Form 3160-5 (June 2015)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an

5. Lease Serial No. NMLC061869

abandoned well. Use form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well  ☑ Oil Well ☐ Gas Well ☐ Other					8. Well Name and No. BIG SPRINGS DRAW 25 FED COM 1H		
Name of Operator Contact: SHEILA A FISHER     DEVON ENERGY PRODUCTION CO EMail: Sheila.Fisher@dvn.com					9. API Well No. 30-015-41548		
3a. Address PO BOX 250 ARTESIA, NM 88211  3b. Phone No Ph: 575-74			include area code) -1829		10. Field and Pool or Exploratory Area JENNINGS BONE SPRING WEST		
4. Location of Well (Footage, Sec., T.	·		11. County or Parish, State EDDY COUNTY, NM				
12. CHECK THE AP	PROPĖIATE BOX(ES) TO	INDICAT	E NATURE O	F NOTICE, 1	REPORT, OR OTH	ER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					····	
☐ Notice of Intent	☐ Acidize		<del>-</del>		on (Start/Resume)	☐ Water Shut-Off	
Subsequent Report     ■     Subsequent Report     Subse	☐ Alter Casing		ulic Fracturing	☐ Reclama		☐ Well Integrity	
-	Casing Repair		Construction	□ Recomp		☑ Other Site Facility Diagra	
☐ Final Abandonment Notice	☐ Change Plans ☐ Convert to Injection	☐ Plug a	and Abandon	☐ Water D	rily Abandon	m/Security Plan	
Attached is the site facility diagram for the Big Sinks Draw 25 Fed Com 1H updated to reconcile  Notice of Written Order 17DN005WPA.   NM OIL CONSERVATION  ARTESIA DISTRICT  APR 1 7 2017  Accepted for Record Purposes.  Approval Subject to Onsite to Decion.  Date:  2/3/17  Date:  Da							
RECEIVED					Accepted for	record - NMOCD	
14. I hereby certify that the foregoing is	true and correct.  Electronic Submission #363  For DEVON ENERGY F  Committed to AFMSS for proc	PRODUCTIO	N CO LP. sent	to the Carisba	ıd		
Name (Printed/Typed) SHEILA A FISHER			Title FIELD ADMIN SUPPORT				
Signature (Electronic S	Date 01/16/2017  L OR STATE OFFICE USE						
	THIS OF AGE FOR	LDEIGAL	OKOTATE				
Approved By Shally lucker			Title 6 8	itle 6 EPS, LLE   21317		ald 17	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to condu	d l Ammount afthir medica daga mat	warrant or					
which would entitle the applicant to condu	itable title to those rights in the sub		Office				

