Form 3160-5 (August 2007)	UNITED STA DEPARTMENT OF TH		OCD Artesia		C	FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010		
BUREAU OF LAND MANAC		ANAGEMENT	EMENT		5. Lease Serial No. USA NMNM LC 0065680			
Do not use	RY NOTICES AND RE this form for proposa rell. Use Form 3160-3	Is to drill or to re	e-enter an		6. If Indian, Allottee o			
	UBMIT IN TRIPLICATE - O	ther instructions on pa	age 2.		7. If Unit of CA/Agre	ement.	, Name and/or No.	
1. Type of Well Gas Well Oil Well Gas Well					8. Well Name and No SERENE SIST	8. Well Name and No. SERENE SISTERS 25 FEDERAL 1H		
2. Name of Operator DEVON ENERGY PRODUCTION CO LP					9. API Well No. 30-015-3	9. API Well No. 30-015-38314		
a. Address		3b. Phone No. (in	clude area code	?)	10. Field and Pool or			
PO BOX 250, ARTESIA, NM		575-748	-3371		TAMANO; I	BONE	SPRINGS	
Location of Well (Footage, Sec., T., R., M., or Survey Description) 200' FNL & 1000' FEL, UNIT A, SEC 25, T185, R31E					11. Country or Parish, State EDDY COUNTY, NM			
······	CHECK THE APPROPRIATI		TENATURE	OF NO	<u>·</u>			
TYPE OF SUBMISSION	· ···· J							
	Acidize	Deepen			Production (Start/Resume)	- <u>-</u> -	Water Shut-Off	
Notice of Intent	Alter Casing	Fracture	Treat		Reclamation		Well Integrity	
Subsequent Report	Casing Repair	New Cor	struction		Recomplete		Other	
Subsequent Report	Change Plans	Plug and	Abandon		Cemporarily Abandon			
Final Abandonment Notice	Convert to Inject	ion 🗌 Plug Bac	k.		Water Disposal			
Attach the Bond under whic following completion of the testing has been completed. determined that the site is re	,	ontally, give subsurface or provide the Bond No. eration results in a multi nust be filed only after a	locations and m on file with BL iple completion Il requirements	neasure .M/BIA or reco , includ	 Required subsequent report of a new interval ompletion in a new interval ling reclamation, have been 	of all p orts n , a Fo i comp	pertinent markers and zones. nust be filed within 30 days rm 3160-4 must be filed once	
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