

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED  
OMB No. 1004-0137  
Expires: October 31, 2014

**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.  
NM LC-063622

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE** - Other instructions on page 2.

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

1. Type of Well

Oil Well     Gas Well     Other

8. Well Name and No.  
Vega 29 Fed 3H

2. Name of Operator  
Devon Energy Production Company, L.P.

9. API Well No.  
30-015-41624

3a. Address  
333 W. Sheridan Avenue  
Oklahoma City, Oklahoma 73102

3b. Phone No. (include area code)  
405-552-3622

10. Field and Pool or Exploratory Area  
Hackberry; Bone Spring

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
147' FNL & 2470' FEL, Sec 29, T19S, R31E

11. County or Parish, State  
Eddy, NM

12. CHECK THE 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>Spud Report</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<b>&amp; Casing Report</b>
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

(4/1/14-4/2/14) Spud @ 01:00. TD 26" hole @ 514'. RIH w/ 12 jts 20" 94# J-55 BTC, set @ 514'. Lead w/ 650 sks CIC, yld 1.74 cu ft/sk. Tail w/ 300 sks CIC, yld 1.34 cu ft/sk. Disp w/ 158 bbls FW. Circ 48 bbls cmt to surf.

(4/8/14-4/10/14) TD 17-1/2" hole @ 2375'. RIH w/ 56 jts 13-3/8" 68# J-55 BTC, set @ 2375'. Lead w/ 1355 sks CIC, yld 1.65 cu ft/sk. Tail w/ 450 sks CIC, yld 1.38 cu ft/sk. Disp w/ 350 bbls FW. Circ 340 sks cmt to surf.

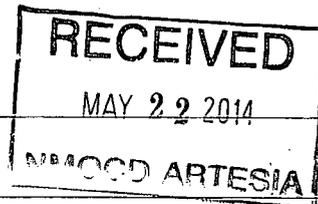
(4/13/14-4/14/14) TD 12-1/4" hole @ 4132'. RIH w/ 100 jts 9-5/8" 40# J-55 LTC, set @ 4132'. 1st lead w/ 580 sks CIC, yld 1.73 cu ft/sk. Tail w/ 450 sks CIC, yld 1.38 cu ft/sk. Disp w/ 310 bbls FW. No returns. Open DVT. 2nd lead w/ 525 sks CIC, yld 1.66 cu ft/sk. Tail w/ 140 sks CIC, yld 1.38 cu ft/sk. Disp w/ 183 bbls FW. Circ 156 sks cmt to surf.

DVT @ ?

(4/25/14-4/28/14) TD 8-3/4" hole @ 12717'. RIH w/ 294 jts 5-1/2" 17# HCP-110 BTC, set @ 12717'. 1st lead w/ 383 sks CIH, yld 2.01 cu ft/sk. Tail w/ 1694 sks CIH, yld 1.28 cu ft/sk. Disp w/ 294.6 bbls FW. Open DVT. Circ 208 sks cmt to half frac. 2nd lead w/ 242 sks CIC, yld 2.88 cu ft/sk. Tail w/ 270 sks CIC, yld 1.38 cu ft/sk. Disp w/ 115 bbls FW. Close DVT. Full returns throughout. RR @ 18:00 hrs.

WRD 5/22/14  
Accepted for record  
NMOCD  
Amend data →

DVT @ ?



14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

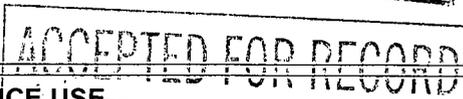
Megan Moravec

Title Regulatory Analyst

Signature

*Megan Moravec*

Date 04/29/2014



THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

MAY 12 2014

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.

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE