

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 (APL) for such proposals

SUBMIT IN TRIPLICATE

1a. Type of Well Oil Well Gas Well 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 FNL 400 FWL D 14 T19S R31E
BHL: 330 FSL & 400 FWL M

5. Lease Serial No.
NM 99039 & NM 101599

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Well Name and No.
Capella 14 Fed Com 1H

9. API Well No.
30-015-394186

10. Field and Pool, or Exploratory
Lusk; Bone Spring West

11. County or Parish State
Eddy NM

12. CHECK APPROPRIATE BOX(S) 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

6/6/12 - 6/7/12 - MIRU spud well. TD 17 1/2" hole @ 740' @ 1000 hrs. RIH w/ 18 jts 13 3/8" 48# H-40 STC csg & set @ 740'. RU cmtrs lead w/ 800 sx C, Yld 1.34 cf/sx. Displ w/ 110 bbls FW. Circ 147 sx to surf. WOC.

6/8/12 - Test BOP, Floor valves, Choke manifold @ 3000 psi H & 250 psi L. Test annular 1500 psi H & 250 psi L. held 10 mins, good. Test csg to 1200 psi, 30 mins, good.

6/14/12 - TD 12 1/2" hole @ 4550'. Notified BLM intent to run csg & cement.

6/15/12 - RIH w/ 106 jts 9 5/8" 40# J-55 LTC csg & set @ 4550'. RU cmtrs 1st stage: lead w/ 540 sx C, Yld 1.73 cf/sx. Tail w/ 300 sx C, Yld 1.38 cf/sx. Displ w/ 342 bbls FW. Circ 32 sx to surf. 2nd Stage lead w/ 860 sx C, Yld 1.73 cf/sx. Tail w/ 150 sx C, Yld 1.37 cf/sx. Run Temp Survey. WOC. Lead w/ 100 sx C, Yld 1.35 cf/sx, Tail w/ 100 sx C, Top out #3 w/ 100 sx C Yld 1.35 cf/sx, Top out #4 w/ 100 sx C, Top out #5 w/ 150 sx C. Circ 16 sx surf. Test BOP.

Test annular 2500 psi H & 250 psi L. Test 5000 psi H & 250 psi L for floor valves & choke manifold, 10 mins good. DV @ 2652'. Perform FIT 165 psi, 30 min EMW of 9.0 ppg.

7/2/12 - TD 8 3/4" hole @ 13,679'.

7/3/12 - RIH w/ 313 jts 5 1/2" 17# P-110 (135 BTC & 178 LTC) and set @ 13,679'.

7/4/12 - RU cmtrs & lead w/ 600 sx POZ 35:651460, Yld 2.00 cf/sx. Tail w/ 1460 sx POZ 50:50, Yld 1.28 cf/sx. Displ w/ 318 bbls FW. 2nd stage: Lead w/ 200 sx C, Yld. 2.87 cf/sx. Tail w/ 250 C, Yld. 1.37 cfr/sx.

7/6/12 - Rise Rig @ 0600.

Accepted for record
NMOCD
ADeale 12/13/12

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

Signed *Judy A. Barnett* Name Judy A. Barnett X8699 Title Regulatory Specialist Date 11/15/2012

(This space for Federal or State Office use)

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

This is U.S.C. Section 1001, 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

Amended

