

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED
OMB NO. 1004-0135
EXPIRES: NOVEMBER 30, 2000

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

1a. Type of Well	<input type="checkbox"/> Oil Well	<input checked="" type="checkbox"/> Gas Well	<input type="checkbox"/> Other
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP			
3. Address and Telephone No. 20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-552-8198			
4. Location of Well (Report location clearly and in accordance with Federal requirements)* 2160 FNL 1980 FWL F 5 16S 28E			

5. Lease Serial No. NM 33277
6. If Indian, Allottee or Tribe Name
7. Unit or CA Agreement Name and No. Derrick Federal Com 1
8. Well Name and No. 30-015-23057
9. API Well No. 30-015-23057
10. Field and Pool, or Exploratory Diamond Mound; Strawn
12. County or Parish 13. State Eddy NM

CHECK APPROPRIATE BOX(s) 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete
	<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
			<input type="checkbox"/> Water Shut-Off
			<input type="checkbox"/> Well Integrity
			<input type="checkbox"/> Other

13. . Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work and approximate duration thereof. If the proposal deepens directionally or recompletes horizontally, give subsurface location 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 requirement, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection)

5/03/05 MIRU
5/04/05 ND wellhead and NU BOP. Released on/off tool from packer. Latched onto packer and released. TOOH with tubing and packer. TIH with CIBP and set at 8875'.
5/05/05 TIH with packer and set at 8726'. Tested CIBP to 4000 psi - held good. Tested casing to 500 psi - ok. Released packer and began swabbing.
5/06/05 Finished swabbing well. TOOH with tubing and packer.
5/09/05 RU wireline. Perforate Strawn at 8294-8376'; 67 holes. RD wireline. TIH with treating packer and set at 8204'. Tested casing to 500 psi - ok. Swabbed well.
5/10/05 Acidize Strawn with 7000 gallons of 15% HCl. Flowed well back. Swabbed well.
5/12/05 Swab well. Release packer and TOOH.
5/17/05 Swab well. RDPU. Turn well over to production.

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

Signed [Signature] Name Norvella Adams
Title Sr. Staff Engineering Technician Date 3/9/2006

(This space for Federal or State Office use)

Approved by _____ Title _____ Date _____

Conditions of approval, if any:

