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Form 3160 5						FORM APPROVED		
(August, 2007)	2007) DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT NMO					OMB No. 1004- 0137		
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		JMANA	GEMENT		Lease Serial	Expires: July :		
	HARY NOTICES AND not use this form for prop	osals to d	rill or to re-e	inter an VID 1		NM18		
	doned well. Use Form 316				7 If Unit or CA	A meanant N	me and/or No	
SUBMIT IN TRIPLICATE - Other Instructions on page 2. 7. If Unit or CA. Agreement Name and/or N 1. Type of Well 7. Type of Well								
2. Name of Operator	X Other SALT WATER DISPOSAL				8. Well Name and No. SDE 31 FEDERAL 9			
Devon Energy Production Co., L.P.					9. API Well No.			
3a. Address 3b. Phone No. (include area code) 333. Wort Sharidan Ava Oklahoma City, OK 73102 405 552 6560					30-025-32868			
333 West Sheridan Ave. Oklahoma City, OK 73102 405-552-6560					10. Field and Pool, or Exploratory Area			
Location of Well (Footage, Sec., T., R., M., or Survey Description) Lat. 32.2591248				32.2591248	SWD; DELAWARE 11. County or Parish, State			
1980 FSL 1980 FEL NW	980 FSL 1980 FEL NW SE 31 T 23S R 32E Long. 103.7115784				LEA New Mexico			
	RIATE BOX(S) TO INDIC	ATE NAT			R OTHER DA	TA		
TYPE OF SUBMISSION								
Notice of Intent	Acidize	Deepen		Production (St	art/ Resume)	Wate	r Shut-off	
	Altering Casing	Frac	ture Treat	Reclamation		Weil Weil	Integrity	
Subsequent Report	Casing Repair	New New	Construction			Othe	r	
	Change Plans	Plug	and abandon	Temporarily A	bandon	CHANGE	OF OPERATOR	
Final Abandonment Notice	Convert to Injection	🔲 Plug	back	Water Disposa	1			
XTO has assigned all of it relinquish and transfer ope As of March 29, 2019, De conditions of the applicab	eratorship of all the Subjection will be considered to	ect Well (be oper-	to Devon ef	fective March 29, 3 Subject Well and w	2019. vill be respon	sible under	the terms and	
bond NMB-000801.								
				IED FOR				
\bigcirc		ZOND	ITIONS	S OF APPR	JVAL			
			1			A		
14. I hereby certify that the foregoing is to Name (Printed/ Typed)	rue and correct	$\overline{//}$		<u></u>		te	·····	
Catherine Lebsack		/ /	Title		Vice Pres	ident		
Signature Catherine	Kebrack X	7	Date	4-9-19P	PROVED		· · · · · · · · · · · · · · · · · · ·	
		OR FED	FRAL OR		F 3 2019			
-1.0	LNT. MI	π	7	<u></u>		_	- · · · ·	
Conditions of approval, if any are attac certify that the applicant holds legal or	equitable fitle to those nights in	the subject	lease Office	BUREAU OF L				
which would entitle the ab Tive 18 U.S.C. Section 1001 AND T States any false, fictitiousor fraudulent state	ithe 43 U.S.C. Section 1212, pha	ke it/a crii					or agenty of the United	
(Instructions on page 2)		/			······································	<u> </u>	PO	
	/	.De	von - Internal				1	

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Change of Operator Conditions of Approval

- 1. Tank battery must be bermed/diked (must be able to contain 1 1/2 times the volume of the largest tank).
- 2. Submit for approval of water disposal method.
- 3. Submit updated facility diagrams.
- 4. This agency shall be notified of any spill or discharge as required by NTL-3A.
- 5. All outstanding environmental issue must be addressed within 90 days. Contact Jim Amos for inspection and to resolve environmental issues. 575-234-5909
- 6. Install legible well sign on location with operator name, well name and number, lease number, unit number, 1/4 1/4, section, township, and range. NMOCD requires the API number on well signs.
- 7. Subject to like approval by NMOCD.
- 8. All Reporting to ONRR (OGOR Reports) must be brought current within 30 days of this approval including any past history.
- 9. If this well is incapable of producing in paying quantities submit NOI to plug and abandon this well or obtain approval to do otherwise within 90 days.
- 10. Submit plan for approval of well operations for all TA/SI wells within 30 days of this approval to change operator.
- 11. If not in place acquire operating rights on this lease within 30 days with BLM office in Santa Fe, NM.

JAM 061319