

Form 3160-5
(June 2015)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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.5. Lease Serial No.
NMNM105557

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
PAPA FRITAS 27-22 FED COM 332H9. API Well No.
30-015-46579-00-X110. Field and Pool or Exploratory Area
LAGUNA SALADO-BONE SPRING11. County or Parish, State
EDDY COUNTY, NM**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

Contact: REBECCA DEAL

Email: Rebecca.Deal@dvn.com

3a. Address

6488 SEVEN RIVERS HIGHWAY
ARTESIA, NM 88210

3b. Phone No. (include area code)

Ph: 405-228-8429

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

Sec 27 T23S R29E SESW 152FSL 1822FEL
32.269009 N Lat, 103.969910 W Lon

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 type="checkbox"/> Hydraulic Fracturing	<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 type="checkbox"/> Other
	<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 checked="" 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.

WATER PRODUCTION & DISPOSAL INFORMATION

Site Name: PAPAS FRITAS 27-22 FED COM 332H

1. Name(s) of formation(s) producing water on the lease: Laguna Salado; BS,S

2. Amount of water produced from all formations in barrels per day: 5200bbls per day

4. How water is stored on lease: 3-750bbl water tanks located at the Papas Fritas CTB 2

5. How water is moved to the disposal facility: piped

Entered - KMS NMOCD

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

Electronic Submission #537377 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION COMPAN, sent to the Carlsbad
Committed to AFMSS for processing by DEBORAH MCKINNEY on 11/20/2020 (21DLM0059SE)

Name (Printed/Typed) REBECCA DEAL

Title REGULATORY COMPLIANCE PROFESSI

Signature (Electronic Submission)

Date 11/13/2020

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

ACCEPTED

DEBORAH MCKINNEY
Title LEGAL INSTRUMENTS EXAMINER

Date 12/04/2020

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 Carlsbad

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)

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

Additional data for EC transaction #537377 that would not fit on the form

32. Additional remarks, continued

6. Identify the Disposal Facility by:

A. Facility Operators Name: a) Mesquite SWD, Inc b) NGL Water Solutions Permian

B. Facility or well name/number:

a) Bran SWD 1 b) Cedar Canyon SWD 1

C. Type of Facility or well (WDW) (WIW): a) WDW b) WDW

D.1) Location by 1/4 1/4 SE/4 SE/4 Section 11 Township 24S Range 31E

D.2) Location by 1/4 1/4 SE/4 SE/4 Section 8 Township 24S Range 29E

Revisions to Operator-Submitted EC Data for Sundry Notice #537377

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	DISPOSE SR	DISPOSE SR
Lease:	NMNM105557	NMNM105557
Agreement:		
Operator:	DEVON ENERGY PRODUCTION COMPAN 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102 Ph: 405-228-8429	DEVON ENERGY PRODUCTION COMPAN 6488 SEVEN RIVERS HIGHWAY ARTESIA, NM 88210 Ph: 575.748.3371
Admin Contact:	REBECCA DEAL REGULATORY COMPLIANCE PROFESSI E-Mail: Rebecca.Deal@dvn.com Ph: 405-228-8429	REBECCA DEAL REGULATORY COMPLIANCE PROFESSI E-Mail: Rebecca.Deal@dvn.com Ph: 405-228-8429
Tech Contact:	REBECCA DEAL REGULATORY COMPLIANCE PROFESSI E-Mail: Rebecca.Deal@dvn.com Ph: 405-228-8429	REBECCA DEAL REGULATORY COMPLIANCE PROFESSI E-Mail: Rebecca.Deal@dvn.com Ph: 405-228-8429
Location:		
State:	NM	NM
County:	EDDY	EDDY
Field/Pool:	LAGUNA SALADO;BONE SPRING	LAGUNA SALADO-BONE SPRING
Well/Facility:	PAPA FRITAS 27-22 FED COM 332H Sec 27 T23S R29E Mer NMP SESW 152FSL 1822FEL	PAPA FRITAS 27-22 FED COM 332H Sec 27 T23S R29E SESW 152FSL 1822FEL 32.269009 N Lat, 103.969910 W Lon

1220 S. St Francis Dr., Santa Fe, NM 87505
Phone:(505) 476-3470 Fax:(505) 476-3462

Action 12192

OCD Reviewer	Condition
ksimmons	None