

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.***SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: <u>UNKNOWNOTH WDW</u>		5. Lease Serial No. NMNM19143 ✓
2. Name of Operator DEVON ENERGY PRODUCTION CO E-Mail: dana.delarosa@dmn.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: 575-746-5594		8. Well Name and No. RIO BLANCO 4 FEDERAL COM 3 ✓
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) ✓ Sec 4 T23S R34E 1650 FSL 1650 FEL ✓		9. API Well No. 30-025-36425 ✓
		10. Field and Pool or Exploratory Area BELL LAKE; DEVONIAN, NE
		11. County or Parish, State LEA COUNTY COUNTY, NM

**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 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 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.

In response to Notification of UIC Testing Letter for District 1 received January 2017;  
Bradenhead test for Rio Blanco 4 Federal Com 3; API 30-025-36425 was completed on March 28, 2017  
and witnessed by OCD Representative Gary Robenson.  
Bradenhead Test Report attached.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #371389 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO, sent to the Hobbs Committed to AFMSS for processing by DEBORAH MCKINNEY on 04/11/2017 ()	
Name (Printed/Typed) DANA DELAROSA	Title FIELD ADMIN SUPPORT
Signature (Electronic Submission)	Date 03/28/2017
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By _____	Title _____
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 \*\*****Accepted for Record Only**

MJB/OCD 5/17/2017

**District I**

1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

**State of New Mexico  
Energy, Minerals and Natural Resources Department  
Oil Conservation Division Hobbs District Office**

**BRADENHEAD TEST REPORT**

Operator Name <i>Devon</i>		API Number <i>30-025-36425</i>
Property Name <i>Rio Blanco 4 Fed. Comm</i>		Well No. <i>#3</i>

**7. Surface Location**

UL - Lot <i>J</i>	Section <i>4</i>	Township <i>23S</i>	Range <i>34E</i>	Feet from <i>1650</i>	N/S Line <i>S</i>	Feet From <i>1650</i>	E/W Line <i>E</i>	County <i>Lea</i>
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**Well Status**

Well Status <i>Injecting</i>	SHUT-IN <i>No</i>	PRODUCING <i>SWD</i>	DATE <i>3-28-17</i>
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

**OBSERVED DATA**

If bradenhead flowed water, check all of the descriptions that apply:

	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Casing	(E)Tubing
Pressure	<i>0</i>	<i>—</i>	<i>0</i>	<i>0</i>	<i>2685</i>
<b>Flow Characteristics</b>					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks:

INJECTING AT THIS TIME ☐ WTR, ☐ GAS, ☐ CO2

Signature: <i>[Signature]</i>		OIL CONSERVATION DIVISION
Printed name: <i>Chris West</i>		Entered into RBDMS
Title: <i>Assistant Foreman</i>		Re-test
E-mail Address: <i>christopher.west@dnr.com</i>		
Date: <i>3-28-17</i>	Phone: <i>505-626-19405</i>	
Witness: <i>Darryl Robinson</i>		