Form 3160-5 (August 1999)

OCD-ARTESIA

FORM APROVED OMB NO. 1004-0135 EXPIRES: NOVEMBER 30, 2000

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SUNDRY NOTICES AND REPORTS ON WELLS 5. Lease Serial No.

Do not use this form for proposals to drill or to re-enter an				NMNM64583 6. If Indian, Allottee or Tribe Name	
	se Form 3160-3 (APD) for suc UBMIT IN TRIPLICATE	HECEIVED	o. II ilidiali, Allotte	e or Tribe Name	
3	OBMIT IN TRIPLICATE	FORIACI	7. Unit or CA Agre	eement Name and No.	
1a. Type of Well 🗸 Oil Well 🔲 G	as Well Other	JAN 0 4 2006			
Ta: Type of trois G Oil Well G	as well	GOD-ART	8 Well Name and	No.	
2. Name of Operator			Tell	Telltale 11 Fed Com 1	
DEVON ENERGY PRODUCTION COMPANY, LP				9. API Well No.	
3. Address and Telephone No.				30-015-33954	
20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-552-7802				10. Field and Pool, or Exploratory	
 Location of Well (Report location clearly and in accordance with Federal requirements)* 1940' FSL & 1110' FWL 				Carlsbad; Morrow, East	
			12. County or Par	12. County or Parish 13. State	
Lot L Sec 11 T22S, R27E			Eddy	NM	
CHECK	APPROPRIATE BOX(s) TO I	NDICATE NATURE OF NOTICE, RI	PORT, OR OTHER DAT	Α	
TYPE OS SUBMISSION		TYPE OF A	CTION		
☐ Notice of Intent	Acidize	Deepen Pro	oduction (Start/Resume)	Water Shut-Off	
	Alter Casing	=	clamation	Well Integrity	
✓ Subsequent Report	Casing Repair	= =	complete	✓ Other Add Pay	
Final Abandonment Notice	Convert to Injection		mporarily Abandon ater Disposal		
12/06/05 MIRU. POOH w/tbg. 12/07/05 TIH w/bit & CO to PBTD @ 11, 12/08/05 RIH & perf 11,395' - 11398', 1 12/10/05 Swab.	•		s. Set pkr @ 11,280'. Ld	tbg w/2% KCL tbg, rupture disk.	
12/12/05 Acidize perfs 11,323' - 11,398' w/5000 gals 15% HCL acid. Swab. 12/13/05 Turned well over to production.			ACCEPTER	ACCEPTED FOR DECORD	
			ACCEPTEL	ACCEPTED FOR RECORD	
			ALEXIS	2 7 2005 QAA) C. SWOBODA UM ENGINEER	
14. Thereby certify hat the toregoing is	true and correct				
Signed //	Title	Senior Engineering Technic	an Date	12/20/2005	
(This space for Federal or State Office L	ise)				
Approved by	Title		Date		
Conditions of approval, if any:	- Inde				