

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTNMOCD  
HobbsFORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Serial No. NMNM125401
2. Name of Operator DEVON ENERGY PRODUCTION CO Contact: LUCRETIA A MORRIS Email: Lucretia.Morris@devon.com	6. If Indian, Allottee or Tribe Name
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 405-552-3303	8. Well Name and No. BILLIKEN 6 FEDERAL 2H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 6 T26S R35E SESW 265FSL 1345FWL	9. API Well No. 30-025-42686-00-X1
	10. Field and Pool, or Exploratory JABALINA
	11. County or Parish, and State LEA COUNTY, NM

**12. CHECK 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"/> Fracture Treat	<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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input 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 recomple 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

(8/14/15 ? 8/16/15) Spud @ 18:30. TD 17-1/2? hole @ 1150?. RIH w/ 27 jts 13-3/8? 54.50# J-55 BTC csg, set @ 1150?. Tail w/ 1200 sx CIC, yld 1.34 cu ft/sk. Disp w/ 171.5 bbls FW. Circ 126 bbls cmt to surf. PT BOPE @ 250/3000 psi, OK. PT csg to 1500 psi for 30 min, OK.

(8/18/15 ? 8/21/15) TD 12-1/4? hole @ 5350?. RIH w/ 98 jts 9-5/8? 40# J-55 BTC csg and 26 jts 9-5/8 HCK-55 BTC csg, set @ 5342.9?. Lead w/ 1375 sx CIH, yld 1.87 cu ft/sk. Tail w/ 395 sx CIH, yld 1.33 cu ft/sk. PT csg to 2464 psi for 30 min, OK.

(8/29/15 ? 8/31/15) TD 8-3/4? hole @ 13644?. RIH w/ 280 jts 5-1/2? 17# P110RY BTC csg and 25 jts 5-1/2? 17# P110RY DWC/C csg, set 13644?. Lead w/ 1130 sx CIH, yld 2.30 cu ft/sk. Tail w/ 1095 sx CIH, yld 1.22 cu ft/sk. Disp w/ 316 bbls FW. RR @ 06:00.

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

Electronic Submission #322929 verified by the BLM Well Information System

For DEVON ENERGY PRODUCTION CO LP, sent to the Hobbs

Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/13/2015 (16JAS0104SE)

Name (Printed/Typed) LUCRETIA A MORRIS

Title REGULATORY COMPLIANCE ANALYST

Signature (Electronic Submission)

Date 11/09/2015

**ACCEPTED FOR RECORD** THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

/S/ DAVID R. GLASS

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 to knowingly and willfully make any false, fictitious or fraudulent statements or representations as to any

E-PERMITTING - - New Well \_\_\_\_\_  
Comp \_\_\_\_\_ P&A \_\_\_\_\_ TA \_\_\_\_\_  
CSNG PM Loc Chng \_\_\_\_\_  
ReComp \_\_\_\_\_ Add New Well \_\_\_\_\_  
Cancl Well \_\_\_\_\_ Create Pool \_\_\_\_\_

sent or agency of the United

**\*\* BLM REVISED \*\* BLM REVISED \*\* B****\*\* ISSED \*\*****DEC 08 2015****DEC 09 2015**