

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	8. Well Name and No. MEAN GREEN 27 FED 2H
2. Name of Operator DEVON ENERGY PRODUCTION CO LP Contact: LUCRETIA MORRIS Email: Lucretia.Morris@dvn.com	9. API Well No. 30-025-42415
3a. Address 333 WEST SHERIDAN OKLAHOMA CITY, OK 73102-5015	10. Field and Pool, or Exploratory WC025 G08 S263412K; B.S.
3b. Phone No. (include area code) Ph: 405-552-3303	11. County or Parish, and State LEA COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 22 T26S R34E SESE 100FSL 780FEL	

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	
	<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 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 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.)

8/22/15-9/21/15: MIRU WL & PT. TIH & ran CBL, found ETOC @ 6500'. TIH w/pump through frac plug and guns. Perf Bone Spring, 12764'-17230', total 768 holes. Frac'd 12764'-17230' in 21 stages. Frac totals 23,940 gals 15% HCl Acid, 409,000# Okla #1 100 Mesh Sand, 4,846,000# Ottawa Sand 30/50, 1,238,000# EconoProp 30/50. ND frac, MIRU PU, NU BOP, DO plugs & CO. CHC, FWB, ND BOP. RIH w/ 372 jts 2-7/8" L-80 tbg, set @ 11969.6'. TOP.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #318926 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO LP, sent to the Hobbs Committed to AFMSS for processing by LINDA JIMENEZ on 10/20/2015	
Name (Printed/Typed) LUCRETIA MORRIS	Title REGULATORY COMPLIANCE ANALYST
Signature (Electronic Submission)	Date 10/06/2015
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.	

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

MAR 31 2016