

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED
OMB NO. 1004-0135
EXPIRES March 31, 2007

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APU) for such proposals

SUBMIT IN TRIPLICATE

1a. Type of Well	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input type="checkbox"/> Other _____
2. Name of Operator	DEVON ENERGY PRODUCTION COMPANY, LP		
3. Address and Telephone No	333 W. Sheridan. Oklahoma City, Ok 73102-8260 405-235-3611		
4. Location of Well (Report location clearly and in accordance with Federal requirements)*	330 FSL 2310 FEL O 10 T25S R31E BHL 330 FNL & 1980 FEL		

5. Lease Serial No.	NMNM 042626; BHL NM 0503
6. If Indian, Allottee or Tribe Name	
7. Unit or CA Agreement Name and No.	
8. Well Name and No	Cotton Draw 10 FC 1H
9. API Well No	30-015-39229
10. Field and Pool, or Exploratory	Cotton Draw ; Delaware South
11. County or Parish State	Eddy 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 <u>Drilling Operations</u>
	<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 Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work and approximate duration thereof. If the proposal deepens directionally or recompletes horizontally, give subsurface location 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 requirement, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

3/10/12 - MIRU. Spud well @ 1800 hrs.
3/15/12 - TD 17 1/2" hole @ 705'. RIH w/ 17 jts 13 3/8" 48# H-40 STC csg & set @ 705'. RU cmtrs & lead w/ 795 sx CI C, Yld 1.35 cf/sx. Circ 104 sx to surf. WOC.
3/16/12 - TD 12 1/4" hole @ 4300'. RIH w/ 95 jts 9 5/8" 40# J-55 LTC csg & set @ 4300'. Notified BLM.
3/17/12 - Test to 3700 psi. RU cmtrs & lead w/ 1050 sx POZ 35:65 CI C, Yld 2.04 cf/sx. Tail w/ 350 sx POZ 40:60 CI C, Yld 1.37 cf/sx. Displ w/ 322 bbls FW. Circ 412 sx to surf. NU BOP & choke manifold. Test to 5000 psi H, 2150 psi L. Test annular to 2500 psi H & 250 psi L, held 10 mins.
3/17/12 - PT csg to 1500 psi, held 30 mins. Perform Fit Test to EMW of 9.0 PT to 135 psi, held 30 mins, good.
3/19/12 - CHC. RU loggers & run Gyro.
3/27/12 - TD 8 3/4" hole @ 12,674'. RIH w/ 172 jts 5 1/2" 17# P-110 LTC & 120 jts 17# P-110 BTC csg, set @ 12,674'. Notified BLM J. Salcido.
3/28/12 - Test to 5000 psi. Lead w/ 350 sx POZ 35:65 CI H, Yld 2.01 cf/sx; 2nd lead w/ 405 sx CI C, Yld 2.01 cf/sx. Tail w/ 1265 sx POZ CI C. Yld 1.28 cf/sx. Displ w/ 295 bbls FW. ND BOP.
3/26/12 - Rlsd rig @ 06:00 hrs.

Accepted for record
NMOCD *CRBade as/05/12*

Signed Judy A. Barnett Name Judy A. Barnett X8699
Title Regulatory Specialist Date 4/13/2012

(This space for Federal or State Office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

This is a false statement, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations to any matter within its jurisdiction

*See Instruction on Reverse Side

