UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

EODM ADDDOVED

TOKM ALLKO	A ICD
OMB NO. 1004-	0125
OMID NO. 1004-	\cdot OID1
Expires: July 31,	2010
EXPRES. July 51,	4010

SUNDRY	NO	TICES	AND	REF	OF	RTS	ON 1	WELLS	
		_							

5. Lease Serial No. NMNM14768

Do not use thi abandoned wel	6. If Indian, Allottee	6. If Indian, Allottee or Tribe Name				
SUBMIT IN TRII		7. If Unit or CA/Agreement, Name and/or No. SW804 NM71849				
1. Type of Well ☐ Oil Well ☑ Gas Well ☐ Oth	8. Well Name and No	8. Well Name and No. CERF FED COM 2				
Name of Operator DEVON ENERGY PRODUCT	Contact: JEAN ION CO ERMail: JEANETTE.BAR	NETTE BARRON RON@DVN.COM	9. API Well No. 30-015-21884-	9. API Well No. 30-015-21884-00-C1		
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	Ph:	Phone No. (include area code) 575-748-1813		10. Field and Pool, or Exploratory BURTON FLAT		
4. Location of Well (Footage, Sec., T.		11. County or Parish	11. County or Parish, and State			
Sec 10 T21S R27E SENW 19		EDDY COUNT	EDDY COUNTY, NM			
i2. CHECK APPE	ROPRIATE BOX(ES) TO INI	DICATE NATURE OF	NOTICE, REPORT, OR OTHE	ER DATA		
TYPE OF SUBMISSION	F ACTION					
☐ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off		
_	☐ Alter Casing	☐ Fracture Treat	☐ Reclamation	☐ Well Integrity		
Subsequent Report	Casing Repair	☐ New Construction	□ Recomplete	□ Other		
☐ Final Abandonment Notice	☐ Change Plans	□ Plug and Abandon	□ Temporarily Abandon			
	☐ Convert to Injection	☐ Plug Back	Plug Back Water Disposal			
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.) 1. This well is producing from: Morrow 2. Water Produced is Approximately: 16 BBL 3. How Water is Stored: 1-500 BBL tank off location 4. Water is moved to Disposal: By Truck 5. Disposal Facility: a. Devon Energy Production Co LP b. Pyote Well Facility Name: a. Burton Flat Deep Unit 44 b. Exxon State 8 SWD Facility Type: a. WDW b. WDW Permit Number: a. SWD 1427 b. SWD 180 Location by: a. SE/4 OF SW/4 S3, T21S, R27E b. SW/4 OF SE/4 S15, T21S, R27E Accepted for record CONDITIONS OF APPROVAL NAMOCOD						
	Electronic Submission #33179	RODUCTION CO LP, sent g by PRISCILLA PEREZ o	to the Carlsbad			
C' (Plantonia 6	N.A in the state of the st	D 00/40/5	ADDD	OVED		
Signature (Electronic S		Date 02/18/2 EDERAL OR STATE				
		<u> </u>		4 2016		
Approved By Conditions of approval, if any, are attache	d. Approval of this notice does not w	Title	MAR	4 2016 Date		
certify that the applicant holds legal or equ which would entitle the applicant to condu		JAMES SUPERV	A. AMOS SOR-EPS			

WATER PRODUCTION & DISPOSAL INFORMATION

In order to process your disposal request, the following information must be completed in full

Site Name: Cerf Fed Com 2	tager of the state		· · · · · · · · · · · · · · · · · · ·		
1. Name(s) of formation(s) produci Morrow	ng water on the	e lease:			
2. Amount of water produced from 16 BBL per day	all formations	in barrels per day:			
4. How water is stored on lease: 1-500 BBL tank	· · · · · · · · · · · · · · · · · · ·				
5. How water is moved to the dispo	sal facility:				
6. Identify the Disposal Facility by	; ,				
A. Facility Operators Name: a. Dev Services	on Energy Pro	duction Corporation	b. Pyote Well		
B. Facility or well name/number: a	. Burton Flat D	eep Unit 44 b. Exxor	n State 8 SWD		
C. Type of Facility or well (WDW) (WIW): a. WDW b. WDW					
D.1) Location by SE/4 of SW/4	Section 3	Township 21S	Range 27E		
D.2) Location by SW/4 of SE/4	Section 15	Township 21S	Range 27E		

5WD-1427 & SWD-180

Submit to this office, 620 EAST GREENE ST, CARLSBAD NM, 88220, the above required information on a Sundry Notice 3160-5. Submit 1 original and 5 copies, within abatement period. (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