

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Operator

FORM 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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM036379
2. Name of Operator DEVON ENERGY PRODUCTION CO		6. If Indian, Allottee or Tribe Name
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102		7. If Unit or CA/Agreement, Name and/or No. 891005247X
3b. Phone No. (include area code) Ph: 405-552-3303		8. Well Name and No. COTTON DRAW UNIT 212H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 35 T24S R31E NWNW 135FNL 835FWL 32.180702 N Lat, 103.754418 W Lon		9. API Well No. 30-015-42892-00-X1
		10. Field and Pool, or Exploratory PADUCA
		11. County or Parish, and State EDDY COUNTY, NM

12. CHECK 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"/> 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 Well Spud
	<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.)

(2/10/15-2/12/15) Spud @ 06:30. TD 17-1/2? hole @ 813?. RIH w/ 18 jts 13-3/8? 48# H-40 ST&C csg, set @ 813?. Lead w/ 965 sx CIC cmt, yld 1.34 cu ft/sk. Disp w/ 120 bbls 8.33 ppg water. Circ 377 sx cmt to pits. PT BOPE @ 250/3000, PT hydriil @ 250/2500, PT mud lines @ 250/4000 & PT emergency kill line @ 250/5000, held each test for 10 min, OK. PT csg to 1211 psi for 30 min, OK.

(2/15/15-2/17/15) TD 12-1/4? hole @ 4380?. RIH w/ 97 jts 9-5/8? 40# HCK-55 BT csg, set @ 4380?. Lead w/ 1210 sx CIC cmt, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 328 bbls 8.33 ppg water. Circ 294 sx cmt to pits. PT csg to 2765 psi, OK.

(2/28/15-3/4/15) TD 8-3/4? hole @ 14589?. RIH w/ 351 jts 5-1/2? 17# P-110 BT csg, set @ 14582.7?. 1st stage cmt lead w/ 1045 sx CIH cmt, yld 2.27 cu ft/sk. Tail w/ 1190 sx CIH, yld 1.23 cu ft/sk. Disp w/ 337.6 bbls 8.33 ppg FW. Open DVT, top @ 4474.3?. 2nd stage cmt lead w/ 150 sx Tuned Light

14. I hereby certify that the foregoing is true and correct. Electronic Submission #295888 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad Committed to AFMSS for processing by MARISSA KLEIN on 06/11/2015 (15MGK004 /SE)	
Name (Printed/Typed) LUCRETIA A MORRIS	Title REGULATORY COMPLIANCE ANALYST
Signature (Electronic Submission)	Date 03/24/2015
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved By	Title
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	

ACCEPTED FOR RECORD
JAN 27 2016
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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

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4/15-16

Additional data for EC transaction #295888 that would not fit on the form

32. Additional remarks, continued

cmt, yld 2.86 cu ft/sk. Tail w/ 130 sx CIC, yld 1.33 cu ft/sk. Disp w/ 104 bbls 8.33 ppg FW. ETOC @ 38557. RR @ 16:00.