

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS**
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*5. Lease Serial No.
NMNM19143

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other: INJECTION

2. Name of Operator

DEVON ENERGY PRODUCTION COMPANY

Contact: DENISE MENOUD

E-Mail: Denise.Menoud@dev.com

3a. Address

6488 SEVEN RIVERS HIGHWAY
ARTESIA, NM 88211

3b. Phone No. (include area code)

Ph: 575-746-5544

8. Well Name and No.

RIO BLANCO 4 FED COM 03

9. API Well No.

30-025-36425-00-S1

10. Field and Pool or Exploratory Area

BELL LAKE
SWD

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 4 T23S R34E NWSE 1650FSL 1650FEL

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

- ☐
- Notice of Intent
-
- ☒
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Hydraulic Fracturing | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <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 | Well Test |
| <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 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.

IN RESPONSE TO NOTIFICATION UIC TESTING LETTER FOR DISTRICT 1, PLEASE SEE ATTACHED COPY OF BRADENHEAD TEST REPORT TAKEN 6/27/2018, WITNESSED BY OCD REPRESENTATIVE, GILBERT CORDERO.

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

Electronic Submission #427151 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION COM LP, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 07/13/2018 (18PP1448SE)

Name (Printed/Typed) DENISE MENOUD

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 07/12/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE
ACCEPTED FOR RECORD

Approved By

Henry Fortner

Title

JUL 18 2018

Date 8-10-18

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

/s/ Jonathon Shepard

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 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)

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

For record only

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

HOBBS OCD

AUG 10 2018

RECEIVED

BRADENHEAD TEST REPORT

Operator Name DEVON ENERGY PRODUCTION Co LP	*API Number 30-025-36425
Property Name RIO BLANCO 4 FEDERAL COM	Well No. 3

7 Surface Location

UL - Lot J	Section 4	Township 23S	Range 34E	Feet from 1650	N/S Line S	Feet From 1650	E/W Line E	County LEA
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Well Status

TA'D WELL YES	SHUT-IN YES	INJECTOR INJ	PRODUCER OIL	GAS	DATE 6/27/2018
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Csg	(E)Tubing
Pressure	0	0	—	0	1571
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2 —
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR X
Surges	Y/N	Y/N	Y/N	Y/N	GAS —
Down to nothing	Y/N	Y/N	Y/N	Y/N	Type of Fluid
Gas or Oil	Y/N	Y/N	Y/N	Y/N	Injected for
Water	Y/N	Y/N	Y/N	Y/N	Waterflood if
					applies.

Remarks — Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>Denise Menoud</i>	OIL CONSERVATION DIVISION
Printed name: Denise Menoud	Entered into RBDMS
Title: Admin. Field Support	Re-test
E-mail Address: denise.menoud@dmn.com	
Date: 7/12/2018	
Phone: 575-746-5544	
Witness: KERRY FORTNER	

575-399-2991

INSTRUCTIONS ON BACK OF THIS FORM

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

HOBBS OCD

JUN 28 2018

BRADENHEAD TEST REPORT

RECEIVED

DEVON ENERGY PRODUCTION COMPANY	Operator Name	API Number 30-025-36425-00-00
RIO BLANCO 4 FEDERAL COM	Property Name	Well No. 003

7. Surface Location

UL - Lot J	Section 4	Township 23	Range 34	Feet from 1650	N/S Line S	Feet From 1650	E/W Line E	County LEA
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Well Status

TA'D Well YES <input checked="" type="radio"/> NO	SHUT-IN YES <input checked="" type="radio"/> NO	INJECTOR INJ <input checked="" type="radio"/> SWD	PRODUCER OIL <input checked="" type="radio"/> GAS	DATE 6/27/18
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OBSERVED DATA

	(A)Surf-Intern	(B)Intern(1)	(C)Intern(2)	(D)Prod Csg	(E)Tubing
Pressure	C	0	/	0	1571
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR
Surges	Y/N	Y/N	Y/N	Y/N	GAS
Down to nothing	Y/N	Y/N	Y/N	Y/N	If applicable type
Gas or Oil	Y/N	Y/N	Y/N	Y/N	fluid injected for
Water	Y/N	Y/N	Y/N	Y/N	Waterflood

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>John Raga</i>	OIL CONSERVATION DIVISION
Printed name: John Raga (575) 748-5248	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: 6/27/18	Phone:
Witness: KERRY FORTNER 575-399-2991	