

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD 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.  
NMNM0560289

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.  
NM 70798D

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other8. Well Name and No.  
BURTON FLAT DEEP UNIT 62H ✓

2. Name of Operator

Contact: DANA DELAROSA

✓ DEVON ENERGY PRODUCTION CO E-Mail: dana.delarosa@dev.com

9. API Well No.

30-015-42629 ✓

3a. Address

333 WEST SHERIDAN AVE  
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)

Ph: 575-746-5594

10. Field and Pool or Exploratory Area  
AVALON; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec. 2, T21S-R27E, NWSW, 1950's 100' W

11. County or Parish, State

EDDY COUNTY 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	
	<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.

Attached is the site facility diagram for the Burton Flat Deep Unit 52H to reconcile Notice of Written Order DMB1611045.

Accepted for Record Purposes.

Approval Subject to Onsite Inspection.

Date: 2-15-18

DMCKINNEY

OC 2-27-18  
Accepted for record - NMCOO

FEB 26 2018

FAC ID:

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

Electronic Submission #360109 verified by the BLM Well Information System  
For DEVON ENERGY PRODUCTION CO, sent to the Carlsbad  
Committed to AFMSS for processing by DEBORAH MCKINNEY on 12/15/2016 ( )

Name (Printed/Typed) DANA DELAROSA

Title FIELD ADMIN SUPPORT

Signature (Electronic Submission)

Date 12/06/2016

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

Title

Date

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 \*\***







