

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.**Case Serial No.  
NMNM95642**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 Email: jennifer.harms@dev.com		3. Address P O BOX 250 ARTESIA, NM 88201		3b. Phone No. (include area code) Ph: 405-552-6560		4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 15 T23S R32E NWNW 476FNL 1204FWL 32.310600 N Lat, 103.667175 W Lon		6. If Indian, Allottee or Tribe Name		7. If Unit or CA/Agreement, Name and/or No.		8. Well Name and No. GRUMPY CAT 15-22 FED COM 211H		9. API Well No. 30-025-45730-00-X1		10. Field and Pool or Exploratory Area SAND DUNES-BONE SPRING, SOUTH		11. County or Parish, State LEA COUNTY, NM	
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## 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.

(4/15/2019-4/19/2019) Spud @ 23:00. TD 17-1/2" hole @ 1248'. RIH w/ 29 jts 13-3/8" 54.50# J-55 BTC csg, set @ 1236'. Lead w/ 1791 sx CIC, yld 1.33 cu ft/sk. Disp w/ 184 BBLS 250/3500 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 mins, OK.

(4/19/2019-4/28/2019) TD 12-1/4" hole @ 8772'. RIH w/ 93 jts 9-5/8" 40# J-55 set @ 4240'. RIH w/ 99 jts 9-5/8" 40# L-80 set @ 8731'. Lead w/ 1043 sx CIC, yld 2.70 cu ft/sk. Tail w/ 406 sx CIC, yld 1.33 cu ft/sk. Disp w/ 661 bbls, brine. No returns; Tail w/ 1800 sx; test casing at 2000 PSI, hold 30 min.

(4/28/2019-5/19/2019) TD 8-3/4" & 8-1/2" hole @ 21029'. RIH w/ 506 jts 5-1/2" 17# P1TURY csg, set @ 21016'. 1st lead w/ 935 sx cmt, yld 2.94 cu ft/sk. Tail w/ 2030 sx cmt, yld 1.54 cu ft/sk. Disp w/ 487 bbls FW. RR @ 10:00.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #466137 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 05/21/2019 (19PP1974SE)	
Name (Printed/Typed) JENNIFER HARMS	Title REGULATORY COMPLIANCE ANALYST
Signature (Electronic Submission)	Date 05/21/2019

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Accepted for Record		MAY 22 2019
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.	Title	Date	
	Jonathon Shepard		
	Carlsbad Field Office		
	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)

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***