

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCAD Artesia

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.
NMNM0533177A

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.8. Well Name and No.
TODD 24B FED 29. API Well No.
30-015-2769110. Field and Pool, or Exploratory
INGLE WELLS DEAWARE11. County or Parish, and State
EDDY COUNTY, NM1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
DEVON ENERGYContact: JEANETTE BARRON
E-Mail: jeanette.barron@dvn.com3a. Address
PO BOX 250
ARTESIA, NM 882113b. Phone No. (include area code)
Ph: 575-748-18134. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 24 T23S R31E 660FNL 1980FEL
32.295295 N Lat, 103.729410 W Lon

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 recompleat 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 recompleat 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.)

Reference Number 14JH124W

The water disposal for the TODD 24B FED 2 for Devon Energy is trucked to the Barclay salt water disposal.

NM OIL CONSERVATION
ARTESIA DISTRICT

JUL 16 2014

RECEIVED

HJD 7-29-14
Accepted for record
NMOC*Rejected due to insufficient information, see attached form.*

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

Electronic Submission #240534 verified by the BLM Well Information System
For DEVON ENERGY, sent to the Carlsbad
Committed to AFMSS for processing by ANGEL MAYES on 05/29/2014 ()

Name (Printed/Typed) JEANETTE BARRON

Title FIELD ADMIN SUPPORT

Signature (Electronic Submission)

Date 03/31/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Title EPB

Date 7/1/14

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 Carlsbad

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 ****

WATER DISPOSAL ONSHORE ORDER #7

The following information is needed before your method of water disposal can be considered for approval.

1. Name(s) of formation (s) producing water on the lease.

2. Amount of water produced from each formation in barrels per day.

3. How water is stored on the lease.

4. How water is moved to disposal facility.

5. Operator's of disposal facility

- a. Lease name or well name and number _____

- b. Location by $\frac{1}{4}$ $\frac{1}{4}$ Section, Township, and Range of the disposal system _____

- c. The appropriate NMOCD permit number _____
