

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*

**SUBMIT IN TRIPLICATE - Other Instructions on Form 3160-3**

OCD Hobbs  
**NOBBS OCD**  
**RECEIVED**  
JUL 03 2019

5. Lease Serial No.  
NMLC062300 ✓

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
VAN DOO DAH 28-33 FED COM 231H

9. API Well No.  
30-025-45202-00-X1

10. Field and Pool or Exploratory Area  
WC025G08S253235G-LWR BONE SP

LEA COUNTY, NM

1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator  
DEVON ENERGY PRODUCTION COMPANY

Contact: JENNIFER HARMS  
jennifer.harms@dvn.com

3a. Address  
333 WEST SHERIDAN AVENUE  
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)  
Ph: 405-552-6560

Sec 28 T25S R32E NWNW 205FNL 410FWL  
32.108021 N Lat, 103.687355 W Lon

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

**TYPE OF SUBMISSION**

**TYPE OF ACTION**

☒ Subsequent Report  
☐ Final Abandonment Notice

☐ Acidize ☐ Deepen ☐ Production (Start/Resume) ☐ Water Shut-Off  
☐ Alter Casing ☐ Hydraulic Fracturing ☐ Reclamation ☐ Well Integrity  
☐ Casing Repair ☐ New Construction ☐ Recomplete ☐ Other  
☐ Change Plans ☐ Plug and Abandon ☐ Temporarily Abandon  
☐ Convert to Injection ☐ Plug Back ☒ 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.

1. Name(s) of formation(s) producing water on the lease: LWR Bone Spring ✓
2. Amount of water produced from all formations in barrels per day: 108bbl per day ✓
4. How water is stored on lease: 3-750bbl water tanks at the Marwari 28 CTB 2 ✓
5. How water is moved to the disposal facility: piped ✓

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

Electronic Submission #469245 verified by the BLM Well Information System  
For DEVON ENERGY PRODUCTION COMPAN, sent to the Hobbs  
Committed to AFMSS for processing by PRISCILLA PEREZ on 06/17/2019 (19PP2212SE)

Name (Printed/Typed) JENNIFER HARMS

Title REGULATORY COMPLIANCE ANALYST

Signature (Electronic Submission)

Date 06/16/2019

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

Title

JUN 18 2019

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

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD 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 \*\***

**Additional data for EC transaction #469245 that would not fit on the form**

**32. Additional remarks, continued**

6. Identify the Disposal Facility by:

A. Facility Operators Name: a) Devon Energy b) Devon Energy

B. Facility or well name/number:

a) Cotton Draw Unit SWD 181 ~~b) Cotton Draw 32 State SWD 2~~

C. Type of Facility or well (WDW) (WIW):

~~a) WDW b) WDW~~

D.1) Location by SE/4 NE/4 Section 36 Township 24S Range 31E

~~D.2) Location by SE/4 SE/4 Section 32 Township 24S Range 32E~~