

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

5. Lease Serial No.
SF 079003

NOV 03 2008

6. If Indian, Allottee, or Tribe, Name
Bureau of Land Management
Farmington Field Office

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 page 2.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

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

3a. Address
P.O. Box 6459
Navajo Dam, NM 87419

3b. Phone No. (include area code)
505-324-5600

4. Location of Well (Footage, Sec., T, R, M., or Survey Description)
SL: 2390' FNL & 1240' FWL, Unit E, SW NW, Sec. 35, 31N, 7W
BHL: 700' FSL & 1940' FWL, Unit N, SE SE, Sec. 35, 31N, 7W

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

8. Well Name and No.
257H

9. API Well No
30-045-34650

10. Field and Pool or Exploratory Area
S Los Pinos F/S Pictured Cliffs

11. Country or Parish, State
San Juan, NM

12. CHECK THE 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 checked="" 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 <u>Completion report</u>
	<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	

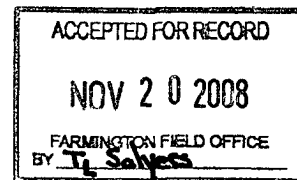
13. Describe Proposed or Completed Operation. Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

On 10/25/08 the above well was perforated in the Pictured Cliffs zone from 4339' to 5016' with 3 Sliding Sleeves. On the same date the well was fracture treated in three stages with 100,000 gal per stage for a total of 300,000 gal Delta 140 fluid. Pumped 200,000# per stage for a total of 600,000# of 20/40 Brady sand. The average rate was 35 bpm, average pressure 1850 psi, and the final frac gradient was .81 psi/ft. ✓

RCVD NOV 25 '08

OIL CONS. DIV.

DIST. 3



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

Katie Lam

Title Field Clerk

Signature

Katie Lam

Date

10-30-08

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)

NMOCD