Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT DRY NOTICES AND REPORTS ON W

OCD-ARTESIA

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

SUNDRY NOTICES AND REPORTS ON WELLS			5. Lease Serial No.	1	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposa			NM-113395		
abandoned well. Use Form 3160-3 (APD) for such proposal		pbsals-{-(V-)	6. If Indian, Allottee or	ribe Name	
SL	JBMIT IN TRIPLICATE				
		JUL 6 2010	7. Unit or CA Agreeme	nt Name and No.	
1a. Type of Well Oil Well Gas Well Other			\mathbf{T}		
		NMOCD ARTESIA	8 Well Name and No.		
2. Name of Operator		TAIN OOD TATTEON	☑ Willow Dra	w 24 Federal 1	
DEVON ENERGY PRODUCTION COMPANY, LP			9. API Well No.		
	COLLINO DOCTION SON	M ANT, EI		E 24445	
3. Address and Telephone No.				30-015-34415	
P. O. Box 250 - Artesia	a, NM 88211-0250	575-748-3371	10. Field and Pool, or E	Exploratory	
4. Location of Well (Report location clearly and in accordance with Federal req		requirements)*	Bubbling Sprir	ngs; Morrow West	
900 24 T209 B255 . 4240 ESL 9 900 ESL		000 EEL	12. County or Parish	13. State	
Sec 24-T20S-R25E ~ 1310 FSL & 80		300 FEL	Eddy Count	y, New Mexico	
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OS SUBMISSION		TYPE OF ACT	ON		
Notice of Intent	Acidize		ction (Start/Resume)	Water Shut-Off	
	Alter Casing	-	mation	Well Integrity	
Subsequent Report '	Casing Repair		nplete	」 Other	
Final Abandonment Notice	Change Plans	-, - <u>,</u> -	orarily Abandon		
	Convert to Injection	J Plug Back	Disposal		
•				1	
13. Describe Proposed or Completed C	Operations (Clearly state all porting	et details, and give pertinent date	e including actimated data o	of starting any proposed	
work and approximate duration thereof.			s, including estimated date t	istanting any proposed	
Devon Energy Production Co, LP r			noo of addressing the r	amount of two African	
Rue plants that were found on this					
,		addressed the location has i	een sprayed and the Ai	rican Rue plants	
removed. It is ready for reinspecti	on.				
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1 X			BUREAN OF LAND	MANAGEMENT	
A.			BUREAN OF LAND CARLSBAD FIE	MANAGEMENT	
A Company	·		BUREAN OF LAND CARLSBAD FIE	MANAGEMENT	
14. I hereby certify that the foreacing is to	Tile and correct		BUREAU OF LAND CARLSBAD FIE	MANAGEMENT	
14. I hereby certify that the foregoing is to			BUREAU OF LAND CARLSBAD FIE	MANAGEMENT	
14. I hereby certify that the foregoing is t	rue and correct Name	Jerry Matthews	CARLSBAD FIE	MANAGEMENT LD OFFICE	
14. I hereby certify that the foregoing is to signed May Mathema		Jerry Matthews Production Foreman	CARLSBAD FIE	MANAGEMENT	
1 2 2 2 2	Name		CARLSBAD FIE	MANAGEMENT LD OFFICE	
1 2 2 2 2	NameTitle		CARLSBAD FIE	MANAGEMENT LD OFFICE	
Signed My Mother	NameTitle		CARLSBAD FIE	MANAGEMENT LD OFFICE	