

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTCarlsbad Field Office  
WCD ArtesiaFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018Lease Serial No.  
NMNM22080**SUNDRY NOTICES AND REPORTS ON WELL**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

<b>SUBMIT IN TRIPLICATE - Other instructions on page 2</b>		6. If Indian, Allottee or Tribe Name
1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator DEVON ENERGY PRODUCTION COMPANY Contact: JENNIFER HARMS E-Mail: jennifer.harms@dvn.com	7. If Unit or CA/Agreement, Name and/or No. TOMB RAIDER 1-12 FED 702H
3a. Address 333 WEST SHERIDAN AVENUE OKLAHOMA, OK 73102	3b. Phone No. (include area code) Ph: 405-552-6560	8. Well Name and No. TOMB RAIDER 1-12 FED 702H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T23S R31E 210FNL 2169FWL 32.340141 N Lat, 103.733032 W Lon		9. API Well No. 30-015-45978-00-X1
		10. Field and Pool or Exploratory Area WC-015G-08 S233102C-WOLFCAMP
		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.

8/18/2019-8/23/2019. Spud @ 15:00. TD 17-1/2" hole @ 726'. RIH w/17 jts 13-3/8" 54.50# J-55 BTC csg, set @ 711.5'. Lead w/745 sx C, yld 1.33 cu ft/sk. Circ 271 sx cmt to surf. PT BOPE 250/3500 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 mins, OK.

8/23/2019-9/22/2019. TD 10- 5/8" hole @ 11140. RIH w/243 jts 8-5/8" 32# P110 HSCY set @ 11125.9'. Lead w/665 sx C, yld 3.64 cu ft/sk. Tail w/675 sx C, yld 1.14 cu ft/sk. Disp w/ 674 bbls. PT csg to 2500 psi for 30 mins, OK.

9/22/2019-10/10/2019. TD 7- 7/8" hole @ 22064'. RIH w/ 466 jts 5-1/2" 20# P110EC csg, set @ 22049.5'. 1st lead w/ 1755 sx H, yld 1.39 cu ft/sk. Circ 632 sx cmt to surf. Tail w/1530 sx H, yld 1.39 cu ft/sk. Disp w/ 488. RR @ 19:00.

GC 11/3/19  
Accepted for record NMOCD

RECEIVED

NOV 04 2019

DISTRICT 7 - ARTESIA O.G.D.

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

Electronic Submission #488250 verified by the BLM Well Information System  
For DEVON ENERGY PRODUCTION COM LP, sent to the Carlsbad  
Committed to AFMS for processing by PRISCILLA PEREZ on 10/16/2019 (20PP0134SE)

Name (Printed/Typed) JENNIFER HARMS	Title REGULATORY COMPLIANCE ANALYST
Signature (Electronic Submission)	Date 10/15/2019

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title Accepted for Record	OCT 16 2019 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 Jonathon Shepard Carlsbad Field 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)

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