

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.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. BETELGEUSE 19 FED 5H
2. Name of Operator DEVON ENERGY PRODUCTION CO Contact: DENISE MENOUD Email: Denise.Menoud@dvn.com		9. API Well No. 30-015-42316 41899
3a. Address PO BOX 250 ARTESIA, NM 88211	3b. Phone No. (include area code) Ph: 575-746-5544	10. Field and Pool, or Exploratory HACKBERRY NORTH; BS NW
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 19 T19S R31E NENE 430FNL 190FEL 32.682266 N Lat, 103.906040 W Lon		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 checked="" 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 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 recomplate 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.)

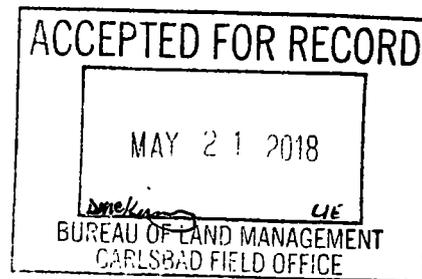
THIS 2-WELL PAD LOCATION HAS BEEN DOWNSIZED. ACRES RECLAIMED = 0.8491.

FIRST WELL: ~~Betelgeuse~~ 19 FED 5H
API: 30-015-42316
430 FNL & 190 FEL, UNIT A, 19, 19S, 31E

SECOND WELL: RIGEL 20 FED COM 5H
API: 30-015-41514

30-015-41899

GC 6-4-18
Accepted for record - NMOC



4.25-18 - Artesia - improved - well monitor

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

**Electronic Submission #325829 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO LP, sent to the Carlsbad**

Name (Printed/Typed) DENISE MENOUD	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 12/08/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date _____
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 ****

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

SURFACE INSPECTION FORM

Well Name: BETELGEUSE 19 FEDERAL		Well #: 5H		API #: 300154189900S1		Well Status: POW	
Footage: 430FNL 190FEL	Alliquot: NENE	Lot/Tract:	Section: 19	Twnship/Lat: 19S (32.65315)	Rng/Long: 31E (103.90002)	County: EDDY	State: NM
Case: NMNM90534		Facility ID:		Associated Rights of Way:			
Lease: NMNM90534	H2S Date:		H2S Gas Stream:	H2S Vapors:	H2S Radius:		
Hazard: No							
SME: BUREAU OF LAND MANAGEMENT			Operator Name: DEVON ENERGY PRODUCTION COM LP				

Please be sure to complete for inspection

Inspector: Armas Ar-Tan		Company/SME Rep:			Phone #:		
Date: 4/25/18	Type: ES	Activity: FR	Office: 1.0	Travel: 0-9	Insp: 0.8		

General Remarks:

TRIP

I conducted a Interim Reclamation inspection on this location. The reclamation has been done on North and Southside of the pad which is a active pad, the area has been ripped and seeded, contoured and barricaded to prevent trespass vehicle there is some annuals and perennials vegetation coming in. The area is free of old equipment and no spills. Place into monitor status and check as needed.....

Author: **ARTHUR ARIAS**

Date: **04/25/2018**

Follow-up Requirements: (circle any that apply) NONE VERBAL LETTER INC NOTIFY PET

Follow-up Remarks:

CORRECT PROBLEM BY:	NEXT INSPECTION:
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