

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

OCD-ARTESIA

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

S

SUBMIT IN TRIPLICATE

1a. Type of Well ☒ Oil Well ☐ Gas Well ☐ Other _____
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 & 660' FEL
Sec 15 T23S R31E

5. Lease Serial No.
NMNM-040544
6. If Indian, Allottee or Tribe Name
7. Unit or CA Agreement Name and No
8. Well Name and No.
Todd 15P Federal 16
9. API Well No.
30-015-34304
10. Field and Pool, or Exploratory
Ingle Well; Delaware
12. County or Parish 13. State
Eddy 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 Raise TOC
	<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)

Devon Energy Production L.P. requests approval to raise TOC above intermediate casing shoe.

1. MIRU PU.
2. ND WH. NU BOP.
3. POOH w/ tbg.
4. MIRU WLSU.
5. Run gauge ring & junk basket 4830'. POOH.
6. RIH w/4" csg gun. Shot 4076' @ 2 spf: 2 holes. RD WL.
7. RIH w/ 2 7/8" tbg and cement retainer 4102'.
8. Perform pump in test down 5 1/2" @ 1 - 3 bpm and record max pressure.
9. MIRU BJ Services pump 120 sx 60:40 POZ C cmt.
10. POOH w/ tbg. ND BOP. RU BJ & pump 100 sx C neat cmt. WOC.
11. RIH w/ bit and drill collars on tbg. RU power swivel & reverse unit. DO cmt retainer to 4143'. CHC. Test to 500#, ok. POOH.
12. Run CBL. TOC @ 3410'. Rec'd verbal approval from BLM. POOH w/ tbg & LD collars & bit. HWO & RTP.
13. RDMO PU.

Provide Dates

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

Signed Judy A. Barnett

Name Judy A. Barnett
Title Regulatory Analyst

ACCEPTED FOR RECORD

Date 4/28/2008

(This space for Federal or State Office use)

Approved by _____ Title _____

Date MAY 19 2008

Conditions of approval, if any:

J. Amos

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

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

*See Instruction on Reverse Side

Accepted for record - NMOCD