Form 3160-5 (August 2007)

(Instructions on page 2)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010

5. Lease Serial No. BHL: NMNM-036379; K-4562

6. If Indian, Allottee or Tribe Name

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.

			7. If Unit of CA/Agreement, Name and/or No.
SUBMIT IN TRIPLICATE – Other instructions on page 2. 1. Type of Well			NM-70928X
Oil Well Gas W	/ell Other		8. Well Name and No. COTTON DRAW UNIT #135H, #136H, #137H
2. Name of Operator DEVON ENERGY PRODUCTION CO LP			9. API Well No. / 135: 30-015-38533, 136: -38534, 137: -38556
3a. Address		3b. Phone No. (include area code)	10. Field and Pool or Exploratory Area
PO BOX 250, ARTESIA, NM 88211		575-748-3371	PADUCA; UPPER BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			11. Country or Parish, State
135: 200' FSL, 1600' FWL 136: 200' FSL, 1650	0' FWL 137: 200 FSL, 1700' FWL	SEC 2, T25S, R31E	EDDY COUNTY, NM
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA			
TYPE OF SUBMISSION		ТҮРЕ	OF ACTION .
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (Start/Resume)
Subsequent Report	Casing Repair	New Construction	Recomplete Other
	Change Plans	Plug and Abandon	Temporarily Abandon
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal
Devon Energy Production Co LP ressubmitted with the APD placed the boundaries has been reclaimed from a Nimoco	Abandonment Notices must be final inspection.) spectfully requests the submattery only on the West side an original pad of 520' x 35' an original pad origina	mission of the Interim Reclamatic de, but actually extends to the No. o'. Acres reclaimed = 1.5426 RECEIVED JAN 15 2013 NMOCD ARTES!A	on diagram attached. The Interim reclamation diagram orth side also. CCPPTED FOR RECORD JAN 1 2 2013 BUR_AU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
14. I hereby certify that the foregoing is tr	rue and correct. Name (Printed)	I/Typed)	
Denise Menoud		Title Admin Field	d Support 4
Signature Date 12/4/2012			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved by Conditions of approval, if any, are attached that the applicant holds legal or equitable tientitle the applicant to conduct operations to	tle to those rights in the subject		Date .
	U.S.C. Section 1212, make it a c		willfully to make to any department or agency of the United States any false,