Form 3160-5 (February 2005)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APROVED OMB NO. 1004-0135 EXPIRES: March 31, 2007

SUNDRY NOTICES AND REPORTS ON WELLS	5. Lease Serial No.
Do not use this form for proposals to drill or to re-enter an	NMNM-99147
abandoned well. Use Form 3160-3 (APD) for such proposals	6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE	7. Unit or CA Agreement Name and No.
1a. Type of Well Oil Well Gas Well Other	The state of the s
Jan 19 El on Hell El out Hell El out of El out	8 Well Name and No.
2. Name of Operator	Slider 8 Federal 4H
DEVON ENERGY PRODUCTION COMPANY, LP 3. Address and Telephone No.	9. API Well No. 30-015-38243
20 N. Broadway, Oklahoma City, Ok 73102-8260 405-235-3611	10. Field and Pool, or Exploratory
Location of Well (Report location clearly and in accordance with Federal requirements)* 225 FSL 1868 FEL O SEC 8 T25S R29E	Willowlake; Bone Spring, Southeast 11. County or Parish State
BHL: 420' FSL & 330' FWL	Eddy, NM
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOR	<u> </u>
TYPE OS SUBMISSION TYPE OF ACTION	
✓ Notice of Intent ☐ Acidize ☐ Deepen ☐ Production ☐ Alter Casing ☐ Fracture Treat ☐ Recompte ☐ Subsequent Report ☐ Casing Repair ☐ New Construction ☐ Recompte	
Final Abandonment Notice	rily Abandon
Convert to Injection Plug Back Water Dis 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
deepen directionally or recomplete 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.	
Devon Energy Production Company, L. P. will complete the following action:	
Production casing will be centralized every other joint of casing from 100' above KOP to 500' inside of Intermediate casing utilized a positive type centralizer.	
Thank you for your understanding with this matter.	:
	DECEIVED
	RECEIVED
	FEB 07 2011
	NMOCD ARTESIA
14. I hereby certify that the foregoing is true and correct	
Signed Succession Name Title Name Regulatory Specialist	Date 1/31/2011
(This space for Federal or State Office use)	
Approved by Title Conditions of approval, if any:	Date
This to 0.6.0. Section 1001, makes it a differ for any person knowingly and willtung to make any department or agency or the office states any takes within its jurisdiction.	, nethious or fraducient statements or representations to any matter
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*See Instruction on Reverse Side

APPROVED

FEB 4 2011 /s/ Chris Walls

BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE

