orm 3160-5 (Same 2015) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT			OCD Artesia		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. SUBMIT IN TRIPLICATE - Other instructions on page 2					<ul> <li>NMNM0418220A</li> <li>6. If Indian, Allottee or Tribe Name</li> <li>7. If Unit or CA/Agreement, Name and/or No.</li> </ul>		
2. Name of Operator Contact: RONNIE SLACK DEVON ENERGY PRODUCTION CONLINA il: ronnie.slack@dvn.com					9. API Well No. 30-015-35517-00-S1		
3a. Address 6488 SEVEN RIVERS HIGHW ARTESIA, NM 88211	3b. Phone No. (include area code) Ph: 405-552-4615			10. Field and Pool or Exploratory Area INGLE WELLS			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or I	Parish, State	
Sec 27 T23S R31E SWNW 18				EDDY COUNTY, NM			
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICATE	NATURE O	F NOTICE,	REPORT, OF	ROTHER	DATA
TYPE OF SUBMISSION		TYPE OF ACTION					
□ Notice of Intent	🗖 Acidize	Deepen		D Production (Start/Resume)		ne) 🗖	Water Shut-O
_	Alter Casing	🗖 Hydrau	Hydraulic Fracturing		□ Reclamation		Well Integrity
Subsequent Report	Casing Repair			C Recomplete			Other
Final Abandonment Notice				porarily Abandon er Disposal			
determined that the site is ready for fi 1. 12/4/17-MIRU P&A unit. PC 2. 12/5/17-POOH w/2-7/8" pro 3. 12/7/17-TIH w/work string. 4. 12/7/17-Tagged TOC @ 4.8 5. 12/8/17-Spot 90 5x CI C @	OOH w/rod pump assemb	7 Sof CIBP @	<u>7.01</u> 0'. S <u>pot 50 sx Cl</u> d.	<u>C@5,052</u> '		L CONS	ERVATION
6. 12/11/17-1 <u>agged TOC @ 3</u> 7. 12/12/17- <u>Tagged TOC @ 2</u> Tagged TOC @ 799'.	.592'. Perfed 5-1/2" casin .290'. Perfed 5-1/2" casin	g @ 3,588'. Pur g @ 2,286'. Pur	nped 300 sx C nped 360 sx C	CIC in/out @	2,286	AN 09	2018
<ol> <li>12/12/17-Perfed 5-1/2" casi 9. 12/13/17-Dug out cellar. Cu dry hole marker. Wellbore plug</li> </ol>	t wellhead off 3' below an	x CI C in/out to sound level. Insta	urface. Illed below gro	ound level	fa fa	RECENVE	JAMAT
		Accepted	for record -	18 NMOCD		DUE	6.13.
14. I hereby certify that the foregoing is	true and correct. Electronic Submission # For DEVON ENERG mitted to AFMSS for proce	Y PRODUCTION	COM LP, sent	to the Carlsl	bad		
Com	Initited to AFWI33 for Druce						
Com Name (Printed/Typed) RONNIE S	•	Т	itle PRODU	CTION TEC	HNOLOGIST		
	•	T	itle PRODU	ICTION TEC	HNOLOGIST		
Name (Printed/Typed) RONNIE S	SLACK		ate 12/13/2	017			
Name(Printed/Typed) RONNIE S	SLACK		ate 12/13/2	017			
Name (Printed/Typed) RONNIE S	SLACK	DR FEDERAL	ate 12/13/2	017			<b>/2-29</b> . Date

<sup>(</sup>Instructions on page 2) \*\* BLM REVISED \*\*

