

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

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

OCD-ARTESIA

JAN 27 2009

FORM APPROVED
OMB NO. 1004-0135

EXPIRES: NOVEMBER 30, 2000

SUBMIT IN TRIPLICATE		5. Lease Serial No. NMNM-77046
		6. If Indian, Allottee or Tribe Name
		7. Unit or CA Agreement Name and No.
		8. Well Name and No. North Pure Gold 8 Federal 10
		9. API Well No. 30-015-34594
		10. Field and Pool, or Exploratory Los Medanos; Upper Penn Shale
		12. County or Parish 13. State Eddy NM

1a. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other _____
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP
3. Address and Telephone No. 20 North Broadway, , Oklahoma City, OK 73102 405-235-3611
4. Location of Well (Report location clearly and in accordance with Federal requirements)* 1330 FNL 1310 FEL H SEC 8 T23S R31E

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 checked="" type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Recomplete
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Upper Penn Shale
	<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)

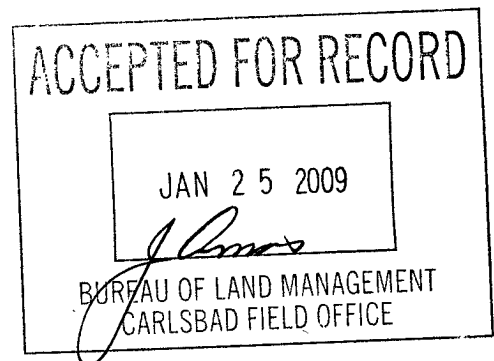
12/16/08 - 1/08/09

MIRU Key Well Service. ND WH. NU BOP. Pump 10 bbls KCL wtr dn hole. Set CIBP @ 13,000'. Test to 4500#, ok. Dump bailer & spot 35' cmt on top of CIBP. PBTD 12,965'. ND BOP. RU BJ & test to 8000#, ok. 12,670-12,930' @ 1 spf: total 266 shots. RU BJ & frac dn 7" csg & 4 1/2" liner w/ 2K g 15% HCL, 544,194 g slick wtr, 132,934# prime plus 40/70 sd and 19,451# Ultraprop 18/40 sd. RD frac crew. Well on 18/64" choke & producing. SWI. RU JW WL and set pkr @ 12,100' KB. CHC w/ 1% KCL wtr. RD PU & left well flowing to tank w/ supervision. Turned to gas sales line. Freezing problems on choke. SI to swap out stac pac & plumbing to higher pressure rating. RWTP.

ACCEPTED FOR RECORD

JAN 27 2009

**Gerry Guye, Deputy Field Inspector
NMOCD-District II ARTESIA**



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

Signed *Judy A. Barnett* Name **Judy A. Barnett x8699**
Title **Regulatory Analyst** Date **1/19/2009**

(This space for Federal or State Office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: