B	DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT					FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No.	
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.					NMNM0544986 6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well					8. Well Name and No. TODD 25 N FED 14		
Oil Well Gas Well Other: INJECTION Ontact: SHEILA A FISHER					9. API Well No.		
DEVON ENERGY PRODUCTION CO EPMail: Sheila.Fisher@dvn.com					30-015-28859		
3a. Address3b. Phone No. (include area code)PO BOX 250Ph: 575-748-1829ARTESIA, NM 88211					10. Field and Pool or Exploratory Area INGLE WELLS DELAWARE		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State		
Sec 25 T23S R31E SWSW 660FSL 1980FWL 32.269943 N Lat, 103.733634 W Lon				51	EDDY COUNTY, NM		
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION	. TYPE OF ACTION						
□ Notice of Intent	Alter Casing Hyd		Deepen Produ Produ Hydraulic Fracturing Recla		tion (Start/Resume)	U Water Shut-Off	
-					ation	Well Integrity	
🛛 Subsequent Report	Casing Repair New Constru					🛛 Other	
Final Abandonment Notice	 Change Plans Convert to Injection 		 Plug and Abandon Plug Back 		 Temporarily Abandon Water Disposal 		
In response to Notification of UIC Testing Letter for District 2 received August 2017; Bradenhead Test for Todd 25 N Fed 14; API 30-015-28859 was completed on September 25, 2017 and witnessed by Richard Inge, Compliance Officer, NMOCD District II.							
NM OIL CONSERVATION ARTESIA DISTRICT NOV 07 2017							
14. I hereby certify that the foregoing is true and correct. Electronic Submission #389995 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHER OF 1901 100 DEPEndent							
Name (Printed/Typed) SHEILA A FISHER Title FIELD ADMIN SHEPDER T						<u>cord</u>	
Signature (Electronic Submission) Date 09/27/2017							
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved By							
Conditions of approval, if any, are attache certify that the applicant holds legal or equ which would entitle the applicant to condu	itable title to those rights in the		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) ** OPERAT	OR-SUBMITTED ** O	PERATOR		* OPERAT	OR-SUBMITTED	** []	

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