

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 (APLD) for such proposals

100EDCARTESIA

FORM APPROVED  
OMB NO. 1004-0135  
EXPIRES: March 30, 2007

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SUBMIT IN TRIPLICATE

1a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Other \_\_\_\_\_

2. Name of Operator  
DEVON ENERGY PRODUCTION COMPANY, LP

3. Address and Telephone No.  
20 North Broadway, Oklahoma City, OK 73102 405-235-3611

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*  
1780 FNL 660 FEL H SEC 8 T23S R31E

5. Lease Serial No.  
NM 77046

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Well Name and No.  
North Pure Gold 8 Federal 3

9. API Well No.  
30-015-27610

10. Field and Pool, or Exploratory  
Los Medanos; Delaware

11. County or Parish State  
Eddy NM

12. CHECK APPROPRIATE BOX(s) 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 Add Pay
	<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)

7/09/08-7/16/08

MIRU PU. ND WH. NU BOP. TOOH w/ 243 jts 2 7/8" tbg, TAC, 3' Blast Sub & SN. OWU. RU Schlumberger & perf interval 7732-90' @ 1 spf & 120 deg phasing. RD WL. TIH w/ RBP, BC & RBP. Set RBP & load w/ 39 bbls 2% KCL. Test to 2000#. Set pkr @ 7815'. Pump 50 bbls wtr. OWU. RU BJ Services & acidize. Test to 3000#. Pump 5K g 7 1/2% PentaFax 2 w/ Xylene & 85 BS. Flush w/ 58 bbls 2% KCL. RD BJ. Rise RBP & pkr. OWU. TIH w/ Mud jt, SN, 3' Blast Sub, 5 1/2 x 2 7/8" TAC & 243 jts. Tag btm @ 7972'. PBTD @ 8134'. 162' of fill. EOT @ 7947.72. ND BOP. Set TAC. NU WH. HWO. LH & test w/ 31 bbls wtr to 500#. RDMO. POP.

ACCEPTED FOR RECORD

JUL 22 2008

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

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

Signed Judy A. Barnett

Name Judy A. Barnett  
Title Regulatory Analyst

Date 7/16/2008

(This space for Federal or State Office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any:

This U.S.C. Section 1001, makes it 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

Accepted for record - NMOC