Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR

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FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010

В	UREAU OF LAND MANAG	EMENT IN	10CD		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.			obbs NN	5. Lease Serial No. NMNM94186		
			6. If I	6. If Indian, Allottee or Tribe Name		
			7. If U NN	7. If Unit or CA/Agreement, Name and/or No. NMNM88526X		
1. Type of Well				8, Well Name and No. THISTLE UNIT 30H		
				9. API Well No.		
DEVON ENERGY PRODUCTION CO ERMail: REBECCA.DEAL@DVN.COM				30-025-41147-00-X1		
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102		3b. Phone No. (include area code Ph: 405-228-8429	OCD BR	10. Field and Pool, or Exploratory BRINNINSTOOL		
4. Location of Well (Footage, Sec., T	., R., M., or Survey Description)		11. Co	11. County or Parish, and State		
Sec 28 T23S R33E NWNW 280FNL 380FWL / APR 2		2016 LE	LEA COUNTY, NM			
12. CHECK APPI	ROPRIATE BOX(ES) TO	INDICATE NATURE OF	NOTICE, REPORT	OR OTHE	R DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
TNI CLASS	Acidize	☐ Deepen	☐ Production (Sta	rt/Resume)	☐ Water Shut-Off	
□ Notice of Intent	☐ Alter Casing	☐ Fracture Treat	Reclamation		■ Well Integrity	
Subsequent Report ■ Subsequent Report ■ ■ Subsequent Report ■ ■ Subsequent Report ■ ■ ■ ■ ■ Subsequent Report ■ □ ■ □	☐ Casing Repair	■ New Construction	Recomplete		Other	
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon	☐ Temporarily Al	oandon		
	☐ Convert to Injection	□ Plug Back	☐ Water Disposal			
testing has been completed. Final Abdetermined that the site is ready for fine Please see the attached MIT ripsi, good.	nal inspection.)		0 2	een completed,	and the operator has	
14. I hereby certify that the foregoing is Comm Name (Printed/Typed) REBECCA	For DEVON ENERGY itted to AFMSS for processing		II Information System to the Hobbs of 04/18/2016 [16JAS ATORY COMPLIA	0319SE)	ORD	
Signature (Electronic S	ubmission)	Date 03/28/2	016 APR 44	3 2016	h. had	
	THIS SPACE FOR	FEDERAL OR STATE	OFFICE USE	M		
Approved By		Title	CARLSBAD FIEL	MANAGEMEN D OFFICA	Date	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the conduction of t	itable title to those rights in the su			V		

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **



