

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NO OIL CONSERVATION
NMOCD
ARTESIA DISTRICT

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.

AUG 3 2015

RECEIVED

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

5. Lease Serial No.
NMNM0107697

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
REGULUS 26 FED 5H

9. API Well No.
30-015-42489

10. Field and Pool, or Exploratory
LUSK; BONE SPRING WEST

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

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
DEVON ENERGY PRODUCTION COMPANY
Contact: LUCRETIA A MORRIS
lucretia.morris@dvn.com

3a. Address
333 W. SHERIDAN AVENUE
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)
Ph: 405-552-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 26 T19S R31E NENE 480FNL 667FEL

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 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 shall 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 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.)

(11/25/14-11/29/14) Spud @ 04:00. TD 26? hole @ 837?. RIH w/ 20 jts 20? 94# J-55 BTC csg, set @ 837?. Lead w/ 1205 sx CIC, yld 1.73 cu ft/sk. Tail w/ 300 sx CIC, yld 1.35 cu ft/sk. Disp w/ 281 bbls 8.9# mud. Circ 130 bbls cmt to surf. PT BOPE @ 250/2000 psi, held each test for 10 min, OK. PT csg to 1477 psi, OK.

(12/1/14-12/5/14) TD 17-1/2? hole @ 2529?. RIH w/ 61 jts 13-3/8? 68# J-55 BT csg, set @ 2529?. Lead w/ 1259 sx CIC, yld 1.73 cu ft/sk. Tail w/ 439 sx CIC, yld 1.38 cu ft/sk. Disp w/ 372 bbls FW. Circ 375 sx cmt to surf. PT BOPE @ 250/3000 psi, OK. PT csg to 1500 psi, OK.

(12/12/14-12/16/14) TD 12-1/4? hole @ 4448?. RIH w/ 105 jts 9-5/8? 40# J-55 LTC csg, set @ 4448?. Set DVT @ 2559?. 1st stage lead w/ 515 sx CIC, yld 1.65 cu ft/sk. Tail w/ 550 sx CIC, yld 1.38 cu ft/sk. Disp w/ 298 bbls FW. ETOC 4002?. 2nd stage lead w/ 490 sx CIC, yld 1.65 cu ft/sk. Tail w/

JRD 8/12/15
Accepted for record
NMOCD

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

Electronic Submission #289370 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION COMPANY, sent to the Carlsbad Committed to AFMSS for processing by DEBORAH HAM on 06/13/2015

Name (Printed/Typed) LUCRETIA A MORRIS	Title REGULATORY COMPLIANCE ANALYST
Signature (Electronic Submission)	Date 01/26/2015

ACCEPTED FOR RECORD

JUL 24 2015

D. Ham

**BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE**

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.

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