

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

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. NMNM0503
2. Name of Operator DEVON ENERGY PRODUCTION CO		6. If Indian, Allottee or Tribe Name
Contact: MEGAN MORAVEC Email: Megan.Moravec@dvn.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. COTTON DRAW UNIT 241H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 13 T25S R31E NENW 215FNL 1980FWL		9. API Well No. 30-015-43220-00-X1
		10. Field and Pool, or Exploratory PADUCA
		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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other Drilling Operations
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back

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.)

(8/18/15-8/19/15) Spud @ 04:30. TD 17-1/2? hole @ 790?. RIH w/ 18 jts 13-3/8? 54.5# J-55 BT csg, set @ 779.5?. Lead w/ 805 sx CIC, yld 1.34 cu ft/sk. Disp w/ 114.7 bbls displacement. Circ 98 bbls cmt to surf. PT BOPE @ 250/3000 psi, PT mud lines @ 250/4000 psi, held all tests 10 min per test, OK. PT csg to 1500 psi, held 30 min, OK.

(8/21/15-8/22/15) TD 12-1/4? hole @ 4306?. RIH w/ 87 jts 9-5/8? 40# J-55 & 7 jts 9-5/8? 40# HCK-55 BTC, set @ 4306?. Lead w/ 895 sx CIC, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 323 bbls FW. Full returns to surf, TOC @ surf. PT csg to 2765 psi for 30 min, OK.

(8/30/15-9/5/15) TD 8-3/4? hole @ 15312?. RIH w/ 338 jts 5-1/2? 17# P110-RY csg, set @ 15312?. 1st lead w/ 540 sx cmt, yld 2.83 cu ft/sk. 2nd lead w/ 540 sx cmt, yld 2.29 cu ft/sk. Tail w/ 1285 sx POZ Mix, yld 1.19 cu ft/sk. Disp w/ 354 bbls displacement. ETOC @ 2312?. RR @ 06:00.

NM OIL CONSERVATION
ARTESIA DISTRICT

OCT 30 2015

RECEIVED

Accepted for record

NMOC

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #317881 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/23/2015 (16JAS0696SE)	
Name (Printed/Typed) MEGAN MORAVEC	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 09/28/2015

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 ****