

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia
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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.
NMNM89051

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.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
DEVON ENERGY PRODUCTION CO
Contact: LUCRETIA A MORRIS
Email: Lucretia.Morris@dvn.com

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

3b. Phone No. (include area code)
Ph: 405-552-3303

8. Well Name and No.
APACHE 24-23 FED COM 13H

9. API Well No.
30-015-42552

10. Field and Pool, or Exploratory
LOS MEDANOS; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 24 T22S R30E SESE 970FSL 330FEL

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

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.)

(2/5/15-2/8/15) Spud @ 16:30. TD 17-1/2? hole @ 583?. RIH w/ 13 jts 13-3/8? 48# H-40 ST&C csg, set @ 583?. Lead w/ 720 sx CIC cmt, yld 1.34 cu ft/sk. Displ w/ 84 bbbs 8.34 ppg FW. Circ 251 sx cmt to surf. PT BOPE @ 250/5000 psi and PT I-BOP & lower Kelly valve @ 250/4000 psi, held each test for 10 min, OK. PT csg to 1211 psi, OK.

(2/11/15-2/14/15) TD 12-1/4? hole @ 3871?. RIH w/ 91 jts 9-5/8? 40# J-55 BT csg, set @ 3861.1?. Lead w/ 1500 sx Econocem cmt, yld 1.87 cu ft/sk. Tail w/ 430 sx Halcem, yld 1.33 cu ft/sk. Disp w/ 290 bbbs FW. Circ 555 sx cmt to surf. PT csg to 2765 psi for 30 min, OK.

(3/4/15-3/9/15) TD 8-3/4? hole @ 16994?. RIH w/ 388 jts 5-1/2? 17# P-110 GBDC csg, set @ 16859.1?. Open DVT, set bottom @ 4314.4?. 1st stage cmt lead w/ 945 sx Versacem cmt, yld 2.30 cu ft/sk. Tail w/ 1830 sx Versacem, yld 1.22 cu ft/sk. Displ w/ 300 bbbs water. Circ 90 bbbs cmt to surf. 2nd

UPD 10/20/15
ACCEPTED FOR RECORD
NM OIL CONSERVATION
ARTESIA DISTRICT
OCT 19 2015
RECEIVED

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

Electronic Submission #295972 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad
Committed to AFMSS for processing by MARISSA KLEIN on 06/10/2015

Name (Printed/Typed) LUCRETIA A MORRIS Title REGULATORY COMPLIANCE ANALYST

Signature (Electronic Submission) Date 03/24/2015

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.

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 ****

Additional data for EC transaction #295972 that would not fit on the form

32. Additional remarks, continued

stage cmt lead w/ 420 sx Tuned Light, yld 3.49 cu ft/sk. Tail w/ 100 sx Halcem, yld 1.33 cu ft/sk.
Disp w/ 103 bbls water. Circ 8 sx cmt to surf. RR @ 22:00.