

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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.5. Lease Serial No.
NMNM114990

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
JAYHAWK 7-6 FED FEE COM 7H9. API Well No.
30-025-4553810. Field and Pool or Exploratory Area
BOBCAT DRAW; UWC11. County or Parish, State
LEA COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on page 2**1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
DEVON ENERGY PRODUCTION COMPANY
Contact: REBECCA DEAL
Email: Rebecca.Deal@dvn.com3a. Address
333 WEST SHERIDAN AVE
OKLAHOMA CITY, OK 731023b. Phone No. (include area code)
Ph: 405-228-84294. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 7 T26S R34E Mer NMP SWSE 615FSL 2090FEL

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input checked="" type="checkbox"/> 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 recompleat 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 recompleat 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.

WATER PRODUCTION & DISPOSAL INFORMATION

Site Name: Jayhawk 7-6 Fed Fee Com 7H

1. Name(s) of formation(s) producing water on the lease: Bobcat Draw; Upper Wolfcamp
2. Amount of water produced from all formations in barrels per day: 4710 BWPD
4. How water is stored on lease: 3-750BBL Water Tanks
5. How water is moved to the disposal facility: Piped

14. I hereby certify that the foregoing is true and correct.

**Electronic Submission #504780 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION COMPANY, sent to the Hobbs**

Name (Printed/Typed) REBECCA DEAL

Title REGULATORY COMPLIANCE PROFESSI

Signature (Electronic Submission)

Date 02/27/2020

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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 which would entitle the applicant to conduct operations thereon.	Office _____	

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.

(Instructions on page 2)

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Additional data for EC transaction #504780 that would not fit on the form

32. Additional remarks, continued

6. Identify the Disposal Facility by:

A. Facility Operators Name: A) Devon Energy B) OWL Operating, LLC

B. Facility or well name/number: A) Rattlesnake 16 SWD B) Hillstone SWD

C. Type of Facility or well (WDW) (WIW):) WDW B) WDW

D.1) Location by ? ? SW/4 NW/4 Section 16 Township 26S Range 34E

D.2) Location by ? ? SE/4 SE/4 Section 25 Township 25S Range 36E