

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 (APD) for such proposals

FORM APPROVED
OMB NO. 1004-0135

EXPIRES: NOVEMBER 30, 2000

N.M. Oil Cons. DIV-Dist. 2

301 W. Grand Avenue

Artesia, NM 88210

SUBMIT IN TRIPLICATE

RECEIVED

1a. Type of Well	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input type="checkbox"/> Other
JUL 29 2005			
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP			
3. Address and Telephone No. 20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-552-4615			
4. Location of Well (Report location clearly and in accordance with Federal requirements)* 330 FSL 730 FWL M 17 T23S R31E			

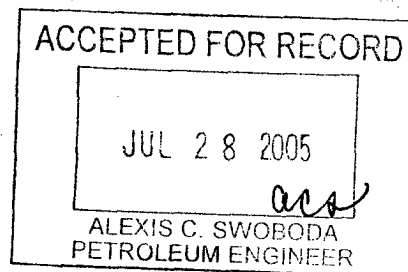
5. Lease Serial No. NM-45235
6. If Indian, Allottee or Tribe Name
7. Unit or CA Agreement Name and No.
8. Well Name and No. Pure Gold C-17 Federal 13
9. API Well No. 30-015-27501
10. Field and Pool, or Exploratory Los Medanos (Delaware)
12. County or Parish 13. State EDDY NM

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)

MIRU on 9/8/04. Perforated the Brushy Canyon at 6,818' - 6,828', 2 spf, 20 holes. Set RBP at 7400' to isolate Delaware perms at 7,790' - 7,830'. Acidized Brushy Canyon perms with 1000 gals, 7.5% pentol acid. Swabbed back 20% oil cut. Fraced Brushy Canyon perms at 6,818' - 6,828' with 11,690 gals spectra frac G-3000 and 28,000# 16/30 sand. Bailed sand and retrieved RBP at 7400'. Ran 2-7/8" production tubing, rod string and pump. End of tubing at 7908'. HWO on 9/16/04 and test. Tested all water. Final test was 0 BO, 0 MCF, 111 BW on 10/12/04. On 10/15/04, pulled rods, pump, and tubing. Set 5.5 RBP at 7,508'. Ran 2-7/8" production tubing, rod string and pump. End of tubing at 6897'. HWO and turned to production on 10/16/04. Tested 15 BO, 0 MCF, 183 BW on 10/20/04. Original Delaware perforations (7,790'-7,830') are below RBP at 7,508'. Well is producing from the Brushy Canyon perforations at 6,818' - 6,828'.



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

Signed Ronnie Slack Name Ronnie Slack Title Engineering Technician Date 7/26/05

(This space for Federal or State Office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any: _____