	UNITED STATES PARTMENT OF THE INTE JREAU OF LAND MANAGEN	CRIOR	ARTESIA	Expires:	APPROVED 10. 1004-0135 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	5. Lease Serial No. NMNM92767		
			. 6	6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.				7. If Unit or CA/Agreement, Name and/or No. NM 130540		
1. Type of Well Soli Well Gas Well Other				8. Well Name and No. BELLATRIX 28 FEDERAL COM 2H		
2. Name of Operator DEVON ENERGY Contact: SANDRA D FARLEY E-Mail: sandy.farley@dvn.com			, ,	9. API Well No. 30-015-40332		
3a. Address PO BOX 250 ARTESIA, NM 88210	PO BOX 250 ARTESIA, NM 88210		(include area code) 10. Field and Pool, or 6-5587 BONE SPRINC		Exploratory SS	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, and State		
Sec 29 T19S R31E 970 FNL & 790 FE				EDDY COUNTY, NM		
12. CHECK APPF	COPRIATE BOX(ES) TO IN	DICATE NATURE OF 1	NOTICE, REP	ORT, OR OTHE	R DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
 Notice of Intent Subsequent Report 	Acidize	asing Fracture Treat Reclamation Well In				
☐ Final Abandonment Notice	Casing Repair Change Plans	New Construction Plug and Abandon	□ Recomple □ Temporari		Other	
	Convert to Injection	Plug Back	Water Dis			
 13. Describe Proposed or Completed Ope If the proposal is to deepen directions Attach the Bond under which the wor following completion of the involved testing has been completed. Final Ab determined that the site is ready for fi 1. This well is producing from 2. Water produced is approxim 3. The water is stored in one 5 4. water will be trucked to the 	Illy or recomplete horizontally, give k will be performed or provide the E operations. If the operation results andonment Notices shall be filed on nal inspection.) the Bone Springs nately 180BWPD 00BBLS water tank a) Cedar Lake 35 Federal 1 b	subsurface locations and measu and No. on file with BLM/BLA in a multiple completion or reco ly after all requirements, include the second for re- NMOCD	ired and true vertion. Required subsection in a new population in a new ling reclamation, h cord	cal depths of all pertin quent reports shall be v interval, a Form 316 have been completed, ARTES DEC	ximate duration thereof, nent markers and zones. 50-4 shall be filed once and the operator has CONSERVATION 51A DISTRICT 03 2014 EIVED	
 b) Mesquite SWD Inc. API a) 3 5. a) NW/4 NE/4, S35, T17S, I 	30-015-26969 b)30-015-0581	9				
b) SE/4 SE/4, S3, T20S, R31E ۲/۵ میرک)		SEE ATTACH CONDITIONS OF			
14. I hereby certify that the foregoing is Name (Printed/Typed) SANDRA	Electronic Submission #2542	ENERGY, sent to the Carls cessing by LINDA DENNIS	sbad	2014 ()		
Signature (Electronic S	ubmission)	Date 07/23/2	014	APPR	OVED	
	THIS SPACE FOR F	EDERAL OR STATE			1.0.0014	
				- NOV	1 9 2014	
Approved By		Title	<u>. </u>	ON INNES	Date	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent which would entitle the applicant to condu-	warrant or ect lease Office			A. AMOS /ISOR-EPS		
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a crime statements or representations as to ar	e for any person knowingly and by matter within its jurisdiction.	l willfully to make	to any department or	agency of the United	

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

WATER PRODUCTION & DISPOSAL INFORMATION

Site Name: Bellatrix 25 Federal Com 2H

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

2. Amount of water produced from all formations in barrels per day: 180BBLS

3. How water is stored on lease: 1 500BBLS water tank

4. How water is moved to the disposal facility: Trucked

5. Identify the Disposal Facility by:

A. Facility Operators Name: a) Mesquite SWD, Inc. b) Mesquite SWD, Inc.

B. Facility or well name/number: a) Cedar Lake 35 Federal 1 b) Big Eddy SWD 1

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

 $\frac{D.1) \text{ Location by } \frac{1}{4} \frac{1}{4}}{a) \text{ NW/4 NE/4, S35, T17S, R30E}} Section Township Range b) SE/4 SE/4, S3, T20S, R31E$

(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