE) REGULATORY COMPLIANCE ANALYST Name (Printed/Typed) JENNIFER HARMS BAGGEBTED FOR RECORD Signature (Electronic Submission) Date THIS SPACE FOR FEDERAL OR STATE OFFICE USE 7 2019 Date Approved By 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 BUREAU OF LAND MANAGEMENT

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.

which would entitle the applicant to conduct operations thereon.

(Instructions on page 2) \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED

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## Additional data for EC transaction #459334 that would not fit on the form

- 32. Additional remarks, continued
- 5. How water is moved to the disposal facility: piped  $\checkmark$
- 6. Identify the Disposal Facility by:
- A. Facility Operators Name: a) Mesquite SWD, Inc b) Mesquite SWD, Inc
- C. Type of Facility or well (WDW) (WIW): a) WDW b) WDW
- D.1) Location by: E/4 SE/4 Section 11 Township 24S Range 31E
- D.2) Location by:SW4/SW4 Section 30 Township 22S Range 32E