Form 3160-5 (June 2015) · DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS					FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No. NMNM89055		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2- OCNODELATION B91005247X							
1. Type of Well         Image: Second state of the second state of th					8. Well Name and No. COTTON DRAW UNIT 544FT 515 H		
2. Name of Operator DEVON ENERGY PRODUC	DECO	9. API Well No. 30-015-44212-00-X1 44716					
3a. Address3b. Phone No333 WEST SHERIDAN AVENUEPh: 405-55OKLAHOMA, OK 73102Ph: 405-55			. (include area cod 2-6558	âa⊆D	10. Field and Pool o PADUCA	r Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish	i, State	
Sec 25 T24S R31E NENE 48 32.194267 N Lat, 103.72409		EDDY COUNTY, NM					
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA							
TYPE OF SUBMISSION	TYPE OF ACTION						
□ Notice of Intent	C Acidize	_ Dee	Deepen		tion (Start/Resume)	Water Shut-Off	
_	Alter Casing		Hydraulic Fracturing		ation	Well Integrity	
Subsequent Report	Casing Repair		Construction	🗖 Recom	plete	Other	
Final Abandonment Notice	Change Plans Div		and Abandon	Tempor	rarily Abandon		
	Convert to Injection		Back 🛛 🛛 Water		Disposal		
13. Describe Proposed or Completed O If the proposal is to deepen direction Attach the Bond under which the w following completion of the involve testing has been completed. Final A determined that the site is ready for	nally or recomplete horizontally, ork will be performed or provide of operations. If the operation re Abandonment Notices must be fi	give subsurface the Bond No. or sults in a multipl	locations and mea i file with BLM/B e completion or re	sured and true vo IA. Required su completion in a uding reclamatio	ertical depths of all per bsequent reports must new interval, a Form 3 on, have been completed	tinent markers and zones. be filed within 30 days 160-4 must be filed once 1 and the operator has	
Site Name: Cotton Draw Unit 515H  1. Name(s) of formation(s) producing water on the lease: Baduca: Bone Spring  Accepted For Record  NMOCD							
1. Name(s) of formation(s) producing water on the lease: Paduca; Bone Spring							
2. Amount of water produced from all formations in barrels per day: 1200 bbl per day - 3-11-19							
4. How water is stored on lease: 6-750 bbl water tanks at the Cotton Draw 25 BS CTB —							
5. How water is moved to the disposal facility: piped $\checkmark$							
6. Identify the Disposal Facili A. Facility Operators Name: a	ty by: a) Devon Energy b) Devor	n Energy 🖌					
14. I hereby certify that the foregoing is true and correct. Electronic Submission #456237 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION COM LP, sent to the Carlsbad							
Committed to AFMSS for processing by PRISCILLA PEREZ on 02/28/2019 (19PP1187SE) Name (Printed/Typed) LINDA GOOD Title REGULATORY OR FCORD							
			TAC	CEPTED	PORSALUUI		
Signature (Electronic	Submission)		Date 02/28	/2019			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE 6 2019							
Approved By			Title	ALC ALLOF		VT Date	
Conditions of approval, if any, are attached. Approval of this notice does not warrant or				CARLSE	BAD FIELD OFFICE		
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 4. States any false, fictitious or fraudulen	3 U.S.C. Section 1212, make it a t statements or representations a	crime for any po s to any matter w	erson knowingly an ithin its jurisdictio	nd willfully to m n.	ake to any department	or agency of the United	

(Instructions on page 2) \*\* BLM REVISED \*\*

## Additional data for EC transaction #456237 that would not fit on the form

## 32. Additional remarks, continued

- B. Facility or well name/number: a) Cotton Draw Unit SWD 181 b) Cotton Draw 32 State SWD 2
- C. Type of Facility or well (WDW) (WIW): a) WDW b) WDW

D.1) Location by 1/4 1/4 SE/4 NE/4 Section 36 Township 24S Range 31E  $\checkmark$ 

D.2) Location by 1/4 1/4 SE/4 SE/4 Section 32 Township 24S Range 32E /