

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM 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.***SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM130329
2. Name of Operator DEVON ENERGY PRODUCTION CO		6. If Indian, Allottee or Tribe Name
Contact: MEGAN MORAVEC Email: megan.moravec@dnv.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-552-3622	8. Well Name and No. MERLYN 27 22 FED 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 34 T21S R31E NENW 1165FNL 2385FWL 32.439120 N Lat, 103.766543 W Lon		9. API Well No. 30-015-42385-00-X1
		10. Field and Pool, or Exploratory LOST TANK
		11. County or Parish, and State EDDY COUNTY, NM

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 checked="" type="checkbox"/> Other Drilling Operations
	<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 recomple 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.)

(11/14/14-11/18/14) Spud @ 14:00. TD 17-1/2? hole @ 675?. RIH w/ 16 jts 13-3/8? 48# H-40 STC csg, set @ 663?. Lead w/ 710 sx CIC, yld 1.34 cu ft/sk. Disp w/ 99 bbls 8.34 ppg FW. Circ 294 sx cmt to surf. PT BOPE @ 250/3000 psi, held each test 10 min, OK. PT back to pumps @ 250/4000 psi, held for 10 min, OK. PT csg to 1211 psi, OK.

(11/23/14-11/26/14) TD 12-1/4? hole @ 4136?. RIH w/ 77 jts 9-5/8? 36# J-55 LTC followed by 20 jts 9-5/8? 40# J-55 LTC csg, set @ 4121.4?. Lead w/ 1005 sx CIC, yld 1.87 cu ft/sk. Tail w/ 102 sx CIC, yld 1.33 cu ft/sk. Disp w/ 314 bbls water. Circ 372 sx cmt to surf. PT Co-Flex Choke line @ 250/3000 psi, held for 10 min, OK. PT csg to 2464 psi, OK.

(12/17/14-12/29/14) TD 8-3/4? hole @ 18797?. RIH w/ 441 jts 5-1/2? 20# P-110 csg, set @ 18730?. 1st stage cmt lead w/ 975 sx CIH, yld 2.30 cu ft/sk. Tail w/ 2485 sx CIH, yld 1.22 cu ft/sk. Disp

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

Electronic Submission #288876 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER MASON on 01/22/2015 (15JAM0199SE)

Name (Printed/Typed) MEGAN MORAVEC

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 01/21/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

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.

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

Additional data for EC transaction #288876 that would not fit on the form

32. Additional remarks, continued

w/ 414 bbls FW. No cmt to surf. Open DVT, set @ 4447.7?. Circ 70 bbls cmt to surf. 2nd stage cmt lead w/ 300 sx CIH, yld 3.37 cu ft/sk. Tail w/ 285 sx CIC, yld 1.33 cu ft/sk. Disp w/ 99.5 bbls FW. Circ 40 bbls cmt to surf. TOC @ surf. RR @ 06:00.