Form 3160-5 (June 2015)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

**NMOCD** 

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

## SUNDRY NOTICES AND REPORTS ON WELLS not use this form for proposals to drill act.

5. Lease Serial No. NMNM0418220A

Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on page 2				7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well				8. Well Name and No. TODD 27 P FED 16	
Oil Well Gas Well Other: INJECTION  2. Name of Operator Contact: SHEILA A FISHER				9. API Well No.	
DEVON ENERGY PRODUCTION CO EPMail: Sheila.Fisher@dvn.com				30-015-27106	
3a. Address PO BOX 250 ARTESIA, NM 88211  3b. Phone Ph: 575		o. Phone No. (include area code) h: 575-748-1829		10. Field and Pool or Exploratory Area INGLE WELLS DELAWARE	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State	
Sec 27 T23S R31E SESE 330FSL 330FEL 32.269050 N Lat, 103.758186 W Lon				EDDY COUNTY, NM	
12. CHECK THE AI	PPROPRIATE BOX(ES) TO	INDICATE NATURE O	F NOTICE,	REPORT, OR OTI	IER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
□ Notice of Intent	☐ Acidize	□ Deepen	☐ Producti	on (Start/Resume)	■ Water Shut-Off
	☐ Alter Casing	☐ Hydraulic Fracturing	☐ Reclamation		■ Well Integrity
Subsequent Report	☐ Casing Repair	■ New Construction	☐ Recomp	lete	<b>⊠</b> Other
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	□ Temporarily Abandon		
	☐ Convert to Injection	□ Plug Back	□ Water Disposal		
Test for Todd 27 P Fed 16; Af Richard Inge, Compliance Off	य 30-015-27106 was comple icer, NMOCD District II.	NM OIL CONSER' NOV 07 2	VATION BICT		NMOCD REPAIR
14. I hereby certify that the foregoing is	true and correct	-CEN	<del>red /-</del>	<del></del>	<del>                                     </del>
Name (Printed/Typed) SHEILA A	For DEVON ENERGY F Committed to AFMSS for pro	PRODUCTION COLD contt	o the Carisb	he he	R RECORD
Signature (Electronic S	Submission)	Date 09/27/20		1	
		FEDERAL OR STATE (			2017
	THIS OF AGE FOR	TEDERAL OR OTATE	—————		
_Approved By		Title		RUREAU OF LAIND N CARLSBAD FIEL	D.OEMICE CO.
Conditions of approval, if any, are attache certify that the applicant holds legal or equ which would entitle the applicant to condu					
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a crimstatements or representations as to a	ne for any person knowingly and ny matter within its jurisdiction.	willfully to ma	ke to any department or	agency of the United
(Instructions on page 2)					7/