

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
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

OCD-ARTESIA

FORM APPROVED
OMB NO. 1004-0135
EXPIRES: NOVEMBER 30, 2000

5. Lease Serial No.	0560289
6. If Indian, Allottee or Tribe Name	NMNM056289
7. Unit or CA Agreement Name and No.	
8. Well Name and No.	BURTON FLAT DEEP LEASE
9. API Well No.	
10. Field and Pool, or Exploratory	MORROW
12. County or Parish	EDDY
13. State	NM

SUBMIT IN TRIPLICATE

RECEIVED

JUL - 3 2006

1a. Type of Well	<input type="checkbox"/> Oil Well	<input checked="" type="checkbox"/> Gas Well	<input type="checkbox"/> Other
2. Name of Operator	Devon Energy Production Company, LP		
3. Address and Telephone No.	20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-552-8198		
4. Location of Well (Report location clearly and in accordance with Federal requirements)*	SEE BELOW		

CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 Change of Operator
	<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 Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work and approximate duration thereof. If the proposal deepens directionally or recompletes horizontally, give subsurface location 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 requirement, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection)

AS REQUIRED, DEVON ENERGY PRODUCTION COMPANY, L.P., IS NOTIFYING YOU OF A CHANGE OF OPERATOR ON THE ABOVE REFERENCED LEASE EFFECTIVE 12-31-05. DEVON ENERGY PRODUCTION COMPANY, L.P., AS THE NEW OPERATOR ACCEPTS RESPONSIBILITY OF OPERATIONS CONDUCTED ON THIS LEASE OR PORTION OF LEASE DESCRIBED. DEVON ENERGY PRODUCTION COMPANY, L.P., MEETS FEDERAL BONDING REQUIREMENTS AS FOLLOWS: NATIONWIDE OIL & GAS BOND No. CO-1104.

THE FOLLOWING WELLS ON THIS LEASE ARE AFFECTED BY THIS ACTION:

BURTON FLAT DEEP UNIT # 3 30-015-20799 UNIT N, 700 FSL & 1980 FWL, SEC 3 T21S R27E
BURTON FLAT DEEP UNIT #44 30-015-32274 UNIT N, 3555 FSL & 1660 FWL, SEC 3 T21S R27E

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

Signed Norvella Adams Name Norvella Adams
Title Sr. Staff Engineering Technician Date 2/10/2006

(This space for Federal or State Office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____

Under 18 U.S.C. Section 1001, it is a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations to any matter within its jurisdiction.

*See Instruction on Reverse Side

