

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.
NMNM0503

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM70928X

8. Well Name and No.
COTTON DRAW UNIT 173H

9. API Well No.
30-015-42515

10. Field and Pool, or Exploratory
COTTON DRAW; DELAWARE

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

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 1 T25S R31E SESE 195FSL 1295FEL

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 Drilling Operations
	<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.)

(10/25/14-10/28/14) Spud @ 19:00. TD 17-1/2? hole @ 806?. RIH w/ 19 jts 13-3/8? 48# H-40 csg, set @ 806?. Lead w/ 860 sx CIC, yld 1.33 cu ft/sk. Disp w/ 120 bbls FW. Circ 390 sx cmt to surf. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1211 psi for 30 min, OK.

(10/30/14-11/2/14) TD 12-1/4? hole @ 4408?. RIH w/ 102 jts 9-5/8? 40# J-55 LTC csg, set @ 4408?. Lead w/ 1170 sx CIC, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 330.9 bbls FW. Circ 405 sx cmt to surf. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 min, OK.

(11/11/14-11/16/14) TD 8-3/4? hole @ 12811?. RIH w/ 283 jts 5-1/2? 17# HCP-110 BT csg, set @ 12775?. 1st stage cmt lead w/ 1435 sx CIH, yld 1.22 cu ft/sk. Tail w/ 405 sx CIH, yld 2.30 cu ft/sk. Disp w/ 295 bbls FW. Open DVT, set @ 5953.9?. Circ 244 sx cmt off top of DVT. 2nd stage cmt

Accepted for record
8/12/15
NMOCB

NM OIL CONSERVATION
ARTESIA DISTRICT

AUG 11 2015

RECEIVED

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

Electronic Submission #281080 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION COMPAN, sent to the Hobbs
Committed to AFMSS for processing by DEBORAH HAM on 06/13/2015

Name (Printed/Typed) MEGAN MORAVEC	Title REGULATORY ANALYST	ACCEPTED FOR RECORD AUG 4 2015
Signature (Electronic Submission)	Date 11/20/2014	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved By _____	Title _____	BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE
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.		
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.		Office _____

Additional data for EC transaction #281080 that would not fit on the form

32. Additional remarks, continued

lead w/ 125 sx CIC, yld 1.33 cu ft/sk. Tail w/ 430 sx CIC, yld 2.69 cu ft/sk. Disp w/ 138 bbls FW.
RR @ 06:00.