

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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.
NMNM0404441

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

8. Well Name and No.
TODD 13 FEDERAL 14.

9. API Well No.
30-015-27860

10. Field and Pool, or Exploratory
DELAWARE

11. County or Parish, and State
EDDY COUNTY, NM

1. Type of Well
 Oil Well Gas Well Other: UNKNOWN OTH

2. Name of Operator **DEVON ENERGY** Contact: **JEANETTE BARRON**
E-Mail: jeanette.barron@dvn.com

3a. Address **PO BOX 250
ARTESIA, NM 88211** 3b. Phone No. (include area code)
Ph: 515-748-1813

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

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 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 recomplete 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 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 requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

- Notice of Written Order Number 14JH126W
- This well is producing from the Delaware formation
 - Water produced is approximately 250 bbls
 - There is 2 -750 bbls
 - Water is pipelined
 - Disposal facility operator EOG Resources
 - Facility Name Ttiste Draw 36 state NO. 1
 - SWD location by 1/4 1/4 SWNW section 36 township 23S range 32E

NM OIL CONSERVATION
ARTESIA DISTRICT
JUL 16 2014

RECEIVED

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

APD 7-29-14
Accepted for record
NMDCD

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

Electronic Submission #242147 verified by the BLM Well Information System
For DEVON ENERGY, sent to the Carlsbad
Committed to AFMSS for processing by ANGEL MAYES on 05/29/2014 ()

Name (Printed/Typed) **JEANETTE BARRON**

Title **FIELD ADMIN TECH**

Signature (Electronic Submission)

Date **04/14/2014**

APPROVED

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____

Title

JUL 11 2014
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

JAMES A. AMOS
SUPERVISOR EPS

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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

WATER PRODUCTION & DISPOSAL INFORMATION

In order to process your disposal request, the following information must be completed in full

1. Name(s) of formation(s) producing water on the lease:
Delaware
2. Amount of water produced from all formations in barrels per day:
250 bbls
3. Attach a current water analysis of produced water from all zones showing at least the total dissolved solids, ph, and the concentrations of chlorides and sulfates.
(One sample will suffice if water is commingled)
4. How water is stored on lease:
2- 750 bbls
5. How water is moved to the disposal facility:
pipelined
6. Identify the Disposal Facility by:
 - A. Facility Operators Name: EOG Resources Inc.
 - B. Facility or well name/number: Triste Draw 36 State #1
 - C. Type of Facility or well (WDW)(WIW): WDW
 - D. Location by ¼ ¼ ~~SWNW~~ Section 36 Township 23S Range 32E
7. Attach a copy of the State issued permit for the Disposal Facility.
(Info on the NMOCD Website or on the Artesia LDrive)

Submit to this office, 620 EAST GREENE ST, CARLSBAD NM, 88220, the above required information on a Sundry Notice 3160-5. Submit 1 original and 5 copies, within abatement period. (This form may be used as an attachment to the Sundry Notice.)

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 87240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO.
 30-025-31929

5. Indicate Type of Lease
 STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name:
 Triste Draw 36 State

8. Well Number
 1

9. OGRID Number
 7377

10. Pool name or Wildcat
 SWD; Delaware

SUNDRY NOTICES AND REPORTS ON WELLS
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
 Oil Well Gas Well Other **SWD**

2. Name of Operator
EOG Resources Inc.

3. Address of Operator
P.O. Box 2267 Midland, Texas 79705

4. Well Location
 Unit Letter **E** ; **1980** feet from the **North** line and **510** feet from the **West** line
 Section **36** Township **23S** Range **32E** NMPM County **Lea**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application or Closure
 Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____
 Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

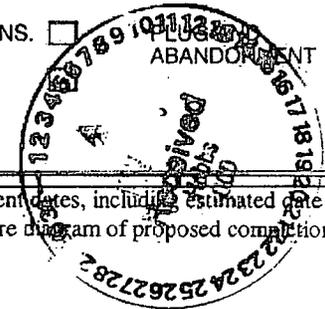
NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

PERFORM REMEDIAL WORK PLUG AND ABANDON
 TEMPORARILY ABANDON CHANGE PLANS
 PULL OR ALTER CASING MULTIPLE COMPLETION

REMEDIAL WORK ALTERING CASING
 COMMENCE DRILLING OPNS. ABANDONMENT
 CASING TEST AND CEMENT JOB

OTHER: OTHER:



13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 10/12/06 MIRU. Release packer & POOH w/ 2 3/8" IPC tubing.
- 10/13/06 Set RBP @ 5233'. Pressure test 5 1/2" casing to 550 psi. Release RBP, pull out of hole.
- 10/14/06 RIH w/ 2 7/8" IPC injection tubing & packer assembly.
 Set packer @ 5226'. Load annulus w/ packer fluid.
 Pressure test 2 7/8" X 5 1/2" annulus to 500 psi for 30 min. Test good.
 RDMO. Returned to injection.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCDC guidelines , a general permit or an (attached) alternative OCD-approved plan

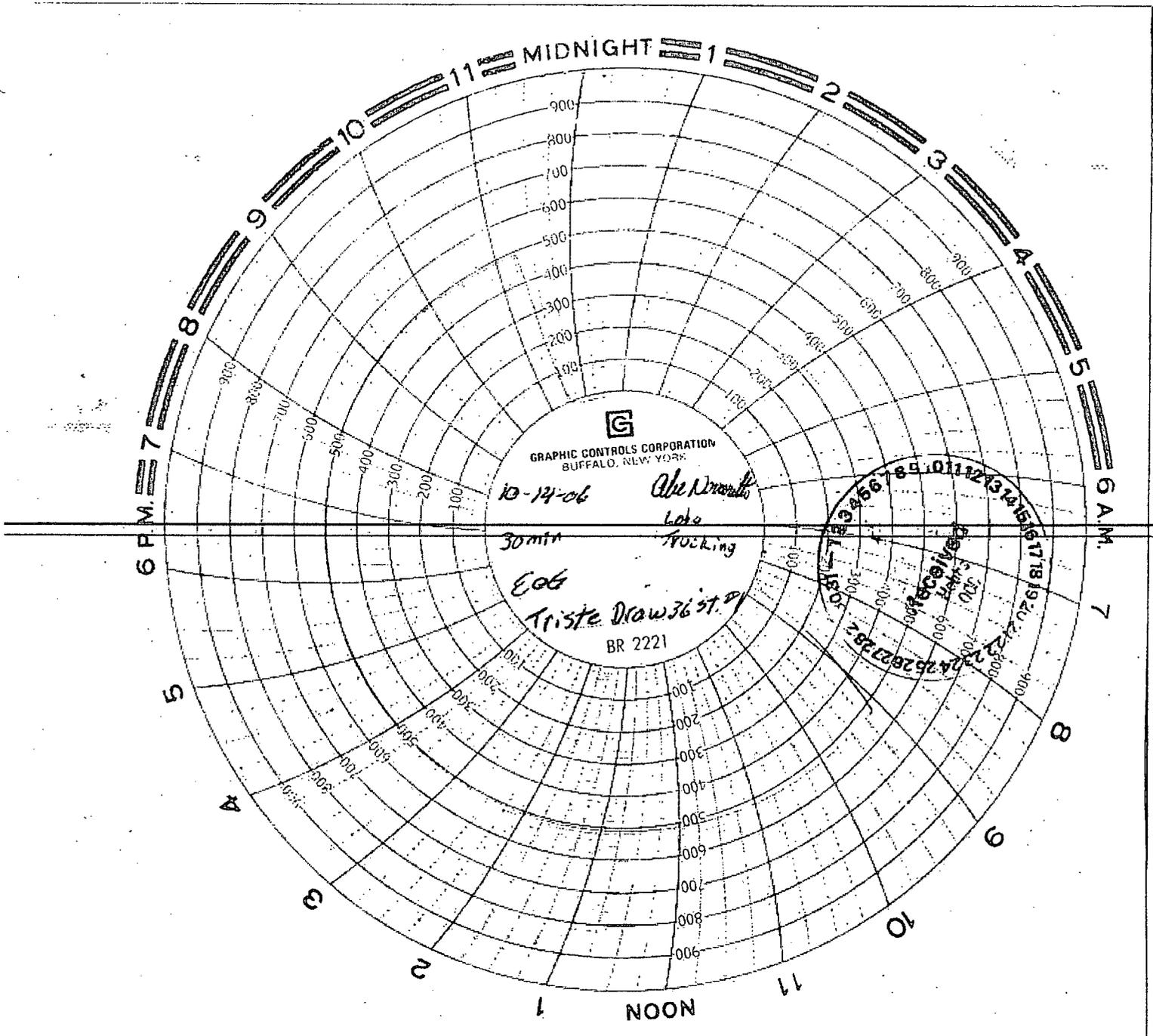
SIGNATURE Stan Wagner TITLE Regulatory Analyst DATE 11/2/06

Type or print name Stan Wagner E-mail address: _____ Telephone No. 432 686 3689

For State Use Only OC FIELD REPRESENTATIVE II/STAFF MANAGER

APPROVED BY Gayle W. Wank TITLE _____ DATE NOV 06 2006

Conditions of Approval, if any _____



This chart is a frequency response plot. The radial lines represent frequency in cycles per second (cps), and the concentric circles represent amplitude in decibels (dB). The chart is used to plot the frequency response of a system. The handwritten notes provide details about the test conditions and the system being tested.

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

WELL API NO.
30-025-31929

5. Indicate Type of Lease
STATE FEE

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name
Triste Draw '36' State

8. Well No.
No. 1

9. Pool name or Wildcat
Triste Draw Delaware

SUNDRY NOTICES AND REPORTS ON WELLS
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:
OIL WELL GAS WELL OTHER

2. Name of Operator
Meridian Oil Inc.

3. Address of Operator
P.O. 51310, Midland, TX 79710-1810

4. Well Location
Unit Letter E 1980' Feet From The North Line and 510' Feet From The West Line.
Section 36 Township 23S Range 32E NMPM Lea County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <u>Convert to Disposal</u> <input checked="" type="checkbox"/>		OTHER: _____ <input type="checkbox"/>	

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

Please find attached, the recommended procedures to convert the well to a disposal well. All necessary permit applications have been filed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Regulatory Compliance DATE 10/9/95

TYPE OR PRINT NAME Donna Williams TELEPHONE NO. 915-688-6943

(This space for State Use)

ORIGINAL SIGNED BY DAVID SEXTON
DISTRICT III OFFICE

APPROVED BY _____ TITLE _____ DATE OCT 19 1995

CONDITIONS OF APPROVAL, IF ANY:

OIL CONSERVATION DIVISION

ADMINISTRATIVE ORDER SWD-608

APPLICATION OF MERIDIAN OIL COMPANY FOR SALT WATER DISPOSAL, LEA COUNTY, NEW MEXICO.

ADMINISTRATIVE ORDER OF THE OIL CONSERVATION DIVISION

Under the provisions of Rule 701(B), Meridian Oil Company made application to the New Mexico Oil Conservation Division on October 10, 1995, for permission to complete for salt water disposal its Triste Draw "36" State Well No.1 located 1980 feet from the North line and 510 feet from the West line in Unit E of Section 36, Township 23 South, Range 32 East, NMPM, Lea County, New Mexico.

THE DIVISION DIRECTOR FINDS THAT:

- (1) The application has been duly filed under the provisions of Rule 701(B) of the Division Rules and Regulations.
(2) Satisfactory information has been provided that all offset operators and surface owners have been duly notified; and
(3) The applicant has presented satisfactory evidence that all requirements prescribed in Rule 701 will be met.
(4) No objections have been received within the waiting period prescribed by said rule.

IT IS THEREFORE ORDERED THAT:

(1) The applicant herein, Meridian Oil Company is hereby authorized to complete its Triste Draw "36" State Well No.1 located 1980 feet from the North line and 510 feet from the West line in Unit E of Section 36, Township 23 South, Range 32 East, NMPM, Lea County, New Mexico, in such a manner as to permit the injection of salt water for disposal purposes into the Bell Canyon formation at approximately 5364 feet to approximately 6138 feet through 2 7/8 inch plastic lined tubing set in a packer located at approximately 5300 feet.

IT IS FURTHER ORDERED THAT:

The operator shall take all steps necessary to ensure that the injected water enters only the proposed injection interval and is not permitted to escape to other formations or onto the surface.

Prior to commencing injection operations into the well, the casing shall be pressure tested from the surface to the packer setting depth to assure the integrity of said casing.

The casing-tubing annulus shall be loaded with an inert fluid and equipped with a pressure gauge at the surface or left open to the atmosphere to facilitate detection of leakage in the casing, tubing, or packer.

The injection well or system shall be equipped with a pressure limiting device which will limit the wellhead pressure on the injection well to no more than 1073 psi.

The Director of the Division may authorize an increase in injection pressure upon a proper showing by the operator of said well that such higher pressure will not result in migration of the injected fluid from the Bell Canyon formation. Such proper showing shall consist of a valid step-rate test run in accordance with and acceptable to this office.

The operator shall notify the supervisor of the Hobbs district office of the Division of the date and time of the installation of disposal equipment and of the mechanical integrity test so that the same may be inspected and witnessed.

The operator shall immediately notify the supervisor of the Hobbs district office of the Division of the failure of the tubing, casing, or packer in said well and shall take such steps as may be timely and necessary to correct such failure or leakage.

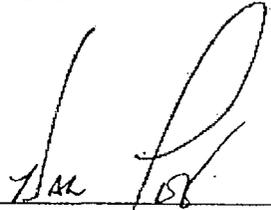
PROVIDED FURTHER THAT, jurisdiction of this cause is hereby retained by the Division for the entry of such further order or orders as may be deemed necessary or convenient for the prevention of waste and/or protection of correlative rights; upon failure of the operator to conduct operations in a manner which will ensure the protection of fresh water or in a manner inconsistent with the requirements set forth in this order, the Division may, after notice and hearing, terminate the injection authority granted herein.

Triste Draw 36 State #1
Conversion to SWD Procedure Cont'd.

7. With Annulus Open: Pump treated 2% KCL water to insure tool is functioning. RIH past all perforations pumping 2% KCL water at 5 BPM. Treat all perforations with ± 25 gal per perforated foot (6,000 gal total volume).
8. With Annulus Closed: PUH across all perforations pumping 15% NEFe HCL acid at $\pm 4-5$ bpm. Treat perforations with ± 42 gal per perforated foot (10,000 gal. total volume).

Anticipated Treating Rate = 5 - 6 BPM
Anticipated Treating Press = 1,500 psi
Maximum Treating Press = 4,250 psi
9. RIH with sonic hammer past perms. Open shear sleeve, swab back acid load. POOH, laying down, with 2 7/8" workstring and sonic hammer. RD standpipe and chicksans.
10. PU and RIH with Baker nickle plated "A-3" lok-set packer, Baker stainless steel L-316 on/off tool, and ± 167 jts 2 3/8" J-55 IPC tubing. Displace annulus with one drum of packer fluid mixed with 80 bbls fresh water. Set packer at 5,250' and pressure test backside to 500 psi. Bleed off test pressure.
11. Notify New Mexico OCD office in Artesia and perform mechanical integrity test.
12. ND BOP. NU injection wellhead. RD pulling unit. Begin injection and turn over to production operations.

Approved: _____


H. A. Lcc

Date: _____

10/6/95

BUREAU OF LAND MANAGEMENT
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972

Disposal of Produced Water From Federal Wells
Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approval:

1. This agency shall be notified of any change in your method or location of disposal.
2. Compliance with all provisions of Onshore Order No. 7.
3. This agency shall be notified of any spill or discharge as required by NTL-3A.
4. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
5. Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
6. This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.
7. If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.
8. Disposal at any other site will require prior approval.
9. Subject to like approval by NMOCD.

7/10/14