

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007

**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.*

**SUBMIT IN TRIPLICATE- Other instructions on reverse side.**

1. Type of Well  
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator **Devon Energy Production Company, L.P.**

3a. Address  
**PO Box 6459, Navajo Dam, NM 87419**

3b. Phone No. (include area code)  
**405-552-7917**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**SL - 1,245' FNL & 2,350' FWL, NE NW, Unit C, Sec. 20, T30N- R7W  
BHL - 700' FNL & 700' FWL, NW NW, Unit D, Sec. 20, T30N- R7W**

5. Lease Serial No.  
**NM 013706A**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.  
**Northeast Blanco Unit**

8. Well Name and No.  
**NEBU 13M**

9. API Well No.  
**30-039-29748**

10. Field and Pool, or Exploratory Area  
**Basin Dakota/Blanco Mesaverde**

11. County or Parish, State  
**Rio Arriba, NM**

**12. CHECK APPROPRIATE BOX(ES) 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 <b>Casing and Cement</b>
	<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 Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat 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 recompleat 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.)

**Drilled 12 1/4" hole to 286' on 6/12/06, set 6 jts of 9 5/8", H-40, ST&C, 32.3# casing at 276'. Cemented w/200 sx (42 bbls) "G" cement w/2% CaCl and 1/4# PSX Floceal. Circulated 15 bbls of cement to surface. Test casing to 750 psi.**

**Drilled 8 3/4" hole to 3,955' on 6/18/06, set 89 jts of 7", J-55 LT&C, 23# casing at 3,944'. Cemented lead w/550 sx (142 bbls) 50/50 POZ cement w/3% Gel, 5# Gilsonite, 1/4# PSX Flocele, 0.1% CFR 3, 0.4% Halad 344 and tail w/75 sx (19 bbls) same slurry non-foamed. Circulated 40 bbls of cement to surface. Tested casing to 1,500 psi.**

**Drilled 6 1/4" hole to 8,420' on 6/29/06, set 196 jts 4 1/2", J-55, LT&C, 11.6# casing at 8,410'. Cemented lead w/285 sx (72 bbls) 50/50 POZ w/2% Gel, 2/10% Veraset, 1/10% Diacel LWL and tail w/410 sx (129 bbls) 50/50 POZ, 3% Gel, 1 4/105 Halad 9, 1/10% CFR3, 5# Gilsonite & 1/4# Flocele. No cement to surface, top of cement is at 4,990' per CBL & approved top by Jim Lovato via email on 8-9-06. Tested casing to 1500 psi.**

RCVD NOV22'06  
OIL CONS. DIV.  
DIST. 3

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

**Melisa Castro**

Title **Senior Operations Technician**

Signature

Date

**11-15-06**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

NMOOD

