

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

Carlsbad Field Office

OCD Hobbs

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator DEVON ENERGY PRODUCTION COMPANY Contact: JENNIFER HARMS jennifer.harms@dmn.com	5. Lease Serial No. NMNM18848
3a. Address 333 WEST SHERIDAN AVENUE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-552-6560	6. If Indian, Allottee or Tribe Name
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17 T23S R32E NWNW 251FNL 821FWL 32.311092 N Lat, 103.702560 W Lon	10. Field and Pool or Exploratory Area SALT LAKE	7. If Unit or CA/Agreement, Name and/or No.
11. County or Parish, State LEA COUNTY, NM		8. Well Name and No. ALLEY CAT 17 FED COM 211H
9. API Well No. 30-025-45064-00-X1		

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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.

(8/25/2018- 8/27/2018) Spud @ 00:00. TD 17-1/2? hole @ 1087?. RIH w/ 27 jts 13-3/8? 54.50# J-55 BTC csg, set @ 1073.9?. Lead w/ 1151 sx CIC, yld 1.33 cu ft/sk. Disp w/ 160 bbls FW. Circ 121 sx cmt to surf. PT BOPE 250/3000 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 mins, OK.

(8/27/2018-9/1/2018) TD 12-1/4? hole @ 6045?. RIH w/ 104 jts 9-5/8? 40# J-55 BTC csg & 37 jts 9-5/8? 40# P110EC csg, set @ 6034?. Lead w/ 1389 sx CIC, yld 1.83 cu ft/sk. Tail w/ 439 sx CIC, yld 1.33 cu ft/sk. Disp w/ 454 bbls FW. No returns, squeeze 1800 sx, yld 1.19 cu ft/sk. PT 500 psi for 30 mins.

(9/1/2018-9/12/2018) TD 8-3/4? hole @ 10906? & 8-1/2? hole @ 15470?. RIH w/ 372 jts 5-1/2? 17# P110RY CDC-HTQ csg, set @ 15460?. 1st lead w/ 473 sx cmt, yld 3.11 cu ft/sk. Tail w/ 1256 sx cmt,

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

Electronic Submission #436143 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 09/20/2018 (18PP1937SE)

Name (Printed/Typed) JENNIFER HARMS

Title REGULATORY COMPLIANCE ANALYST

Signature (Electronic Submission)

Date 09/20/2018

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

SEP 21 2018

/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 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)

CARLSBAD FIELD OFFICE

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

Additional data for EC transaction #436143 that would not fit on the form

32. Additional remarks, continued

yld 1.54 cu ft/sk. Disp w/ 357 bbls water. ETOC 1515. RR @ 5:00.