

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM0503
2. Name of Operator DEVON ENERGY PRODUCTION CO Contact: MEGAN MORAVEC Email: megan.moravec@dvn.com		6. If Indian, Allottee or Tribe Name
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-552-3622	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 15 T25S R31E SWSE 14FSL 1610FEL		8. Well Name and No. BELGIAN 15 FED COM 1H
		9. API Well No. 30-015-43187-00-X1
		10. Field and Pool, or Exploratory WILDCAT
		11. County or Parish, and State EDDY COUNTY, 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 Drilling Operations
	<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 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 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 requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

(10/2/15-10/4/15) Spud @ 14:30. TD 17-1/2? hole @ 870?. RIH w/ 19 jts 13-3/8? 54.5# J-55 BTC, set @ 855?/Lead w/ 920 sx CIC, yld 1.34 cu ft/sk. Disp w/ 124 bbls displacement. Circ 114 bbls crnt to surf. PT BOPE @ 250/3000 psi, OK. PT mud lines back to pumps @ 250/5000 psi, OK. PT csg to 1500 psi for 30 min, OK.

(10/6/15-10/7/15) TD 12-1/4? hole @ 4325? RIH w/ 87 jts 9-5/8? 40# J-55 BTC & 16 jts 9-5/8? 40# HCK-55 BTC, set @ 4310?. Lead w/ 1185 sx CIC, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 322.6 bbls displacement. ETOC @ surf. PT packoff to 5000 psi for 15 min, OK. PT csg to 1500 psi for 30 min, OK.

(10/19/15-10/24/15) TD 8-3/4? hole @ 15030?. RIH w/ 325 jts 5-1/2? 17# RYP-110 CDC-HTQ csg, set @ 15007?. 1st lead w/ 508 sx CIC, yld 2.83 cu ft/sk. 2nd lead w/ 300 sx CIC, yld 2.26 cu ft/sk. Tail

NM OIL CONSERVATION
ARTESIA DISTRICT
NOV 18 2015

RECEIVED

11/20/15
Accepted for record
NMOCD

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

Electronic Submission #322237 verified by the BLM Well Information System

For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad

Committed to AFSS for processing by JENNIFER SANCHEZ on 11/09/2015 (16JAS0897SE)

Name (Printed/Typed) MEGAN MORAVEC	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 11/02/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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.

Additional data for EC transaction #322237 that would not fit on the form

32. Additional remarks, continued

w/ 1130 sx CIH, yld 1.22 cu ft/sk. Disp w/ 347 bbls FW. ETOC @ 3310?. RR @ 05:00.