	UNITED STATES EPARTMENT OF THE IN	UTEDIOD UCD	Hobbs	OMB N	APPROVED O. 1004-0135 July 31, 2010
BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS			OB B C	5. Lease Serial No. NMNM43564	
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on reverse side.					eement, Name and/or No.
1. Type of Well Oil Well Gas Well ÖOt	SIVE.	ENED		8. Well Name and No. GAUCHO 21 FEDERAL 2H	
2. Name of Operator DEVON ENERGY PRODUC		DENISE MENOUD houd@dvn.com	J	9. API Well No. 30-025-40626	
3a. Address PO BOX 250 ARTESIA, NM 88211		3b. Phone No. (include area code) Ph: 575-746-5544		10. Field and Pool, or Exploratory DELAWARE	
4. Location of Well (Footage, Sec., 5	······	11. County or Parish, and State		and State	
Sec 21 T22S R34E 375FSL 3 32.370975 N Lat, 103.48231		LEA COUNTY COUNTY, NM			
12. CHECK APP	ROPRIATE BOX(ES) TO	INDICATE NATURE OF	NOTICE, R	EPORT, OR OTHE	R DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent	🗖 Acidize	Deepen	Product	tion (Start/Resume)	UWater Shut-Off
Subsequent Report	Alter Casing	Fracture Treat	Reclamation		Well Integrity
				Recomplete Other	
Final Abandonment Notice	Change Plans	Plug and Abandon Plug Back	Temporarily Abandon Water Disposal		
ACRES RECLAIMED = 1.280	JC)	Appro If BLi addit Date:	oval Subj V Objecti ional wor	Record Purpo ject to Onsite ives are not a rk may be req -13 Anno	Inspection. chieved,
14. I hereby certify that the foregoing is	s true and correct.		\leftarrow		<u> </u>
	For DEVON ENER	03824 verified by the BLM We GY PRODUCTION CO LP, ser	nt to the Hobb	os	
Name(Printed/Typed) DENISE N	~ 1	JOHNNY DICKERSON on 04/17/2013 () Title AUTHORIZED REPRESENTATIVE			
Signature (Electronic)	Date 04/08/2	Date 04/08/2013			
		R FEDERAL OR STATE		SE	
	·	······		· · · · · · · · · · · · · · · · · · ·	
Approved By onditions of approval, if any, are attache ertify that the applicant holds legal or eq				Date	
which would entitle the applicant to condu	act operations thereon.	Office	d willfully to m		
itle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fractulen	statements or representations as t	any person knowingly an	u winnuny to Mi i.	and to any department or	
** OPERA	TOR-SUBMITTED ** OF	PERATOR-SUBMITTED	** OPERAT	OR-SUBMITTED	** [
				APR	2 4 2013

