

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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.*

5. Lease Serial No.  
NMNM90534

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

8. Well Name and No.  
BETELGEUSE 19 FED 5H

9. API Well No.  
30-015-41899

10. Field and Pool, or Exploratory  
HACKBERRY N; BONE SPRING

11. County or Parish, and State  
EDDY COUNTY COUNTY, NM

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
DEVON ENERGY PRODUCTION COMPANY  
Contact: MEGAN MORAVEC  
Email: megan.moravec@dvn.com

3a. Address  
333 WEST SHERIDAN AVENUE  
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)  
Ph: 405-552-3622

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 19 T19S R31E NENE 430FNL 190FEL

**12. CHECK 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"/> 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 |
|   | <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 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 recomplete 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 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 requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

4/29/14-6/3/14: MIRU WL & PT. TIH & ran CBL, found ETOC @ 300'. TIH w/pump through frac plug and guns. Perf Bone Spring, 8037'-12537', total 360 holes. Frac'd 8037'-12537' in 10 stages. Frac totals 32,172 gals acid, 224,850# 100 mesh, 874,664# 40/70 white, 418,141# 20/40 SLC. ND frac, MIRU PU, NU BOP, DO plugs. CHC, FWB, ND BOP. RIH w/230 jts 2-7/8" L-80 tbg, set @ 7447'. TOP.

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

DEC 23 2014

Accepted for record  
BUD NIMOCB1/16/2015

RECEIVED

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

Electronic Submission #285281 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION COMPAN, sent to the Carlsbad Office Committed to AFMSS for processing by DEBORAH HAM on 12/17/2014

Name (Printed/Typed) MEGAN MORAVEC Title REGULATORY ANALYST

Signature (Electronic Submission) Date 12/16/2014

**ACCEPTED FOR RECORD**

DEC 17 2014

*Deborah Ham*

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By \_\_\_\_\_ Title \_\_\_\_\_

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 \_\_\_\_\_

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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***