

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**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.*5. Lease Serial No.  
NMLC064827A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
APACHE 24 23 FEDERAL COM 13H9. API Well No.  
30-015-42552-00-X110. Field and Pool, or Exploratory  
LOS MEDANOS11. County or Parish, and State  
EDDY COUNTY, NM**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Contact: TRINA C COUCH

DEVON ENERGY PRODUCTION CO Email: trina.couch@dvn.com

3a. Address

333 WEST SHERIDAN AVE  
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)

Ph: 405-228-7203

4. Location of Well (Footage; Sec., T., R., M., or Survey Description)

Sec 24 T22S R30E SESE 970FSL 330FEL  
32.370331 N Lat, 103.825596 W Lon**12. CHECK 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"/> Fracture Treat	<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
	<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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Devon Energy Production Company, L.P. respectfully requests to produce the well and forego having to perforate the casing to raise the TOC.

Upon completion of the frac job, we again attempted to establish an injection rate down the 9-5/8" x 5-1/2" annulus but it pressured up immediately. The pressure was monitored and charted following the injection test. During the frac job we did not detect any abnormal pressure on the 9-5/8" x 5-1/2" annulus and the annulus pressure did not exceed 1000psi.

During production we will tie onto 9-5/8" x 5-1/2" annulus and install pressure transducer, once SCADA is rigged up we will monitor the pressure and have an alarm set at 1000 psi. In the event that the pressure exceeds 1000 psi, we will shut the well in and the BLM will be notified.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
JUN 22 2015

RECEIVED

Accepted for record

JRD NMOC D 6/23/2015

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

Electronic Submission #305443 verified by the BLM Well Information System  
For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad  
Committed to AFMSS for processing by JENNIFER SANCHEZ on 06/19/2015 (15JAS0406SE)

Name (Printed/Typed) TRINA C COUCH

Title REGULATORY ANALYST

Signature

(Electronic Submission)

Date 06/18/2015

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

Approved By

Title

JUN 18 2015

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

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.

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

**Additional data for EC transaction #305443 that would not fit on the form**

**32. Additional remarks, continued**

Attached is the MIT chart\*

Thank you

