

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTOCD Artesia
NM OIL CONSERVATION
ARTESIA DISTRICTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS** FEB 29 2016
*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. NMNM0405444
2. Name of Operator DEVON ENERGY PRODUCTION CO Contact: DAVID A EYLER Email: DEYLER@MILAGRO-RES.COM		6. If Indian, Allottee or Tribe Name
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 432-687-3033	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 15 T23S R31E NESE 1980FSL 660FEL		8. Well Name and No. TODD 151 FED 9
		9. API Well No. 30-015-32949-00-S1
		10. Field and Pool, or Exploratory INGLE WELLS-DELAWARE
		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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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 recomple 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.)

01/14/16: PUMP 25 SXS. CLASS H CMT. @ 8,142'(PER BLM); WOC.
01/15/16: TAG CMT. @ 7,464'(OK'D BY BLM); CIRC. WELL W/ PXA FLUID; SET 5-1/2" CIBP @ 6,666'; PRES.
TEST 5-1/2" CSG. TO 700# - TEST GOOD.
01/16/16: PUMP 25 SXS.CMT. @ 6,666'-6,430'; PUMP 25 SXS.CMT. @ 4,571'; WOC X TAG CMT. @ 4,043';
PUMP 29 SXS.CMT. @ 4,043'(PER BLM); WOC.]
01/17/16: TAG CMT. @ 3,748'(OK'D BY BLM); CUT X PULL 5-1/2" CSG. @ 3,700'.
01/18/16: PUMP 200 SXS.CMT. @ 3,767'; WOC.
01/19/16: TAG CMT. @ 3,142'; PUMP 350 SXS.CMT. @ 3,142'; WOC.
01/20/16" TAG CMT. @ 1,788'; PUMP 260 SXS.CMT. @ 1,788'; WOC X TAG CMT. @ 1,116'; PUMP 100 SXS.CMT.
@ 1,116'(PER BLM); WOC.
01/21/16: TAG CMT. @ 626'(OK'D BY BLM); MIX X CIRC. TO SURF. 30 SXS.CMT. @ 124'-4'; WOC X VERIFY.
CMT. TO SURF. ON ANNULUS.

Accepted as to plugging of the well bore.
Liability under bond is retained until
Surface restoration is completed.

U.S.D. Accepted for record
3/1/16

14. I hereby certify that the foregoing is true and correct. Electronic Submission #330148 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad Committed to AFMSS for processing by PRISCILLA PEREZ on 01/29/2016 (16PP0338SE)		RECLAMATION
Name (Printed/Typed) DAVID A EYLER	Title AGENT	
Signature (Electronic Submission)	Date 01/29/2016	

Accepted For Record THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved By <i>James A. [Signature]</i>	Title SPET	Date 2-17-16
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 CFB	

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 #330148 that would not fit on the form

32. Additional remarks, continued

01/28/16: DIG OUT X CUT OFF WELLHEAD 3' B.G.L.; WELD ON STEEL PLATE TO CSGS. X INSTALL GROUND LEVEL DRY HOLE MARKER.
WELL PLUGGED AND ABANDONED 01/28/16.