

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOCD
ArtesiaFORM 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.***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		5. Lease Serial No. NMNM012121
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY Contact: LINDA GOOD Email: linda.good@dvn.com		6. If Indian, Allottee or Tribe Name
3a. Address 333 WEST SHERIDAN AVE. OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-552-6558	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T24S R31E Mer NMP SWSE 230FSL 1845FEL		8. Well Name and No. COTTON DRAW UNIT 291H
		9. API Well No. 30-015-44106
		10. Field and Pool or Exploratory Area PADUCA; BONE SPRING
		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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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 recompleat 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 recompleat 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.

There was an error on the previous EC 392293 Sundry report submitted. The correct TOC is 3050'.

(6/11/2017 - 6/14/2017) Spud w/spudder rig @ 17:00 hrs. TD 17-1/2" hole @ 772'. RIH w/20 jts 13-3/8" 54.50# J-55 BTC csg, set @ 769'. Lead w/775 sx CIC, yld 1.34, 14.80 sx ft/cu. Disp w/113 bbl FW. Circ 78 bbl cmt to surf. WOC 6 hrs.

(9/26/2017 - 9/27/2017) PT BOPE 250/5000 psi, held each test for 10 min. PT csg to 1500 psi for 30 min, good test.

(9/28/2017 - 10/1/2017) TD 12-1/4" hole @ 4350'. RIH w/96 jts 9-5/8" 40# J-55 BTC csg, set @ 4338'. Lead in w/1050 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/325 bbl FW. Calc 115 bbl cmt to surf. PT BOPE 250/5000 psi, held each test for 10

5-8-18
Accepted for record - NMOCD

RECEIVED

MAY 07 2018

DISTRICT II-ARTESIA O.C.D.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #412051 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 04/18/2018 ()	
Name (Printed/Typed) LINDA GOOD	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 04/18/2018

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 ****

Additional data for EC transaction #412051 that would not fit on the form

32. Additional remarks, continued

min. PT csg to 2765 psi for 30 min, good test.

(10/12/2017 - 10/12/2017) TD 8-3/4" hole @ 10,877' & 8-1/2" hole @ 15,488'. RIH w/373 its 5-1/2" 17# P-110 csg, set @ 15,473'. Lead in w/785 sx CIC, yld 2.91, 11.00 cu ft/sx. Tail in w/975 sx CIC, yld 1.47, 13.20 cu ft/sx. Disp w/357 bbl FW. ETOC @ 3050'. Rig Released @ 21:30 hrs.