

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SUNDRY NOTICES AND REPORTS ON WELLS

OCD-ART

FORM APPROVED
OMB NO. 1004-0135
EXPIRES: NOVEMBER 30, 2000

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals

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SUBMIT IN TRIPLICATE

1a. Type of Well	<input type="checkbox"/> Oil Well	<input checked="" type="checkbox"/> Gas Well	<input type="checkbox"/> Other	OCT 11 2007
2. Name of Operator	DEVON ENERGY PRODUCTION COMPANY, LP			
3. Address and Telephone No.	20 North Broadway, Oklahoma City, OK 73102		405-228-8699	
4. Location of Well (Report location clearly and in accordance with Federal requirements)*	660 FSL & 990 FWL M-SEC 12 T24S R28E			

5. Lease Serial No.	NM72455
6. If Indian, Allottee or Tribe Name	
7. Unit or CA Agreement Name and No.	
8. Well Name and No.	Burkham Fed Com 1
9. API Well No.	30-015-24945
10. Field and Pool, or Exploratory	Malaga; Atoka
12. County or Parish	Eddy
13. State	NM

CHECK APPROPRIATE BOX(s) 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"/> Fracture Treat	<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 ADD PAY in Atoka
	<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 Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work and approximate duration thereof. If the proposal deepens directionally or recompletes horizontally, give subsurface location 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirement, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

8/31/07 - MIRU. NU BOP. Test to 2000#, ok.
9/1/07 - DO CIBP to 12445'. CHC.
9/5/07 - NU Frac valve & BOP. Test.
9/6/07 - TIH w/ perf gun and perf L. Atoka 11958-64'; 12001-05' & 12095-106' @ 2spf: 42 holes total. Set pkr @ 11927'. RD WL. ND BOP & Frac Valve. NU Tree.
9/7/07 - RU BJ Services & acidize L. Atoka 11958-12106' w/ 2100g 15% HCL w/ 65 BS.
9/8/07 - RU & RIH w/ swab.
9/11/07 - Swabbing.
9/12/07 - Made 3 swab runs & set CIBP @ 11610'. Dump 35' cmt. New PBTD @ 11575'. RD WL.
9/13/07 - TIH w/ 370 jts 2 3/8" 47# N-80 tbg. EOT @ 11486'. ND BOP. RD.

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

Signed Judy A. Barnett Name Judy A. Barnett Title Regulatory Analyst Date 10/3/2007

(This space for Federal or State Office use)

Approved by DAVID R. GLASS Title DAVID R. GLASS Date 10/16/07
Conditions of approval, if any: Accepted for record - NMOCD
OCT 9 2007

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations to any matter within its jurisdiction

DAVID R. GLASS
PETROLEUM ENGINEER

*See Instruction on Reverse Side