

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.*

5. Lease Serial No.  
NMNM055648

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
SARGAS 28 FED 4H

9. API Well No.  
30-015-41560

10. Field and Pool, or Exploratory  
SHUGART; BONE SPRING

11. 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  
DEVON ENERGY PRODUCTION CO  
Contact: SHEILA A FISHER  
Email: Sheila.Fisher@dvn.com

3a. Address  
PO BOX 250  
ARTESIA, NM 88211

3b. Phone No. (include area code)  
Ph: 575-748-1829

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

**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 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 checked="" 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.)

1. This well is producing from the Shugart; Bone Spring. **SEE ATTACHED FOR CONDITIONS OF APPROVAL**

2. Water produced is approximately 118 BWPD.

3. There are two 500bbl water tanks on location.

4. Water will be piped to the a) Porterhouse State Com 1 b.) Culwin Queen Unit Waterflood Facility where it travels to suction tanks and it is disposed into 4 injection wells via trunk line one of which is the Culwin Queen Unit 11 (location of Unit 11 included) a.) Ray Westall Operating, Inc. b.) **ST**  
Ray Westall Operating, Inc.  
a) API # 30-015-32682 and b) API # 30-015-04573.

**SC 4-12-17**  
**Accepted for record - NMOCD**

**MAR 3 2017**  
**ARTESIA DISTRICT**

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

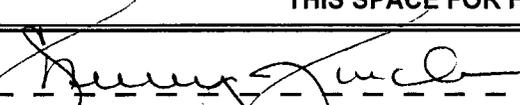
**Electronic Submission #353575 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH MCKINNEY on 10/07/2016 ()**

Name (Printed/Typed) SHEILA A FISHER Title FIELD ADMIN SUPPORT

Signature (Electronic Submission) Date 10/05/2016

**APR 10 2017**  
**RECEIVED**

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

Approved By  Title **EPS** Date **3/31/17**

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 **CFD**

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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

**Additional data for EC transaction #353575 that would not fit on the form**

**32. Additional remarks, continued**

5. a) NE4NE4, Sec 32, T18S, R31E  
b) SW4SW4, Sec 36, T18S, R30E

6. a) SWD-1479-B  
b) WFX-941

## WATER PRODUCTION & DISPOSAL INFORMATION

\*In order to process your disposal request, the following information must be completed in full\*

Site Name: Sargas 28 Fed Com 4H

---

1. Name(s) of formation(s) producing water on the lease: Shugart; Bone Spring

---

2. Amount of water produced from all formations in barrels per day: 118 BWPD

---

4. How water is stored on lease: 2-500bbl water tanks on location

---

5. How water is moved to the disposal facility: Piped

---

6. Identify the Disposal Facility by:

A. Facility Operators Name: a) Ray Westall Operating, Inc b) Ray Westall Operating, Inc

---

B. Facility or well name/number: a) Porterhouse State Com 1 b) Culwin Queen Unit  
Waterflood Facility-water travels to suction tanks where it is disposed into 4 injection  
wells via trunk line one of which is the Culwin Queen Unit 11(location of Unit 11  
included)

---

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

---

D.1) Location by  $\frac{1}{4}$   $\frac{1}{4}$  NE4 NE4      Section 32      Township 18S      Range 31E

---

D.2) Location by  $\frac{1}{4}$   $\frac{1}{4}$  SW4 SW4      Section 36      Township 18S      Range 30E

---

**Submit to this office, 620 EAST GREENE ST, CARLSBAD NM, 88220, the above required information on a Sundry Notice 3160-5. Submit 1 original and 5 copies, within abatement period. (This form may be used as an attachment to the Sundry Notice.)**

BUREAU OF LAND MANAGEMENT  
Carlsbad Field Office  
620 East Greene Street  
Carlsbad, New Mexico 88220  
575-234-5972

Disposal of Produced Water From Federal Wells  
Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approval:

1. This agency shall be notified of any change in your method or location of disposal.
2. Compliance with all provisions of Onshore Order No. 7.
3. This agency shall be notified of any spill or discharge as required by NTL-3A.
4. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
5. Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
6. This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.
7. If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.
8. Disposal at any other site will require prior approval.
9. Subject to like approval by NMOCD.

7/10/14