

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM 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.*

NMOCD

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

Hobbs  
HOBBS OGD  
APR 02 2018  
RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM116575	
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY		6. If Indian, Allottee or Tribe Name	
3a. Address 333 W. SHERIDAN AVE OKLAHOMA CITY, OK 73102		7. If Unit or CA/Agreement, Name and/or No.	
3b. Phone No. (include area code) Ph: 405.228.2810		8. Well Name and No. REBEL 20 FED 6Y	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 20 T24S R32E Mer NMP NENW 250FNL 1970FWL		9. API Well No. 30-025-43449	
		10. Field and Pool or Exploratory Area COTTON DRAW;BN SPNG, EAST	
		11. County or Parish, State LEA 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 Drilling Operations
	<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 must 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 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.

(01-17-2018-01-20-2018) SPUD WELL @ 04:30. TD 17 1/2" HOLE @ 931'. RUN IN HOLE W/ 21 JTS, 13 3/8", 54.5#, J-55 BTC. LAND CASING @ 921'. TEST LINES TO 1500 PSI, GOOD TEST. *Cement? Yes*

(01-20-2018-01-22-2018) TD 12 1/4" HOLE @ 4622'. RUN IN HOLE W/ 103 JTS, 9 5/8, 40, J-55, LTC CSG, SET @ 4608. LEAD W/ 1395 SX CIC, YLD 1.79 CU FT/SK. TAIL 310 SX CIH, YLD 1.34 CU FT/SK. DISP W/ 364 BBLs OF 8.34 PPG FW. CIRC 190 BBL RETURNED TO SURFACE. PT CSG TO 1500 PSI FOR 30 MIN, OK.

(01-23-2018- 01-29-2018) TD 8 3/4" HOLE @ 10,759'. RUN IN HOLE W/ 353 JTS, 5 1/2", 17#, P110RY BT CSG, SET @ 15,102'. 1ST STAGE CMT LEAD W/ 530 SX CIH, YLD 3.63 CU FT/SK. TAIL W/ 1030 SX CIH, YLD 1.47 CU FT/SK. PUMP 248 BBLs OF FW DISPLACEMENT. *circled cement top?*

14. I hereby certify that the foregoing is true and correct. Electronic Submission #403355 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION COMPANY, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 02/06/2018 ( )	
Name (Printed/Typed) BRITTNEY WHEATON	Title REGULATORY PROFESSIONAL
Signature (Electronic Submission)	Date 02/05/2018

**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.

(Instructions on page 2)

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