

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Artesia

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.

5. Lease Serial No.
NMNM012121

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. COTTON DRAW UNIT 513H
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY Contact: LINDA GOOD Email: linda.good@dvn.com		9. API Well No. 30-015-44199
3a. Address 333 WEST SHERIDAN AVE. OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-552-6558	10. Field and Pool or Exploratory Area PADUCA; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T24S R31E Mer NMP SWSE 230FSL 1815FEL		11. County or Parish, State EDDY COUNTY, NM

12. CHECK THE 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"/> Hydraulic Fracturing	<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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

(6/14/2017 - 6/18/2017) Spud w/spudder rig @ 20:30 hrs. TD 17-1/2" hole @ 751'. RIH w/19 jts 13-3/8" 54.50# J-55 BTC csg, set @ 744'. Lead w/395 CIC, yld 1.32, 14.80 cu ft/sx. Tail w/390 CIC, yld 1.34, 14.80 cu ft/sx. Disp w/1110 bbl FW. Circ 90 bbl cmt to surf. WOC 6 hrs.

Accepted for record - NMOCD
11-7-17

(10/12/2017 - 10/13/2017) PT BOPE 250/5000 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 min, good test.

NM OIL CONSERVATION
ARTESIA DISTRICT

(10/15/2017 - 10/16/2017) TD 12-1/4" hole @ 4384'. RIH w/100 jts 9-5/8" 40# J-55 csg, set @ 4369'. Lead in w/1135 sx CIC, yld 1.74, 12.90 cu ft/sx. Tail in w/460 sx CIC, yld 1.33, 14.80 cu ft/sx. Disp w/328 bbl FW. 118 bbl cmt to surf. PT BOPE 250/5000 psi, held each test for 10 min, OK. PT csg to 2765 psi for 30 min, good test.

NOV 06 2017

RECEIVED

ACCEPTED FOR RECORD

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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

Electronic Submission #393436 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION COMPAN, sent to the Carlsbad
Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/30/2017 ()

Name (Printed/Typed) LINDA GOOD

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 10/30/2017

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.

(Instructions on page 2)

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

Additional data for EC transaction #393436 that would not fit on the form

32. Additional remarks, continued

(10/28/2017 - 10/29/2017) TD 8-3/4" hole @ 10,701' & TD 8-1/2" hole @ 15,117'. RIH w/354 jts
5-1/2" 17# P-110 csg, set @ 15,094'. Lead w/560 sx CIC, yld 3.63, 10.30 cu ft/sx. Tail w/975 sx
CIC, yld 1.47, 13.20 cu ft/sx. Disp w/347 bbl FW. ETOC @ 900'. RR @ 00:00 hrs.