Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

OCD Artesia

TYPE OF ACTION

FORM APPROVED OMB NO. 1004-0137

Expires: January 31, 2018

Lease Serial No.		Lance Carrel Ma
	٦.	NMNM22080

SUNDRING	UTICES AND KEI	OK 13 ON WELLS
Do not use this	form for proposals	to drill or to re-enter an
		APD) for such proposals.

abandoned well	6. If Indian, Allottee or Tribe Name	
SUBMIT IN T	7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well Gas Well Other		8. Well Name and No. TOMB RAIDER 1-12 FED 525H
Name of Operator DEVON ENERGY PRODUCTION	Contact: JENNIFER HARMS ON COM-Mail: jennifer.harms@dvn.com	9. API Well No. 30-015-45439-00-X1
3a. Address 333 WEST SHERIDAN AVENU OKLAHOMA, OK 73102	3b. Phone No. (include area code) Ph: 405-552-6560	10. Field and Pool or Exploratory Area LIVINGSTON RIDGE
4. Location of Well (Footage, Sec., T.,	R., M., or Survey Description)	11. County or Parish, State
Sec 1 T23S R31E 360FNL 233 32.339729 N Lat, 103.730515 N		EDDY COUNTY, NM
12. CHECK THE API	PROPRIATE BOX(ES) TO INDICATE NATURE OF	NOTICE, REPORT, OR OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION		

☐ Notice of Intent	☐ Acidize	□ Deepen	☐ Production (Start/Resume)	■ Water Shut-Off
	☐ Alter Casing	☐ Hydraulic Fracturing	☐ Reclamation	■ Well Integrity
Subsequent Report	□ Casing Repair	■ New Construction	□ Recomplete	□ Other
☐ Final Abandonment Notice	☐ Change Plans	□ Plug and Abandon	□ Temporarily Abandon	
	Convert to Injection	□ Plug Back	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.

Site Name: Tomb Raider 1-12 Fed 525H

- 1. Name(s) of formation(s) producing water on the lease: Livingston Ridge; Bone Spring
- 2. Amount of water produced from all formations in barrels per day: 1625bbls per day
- 4. How water is stored on lease:
- 3-750bbl water tanks located at the Tomb Raider 1 CTB 1

ACCEPTED FOR RECORD 1 6 201**9** BUREAU OF LAND/MANAGEMENT CARLSBAD FIELD OFFICE

NM OIL CONSERVATIO

				ADTESIA DISTRICT
14. I hereby certify t	hat the foregoing is true and correct. Electronic Submission #487789 verifie For DEVON ENERGY PRODUCTIO Committed to AFMSS for processing by DEBO	N ĆON	LP, sent to the Carlsbad	OCT 21 2019
Name (Printed/Ty	ped) JENNIFER HARMS	Title	REGULATORY COMPLIANCE AN	IALYST RECEIVED
				V. Strack A Print
Signature	(Electronic Submission)	Date	10/14/2019	, , , , , , , , , , , , , , , , , , ,
	THIS SPACE FOR FEDERA	L OR	STATE OFFICE USE	
Approved By		Title		Date
certify that the applicar	, if any, are attached. Approval of this notice does not warrant or at holds legal or equitable title to those rights in the subject lease applicant to conduct operations thereon.	Office		
Title 19 II S C Section	1001 and Title 43 H.S.C. Saction 1212, make it a arime for any no	maam leme	wingly and willfully to make to any demand	

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

Additional data for EC transaction #487789 that would not fit on the form

32. Additional remarks, continued

- 5. How water is moved to the disposal facility: piped
- 6. Identify the Disposal Facility by:
- A. Facility Operators Name: a) Mesquite SWD, Inc b) Devon Energy Corp

- B. Facility or well name/number:
 a) Bran SWD 1 API #30-025-43473 SWD-1558
 b) Todd 2 Water Treatment Facility-2RF-114, 2-23s-31e
- C. Type of Facility or well (WDW) (WIW): a) WDW b)
- D.1) Location by:SE/4 SE/4 Section 11 Township 24S Range 31E
- D.2) Location by: Section 2 Township 23S Range 31E