

U.S. Department of the Interior BUREAU OF LAND MANAGEMENT Sundry Print Report

Well Name: SERPENTINE 35-26 FED Well Location: T22S / R33E / SEC 35 / County or Parish/State: /

COM NWSW /

Well Number: 2H Type of Well: OIL WELL Allottee or Tribe Name:

Lease Number: NMNM113969 Unit or CA Name: Unit or CA Number:

US Well Number: 300255140500X1 Well Status: Drilling Well Operator: DEVON ENERGY

PRODUCTION COMPANY LP

## **Subsequent Report**

**Sundry ID: 2748890** 

Type of Submission: Subsequent Report

Type of Action: Drilling Operations

Date Sundry Submitted: 08/31/2023 Time Sundry Submitted: 09:41

**Date Operation Actually Began:** 08/08/2023

**Actual Procedure:** SURFACE CASING - (8/8/23 – 8/8/23) SPUD 8/8/23 @ 03:30. TD 14-3/4" HOLE @ 1136'. SURF RIH W/ 26 JTS 10-3/4" 45.50# J-55 CSG, SET @ 1124'. LEAD W/ 720 SX CL C, YLD 1.77 CU FT/SK. DISP W/ 104 BBLS WATER. CIRC 201 SX CMT TO SURF. PT BOPE 250/5000 PSI, HELD EACH TEST FOR 10 MIN, OK. PT CSG TO 1500 PSI FOR 30 MINS, OK.

eived by OCD: 5/7/2024 8:21:58 AM Well Name: SERPENTINE 35-26 FED County or Parish/State: / Well Location: T22S / R33E / SEC 35 /

COM

NWSW /

Well Number: 2H

Type of Well: OIL WELL

**Allottee or Tribe Name:** 

Lease Number: NMNM113969

**Unit or CA Name:** 

**Unit or CA Number:** 

**US Well Number:** 300255140500X1

Well Status: Drilling Well

Operator: DEVON ENERGY PRODUCTION COMPANY LP

# **Operator**

I certify that the foregoing is true and correct. 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. Electronic submission of Sundry Notices through this system satisfies regulations requiring a

**Operator Electronic Signature: WINDELL SALTER** Signed on: AUG 31, 2023 09:41 AM

Name: DEVON ENERGY PRODUCTION COMPANY LP

Title: Agent

Street Address: 333 W SHERIDAN AVE

City: OKLAHOMA CITY State: OK

Phone: (405) 919-9461

Email address: WINDELL.SALTER@DVN.COM

## **Field**

**Representative Name:** 

**Street Address:** 

City:

State:

Zip:

Phone:

**Email address:** 

## **BLM Point of Contact**

**BLM POC Name: JONATHON W SHEPARD** 

**BLM POC Title:** Petroleum Engineer

**BLM POC Phone:** 5752345972

BLM POC Email Address: jshepard@blm.gov

**Disposition:** Accepted

Disposition Date: 09/06/2023

Signature: Jonathon Shepard



U.S. Department of the Interior BUREAU OF LAND MANAGEMENT Sundry Print Report!4

Well Name: SERPENTINE 35-26 FED Well Location: T22S / R33E / SEC 35 / County or Parish/State: /

COM NWSW /

Well Number: 2H Type of Well: OIL WELL Allottee or Tribe Name:

Lease Number: NMNM113969 Unit or CA Name: Unit or CA Number:

**US Well Number:** 300255140500X1 **Well Status:** Drilling Well **Operator:** DEVON ENERGY

PRODUCTION COMPANY LP

## **Subsequent Report**

**Sundry ID:** 2755279

Type of Submission: Subsequent Report

Type of Action: Drilling Operations

Date Sundry Submitted: 10/06/2023 Time Sundry Submitted: 01:36

**Date Operation Actually Began:** 08/26/2023

**Actual Procedure:** Intermediate Casing - (8/26/23 – 8/30/23) TD 9-7/8" HOLE @ 11853'. RIH W/ 268 JTS 8-5/8" 32# P-110 CSG SET @ 11834'. LEAD W/ 585 SX CL C, YLD 3.68 CU FT/SK. TAIL W/ 335 SX CL C, YLD 1.44 CU FT/SK. DISP W/ 716 BBLS WATER. CIRC 23 SX CMT TO SURF. PT BOPE 250/5000 PSI, HELD EACH TEST FOR 10 MIN, OK. PT CSG TO 2700 PSI FOR 30 MINS, OK.

eived by OCD: 5/7/2024 8:21:58 AM Well Name: SERPENTINE 35-26 FED County or Parish/State: / Well Location: T22S / R33E / SEC 35 /

COM NWSW /

Well Number: 2H

Type of Well: OIL WELL

**Allottee or Tribe Name:** 

**Unit or CA Number:** 

**Unit or CA Name:** 

**US Well Number:** 300255140500X1 Well Status: Drilling Well Operator: DEVON ENERGY

PRODUCTION COMPANY LP

# **Operator**

Lease Number: NMNM113969

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Signed on: OCT 06, 2023 01:36 PM **Operator Electronic Signature: WINDELL SALTER** 

Name: DEVON ENERGY PRODUCTION COMPANY LP

Title: Agent

Street Address: 333 W SHERIDAN AVE

City: OKLAHOMA CITY State: OK

Phone: (405) 919-9461

Email address: WINDELL.SALTER@DVN.COM

## **Field**

**Representative Name:** 

**Street Address:** 

City: State: Zip:

Phone:

**Email address:** 

## **BLM Point of Contact**

**BLM POC Name: JONATHON W SHEPARD BLM POC Title:** Petroleum Engineer

**BLM POC Phone:** 5752345972 BLM POC Email Address: jshepard@blm.gov

**Disposition:** Accepted Disposition Date: 10/11/2023

Signature: Jonathon Shepard

Form 3160-5 (June 2019)

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

| FORM APPROVE         | Ð    |
|----------------------|------|
| OMB No. 1004-01      | 37   |
| Expires: October 31, | 2021 |

5. Lease Serial No.

| SUNDRY NOTICES AND REPORTS ON WELLS  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 | r Tribe Name                            |
| abandoned wen. C                                                                                                                                             | ose Form 3160-3 (APD) for suc                                                                                                   | ni proposais.               | TARTE COATA               |                                         |
| SUBMIT IN TRIPLICATE - Other instructions on page 2                                                                                                          |                                                                                                                                 |                             | /. If Unit of CA/Agree    | ement, Name and/or No.                  |
| 1. Type of Well                                                                                                                                              |                                                                                                                                 |                             | 8. Well Name and No.      |                                         |
| Oil Well Gas W                                                                                                                                               | Vell Other                                                                                                                      |                             | 8. Well Name and No.      |                                         |
| 2. Name of Operator                                                                                                                                          |                                                                                                                                 |                             | 9. API Well No.           |                                         |
| 3a. Address                                                                                                                                                  | 3b. Phone No.                                                                                                                   | (include area code)         | 10. Field and Pool or I   | Exploratory Area                        |
|                                                                                                                                                              |                                                                                                                                 | •                           |                           |                                         |
| 4. Location of Well (Footage, Sec., T.,R                                                                                                                     | .,M., or Survey Description)                                                                                                    |                             | 11. Country or Parish,    | State                                   |
|                                                                                                                                                              |                                                                                                                                 |                             |                           |                                         |
| 12. CHE                                                                                                                                                      | CK THE APPROPRIATE BOX(ES) TO INC                                                                                               | DICATE NATURE OF NOTI       | ICE, REPORT OR OTH        | IER DATA                                |
| TYPE OF SUBMISSION                                                                                                                                           |                                                                                                                                 | TYPE OF AC                  | TION                      |                                         |
| Notice of Intent                                                                                                                                             | Acidize Deep                                                                                                                    | en Prod                     | luction (Start/Resume)    | Water Shut-Off                          |
| Notice of filterit                                                                                                                                           | Alter Casing Hydra                                                                                                              | nulic Fracturing Recla      | amation                   | Well Integrity                          |
| Subsequent Report                                                                                                                                            | Casing Repair New                                                                                                               | Construction Reco           | omplete                   | Other                                   |
|                                                                                                                                                              |                                                                                                                                 | and Abandon Temp            | porarily Abandon          |                                         |
| Final Abandonment Notice                                                                                                                                     | Convert to Injection Plug                                                                                                       | Back Wate                   | er Disposal               |                                         |
|                                                                                                                                                              | ns. If the operation results in a multiple comices must be filed only after all requirements                                    |                             |                           |                                         |
| 14. I hereby certify that the foregoing is                                                                                                                   | true and correct. Name (Printed/Typed)                                                                                          |                             |                           |                                         |
|                                                                                                                                                              |                                                                                                                                 | Title                       |                           |                                         |
| Signature                                                                                                                                                    |                                                                                                                                 | Date                        |                           |                                         |
|                                                                                                                                                              | THE SPACE FOR FEDE                                                                                                              | ERAL OR STATE OF            | ICE USE                   |                                         |
| Approved by                                                                                                                                                  |                                                                                                                                 |                             |                           |                                         |
| ••                                                                                                                                                           |                                                                                                                                 | Title                       |                           | Date                                    |
|                                                                                                                                                              | ned. Approval of this notice does not warrant<br>quitable title to those rights in the subject lead<br>duct operations thereon. |                             |                           |                                         |
| Fitle 18 U.S.C Section 1001 and Title 43                                                                                                                     | U.S.C Section 1212, make it a crime for an                                                                                      | y person knowingly and will | Ifully to make to any de  | partment 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)

### **GENERAL INSTRUCTIONS**

This form is designed for submitting proposals to perform certain well operations and reports of such operations when completed as indicated on Federal and Indian lands pursuant to applicable Federal law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area or regional procedures and practices, are either shown below, will be issued by or may be obtained from the local Federal office.

### SPECIFIC INSTRUCTIONS

*Item 4* - Locations on Federal or Indian land should be described in accordance with Federal requirements. Consult the local Federal office for specific instructions.

Item 13: Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by the local Federal office. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to the top of any tubing left in the hole; method of closing top of well and date well site conditioned for final inspection looking for approval of the abandonment. If the proposal will involve **hydraulic fracturing operations**, you must comply with 43 CFR 3162.3-3, including providing information about the protection of usable water. Operators should provide the best available information about all formations containing water and their depths. This information could include data and interpretation of resistivity logs run on nearby wells. Information may also be obtained from state or tribal regulatory agencies and from local BLM offices.

### **NOTICES**

The privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et seq., 351 et seq., 25 U.S.C. 396; 43 CFR 3160.

PRINCIPAL PURPOSE: The information is used to: (1) Evaluate, when appropriate, approve applications, and report completion of subsequent well operations, on a Federal or Indian lease; and (2) document for administrative use, information for the management, disposal and use of National Resource lands and resources, such as: (a) evaluating the equipment and procedures to be used during a proposed subsequent well operation and reviewing the completed well operations for compliance with the approved plan; (b) requesting and granting approval to perform those actions covered by 43 CFR 3162.3-2, 3162.3-3, and 3162.3-4; (c) reporting the beginning or resumption of production, as required by 43 CFR 3162.4-1(c)and (d) analyzing future applications to drill or modify operations in light of data obtained and methods used.

ROUTINE USES: Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions in connection with congressional inquiries or to consumer reporting agencies to facilitate collection of debts owed the Government.

EFFECT OF NOT PROVIDING THE INFORMATION: Filing of this notice and report and disclosure of the information is mandatory for those subsequent well operations specified in 43 CFR 3162.3-2, 3162.3-3, 3162.3-4.

The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

**BURDEN HOURS STATEMENT:** Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240

(Form 3160-5, page 2)

### **Additional Information**

### **Location of Well**

0. SHL: NWSW / 1346 FSL / 651 FWL / TWSP: 22S / RANGE: 33E / SECTION: 35 / LAT: 32.344685 / LONG: -103.549603 ( TVD: 0 feet, MD: 0 feet ) PPP: NWSW / 1420 FSL / 330 FWL / TWSP: 22S / RANGE: 33E / SECTION: 35 / LAT: 32.344893 / LONG: -103.550643 ( TVD: 12072 feet, MD: 12130 feet ) PPP: SWSW / 160 FSL / 335 FWL / TWSP: 22S / RANGE: 33E / SECTION: 26 / LAT: 32.3559184 / LONG: -103.5506591 ( TVD: 12275 feet, MD: 16100 feet ) BHL: NWNW / 20 FNL / 330 FWL / TWSP: 22S / RANGE: 33E / SECTION: 26 / LAT: 32.369939 / LONG: -103.550677 ( TVD: 12275 feet, MD: 21201 feet )



U.S. Department of the Interior BUREAU OF LAND MANAGEMENT

Sundry Print Report

Well Name: SERPENTINE 35-26 FED Well Location: T22S / R33E / SEC 35 / County or Parish/State: /

COM NWSW /

Well Number: 2H Type of Well: OIL WELL Allottee or Tribe Name:

Lease Number: NMNM113969 Unit or CA Name: Unit or CA Number:

**US Well Number:** 300255140500X1 **Well Status:** Drilling Well **Operator:** DEVON ENERGY

PRODUCTION COMPANY LP

# **Subsequent Report**

**Sundry ID: 2755280** 

Type of Submission: Subsequent Report

Type of Action: Drilling Operations

Date Sundry Submitted: 10/06/2023 Time Sundry Submitted: 01:38

**Date Operation Actually Began:** 09/02/2023

**Actual Procedure:** Production Casing - (9/2/23 – 9/15/23) TD 7-7/8" HOLE @ 21352'. PRODUCTION RIH W/ 471 JTS 5-1/2" 20# P110 CSG, SET @ 21338'. LEAD W/ 1505 SX CMT, CLASS H, YLD 1.53 CU FT/SK. DISP W/ 470 BBLS WATER. ETOC @ 8554'. PRODUCTION CSG WILL BE TESTED BEFORE COMPLETIONS. RR 9/19/23 @ 10:00.

Page 9 of eived by OCD: 5/7/2024 8:21:58 AM Well Name: SERPENTINE 35-26 FED County or Parish/State: / Well Location: T22S / R33E / SEC 35 / NWSW /

COM

**Allottee or Tribe Name:** 

Well Number: 2H Type of Well: OIL WELL

Lease Number: NMNM113969 **Unit or CA Name: Unit or CA Number:** 

**US Well Number:** 300255140500X1 Well Status: Drilling Well Operator: DEVON ENERGY

PRODUCTION COMPANY LP

# **Operator**

I certify that the foregoing is true and correct. 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. Electronic submission of Sundry Notices through this system satisfies regulations requiring a

Signed on: OCT 06, 2023 01:38 PM **Operator Electronic Signature: WINDELL SALTER** 

Name: DEVON ENERGY PRODUCTION COMPANY LP

Title: Agent

Street Address: 333 W SHERIDAN AVE

City: OKLAHOMA CITY State: OK

Phone: (405) 919-9461

Email address: WINDELL.SALTER@DVN.COM

## **Field**

**Representative Name:** 

**Street Address:** 

City: State: Zip:

Phone:

**Email address:** 

## **BLM Point of Contact**

**BLM POC Name: JONATHON W SHEPARD BLM POC Title:** Petroleum Engineer

**BLM POC Phone:** 5752345972 BLM POC Email Address: jshepard@blm.gov

**Disposition:** Accepted Disposition Date: 10/11/2023

Signature: Jonathon Shepard

Form 3160-5 (June 2019)

# UNITED STATES DEPARTMENT OF THE INTERIOR

| FORM APPROVED            |
|--------------------------|
| OMB No. 1004-0137        |
| Expires: October 31, 202 |

| 5. | Lease | Serial | No |
|----|-------|--------|----|
|    |       |        |    |

| BURI                                                                                                                                                         | EAU OF LAND MANAGEMENT                                                                                                     |                     | J. Lease Berrai No.                |                                         |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|---------------------|------------------------------------|-----------------------------------------|
| SUNDRY NOTICES AND REPORTS ON WELLS  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                              |
| abandonea wen.                                                                                                                                               | ose reim eree e (Ar B) for suc                                                                                             | л ргорозию.         | 7 IfII.::4 -FCA/A                  |                                         |
|                                                                                                                                                              | <b>TRIPLICATE</b> - Other instructions on page                                                                             | 9 2                 | /. If Unit of CA/Agree             | ement, Name and/or No.                  |
| 1. Type of Well                                                                                                                                              |                                                                                                                            |                     | 8. Well Name and No.               |                                         |
| Oil Well Gas W                                                                                                                                               | Vell Other                                                                                                                 |                     |                                    |                                         |
| 2. Name of Operator                                                                                                                                          |                                                                                                                            |                     | 9. API Well No.                    |                                         |
| 3a. Address                                                                                                                                                  | 3b. Phone No.                                                                                                              | (include area code) | 10. Field and Pool or F            | Exploratory Area                        |
| 4. Location of Well (Footage, Sec., T.,R                                                                                                                     | .,M., or Survey Description)                                                                                               |                     | 11. Country or Parish,             | State                                   |
| 12. CHE                                                                                                                                                      | CK THE APPROPRIATE BOX(ES) TO INI                                                                                          | DICATE NATURE OF NO | L<br>ΓΙCE, REPORT OR OTH           | IER DATA                                |
| TYPE OF SUBMISSION                                                                                                                                           |                                                                                                                            | TYPE OF A           | CTION                              |                                         |
| Notice of Intent                                                                                                                                             | Acidize Deep                                                                                                               |                     | oduction (Start/Resume)            | Water Shut-Off                          |
|                                                                                                                                                              |                                                                                                                            | ~ <u>=</u>          | clamation                          | Well Integrity                          |
| Subsequent Report                                                                                                                                            |                                                                                                                            |                     | complete                           | Other                                   |
| Final Abandonment Notice                                                                                                                                     | Change Plans Plug  Convert to Injection Plug                                                                               | _                   | mporarily Abandon<br>ater Disposal |                                         |
| _                                                                                                                                                            | peration: Clearly state all pertinent details, in                                                                          |                     | 1                                  | rk and approximate duration thereof. If |
| completed. Final Abandonment Not is ready for final inspection.)                                                                                             | ns. If the operation results in a multiple comices must be filed only after all requirements                               |                     |                                    |                                         |
| 14. I hereby certify that the foregoing is                                                                                                                   | true and correct. Name (Printed/Typed)                                                                                     | Title               |                                    |                                         |
| Signature                                                                                                                                                    |                                                                                                                            | Date                |                                    |                                         |
|                                                                                                                                                              | THE SPACE FOR FEDI                                                                                                         | ERAL OR STATE O     | FICE USE                           |                                         |
| Approved by                                                                                                                                                  |                                                                                                                            |                     |                                    |                                         |
| ,                                                                                                                                                            |                                                                                                                            | Title               |                                    | Date                                    |
| Conditions of approval, if any, are attacherify that the applicant holds legal or ewhich would entitle the applicant to con-                                 | ned. Approval of this notice does not warrant<br>quitable title to those rights in the subject leaduct operations thereon. | tor                 | -                                  |                                         |
|                                                                                                                                                              | 3 U.S.C Section 1212, make it a crime for an                                                                               |                     | illfully to make to any de         | partment or agency of the United States |

(Instructions on page 2)

### **GENERAL INSTRUCTIONS**

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The Paperwork Reduction Act of 1995 requires us to inform you that:

The BLM collects this information to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

Response to this request is mandatory.

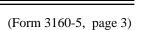
The BLM would like you to know that you do not have to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

**BURDEN HOURS STATEMENT:** Public reporting burden for this form is estimated to average 8 hours per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management (1004-0137), Bureau Information Collection Clearance Officer (WO-630), 1849 C St., N.W., Mail Stop 401 LS, Washington, D.C. 20240

### **Additional Information**

### **Location of Well**

0. SHL: NWSW / 1346 FSL / 651 FWL / TWSP: 22S / RANGE: 33E / SECTION: 35 / LAT: 32.344685 / LONG: -103.549603 ( TVD: 0 feet, MD: 0 feet ) PPP: NWSW / 1420 FSL / 330 FWL / TWSP: 22S / RANGE: 33E / SECTION: 35 / LAT: 32.344893 / LONG: -103.550643 ( TVD: 12072 feet, MD: 12130 feet ) PPP: SWSW / 160 FSL / 335 FWL / TWSP: 22S / RANGE: 33E / SECTION: 26 / LAT: 32.3559184 / LONG: -103.5506591 ( TVD: 12275 feet, MD: 16100 feet ) BHL: NWNW / 20 FNL / 330 FWL / TWSP: 22S / RANGE: 33E / SECTION: 26 / LAT: 32.369939 / LONG: -103.550677 ( TVD: 12275 feet, MD: 21201 feet )



District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720 District II

811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 District III

1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division** 1220 S. St Francis Dr. **Santa Fe, NM 87505** 

COMMENTS

Action 341505

### **COMMENTS**

| Operator:                           | OGRID:                         |  |  |  |
|-------------------------------------|--------------------------------|--|--|--|
| DEVON ENERGY PRODUCTION COMPANY, LP | 6137                           |  |  |  |
| 333 West Sheridan Ave.              | Action Number:                 |  |  |  |
| Oklahoma City, OK 73102             | 341505                         |  |  |  |
|                                     | Action Type:                   |  |  |  |
|                                     | [C-103] Sub. Drilling (C-103N) |  |  |  |

#### COMMENTS

| Created By    | Comment                                                   | Comment<br>Date |
|---------------|-----------------------------------------------------------|-----------------|
| matthew.gomez | Intermediate and production sundries accepted for record. | 5/31/2024       |

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II 811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720

District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division** 1220 S. St Francis Dr. **Santa Fe, NM 87505** 

CONDITIONS

Action 341505

### **CONDITIONS**

| Operator:                           | OGRID:                         |
|-------------------------------------|--------------------------------|
| DEVON ENERGY PRODUCTION COMPANY, LP | 6137                           |
| 333 West Sheridan Ave.              | Action Number:                 |
| Oklahoma City, OK 73102             | 341505                         |
|                                     | Action Type:                   |
|                                     | [C-103] Sub. Drilling (C-103N) |

#### CONDITIONS

| Created By    |      | Condition<br>Date |  |
|---------------|------|-------------------|--|
| matthew.gomez | None | 5/31/2024         |  |