

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
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

SUBMIT IN TRIPLICATE

OCD-ARTESIA

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

1a. Type of Well ☐ Oil Well ☒ Gas Well ☐ Other _____

2. Name of Operator
DEVON ENERGY PRODUCTION COMPANY, LP

3. Address and Telephone No.
20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-552-7802

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
SESE Lot P 1010' FSL & 660' FEL
Sec 7 T21S R27E

5. Lease Serial No.
NM-0376257-A

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.
Avalon Hills 7 Fed Com 3

8. Well Name and No.

9. API Well No.
30-015-34468

10. Field and Pool, or Exploratory
Burton Flat; Morrow

12. County or Parish 13. State
Eddy NM

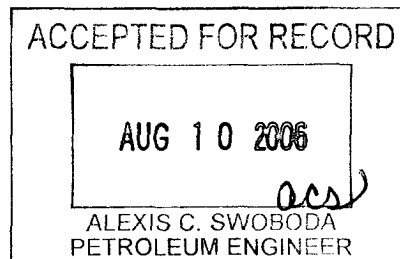
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete
	<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
			<input checked="" type="checkbox"/> Other Drilling Operations

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work and approximate duration thereof. If the proposal deepens directionally or recompletes horizontally, give subsurface location 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 requirement, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection)

05/16/06 MIRU. BLM notified of intent to spud @ 1400 hrs.
05/17/06 TD 17 1/2" hole @ 629'. Ran in 9 jts 14 jts 13 3/8" 48#, H-40 ST&C csg set @ 629'. Notified Paul Swartz (BLM) of intent to cmt surf. Cmt Stage 1 lead w/250 sx CI H, 2nd lead w/450 sx CI C, tail w/250 sx CI C. Circ 310 sx to res pit. WOC 18 hrs.
05/27/06 Tst pipe & annular to 1200 psi - ok.
05/29/06 BLM (Gene Hunt) notified of intent to run csg.
05/30/06 TD 12 1/4" hole @ 2608'. Ran in w/58 jts 9 5/8" 36# J-55 ST&C csg @ 2608'. Cmt 1st lead w/250 CI C, 2nd lead w/600 sx CI C, tail w/300 sx CI C. Circ 228 sx to res pit. WOC 18 hrs.
06/03/06 Tst annular to 250 & 500 psi - ok. Tst csg to 11.0 EMW for 30 min - ok. Tst witnessed by BLM (Clark).
06/20/06 TD 8 3/4" hole @ 10,427'.
06/28/06 Rig rlsd.

Please reference NOI to change plans for problems in the hole. P&A to be filed.



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

Signed [Signature] Name Stephanie A. Ysasaga
Title Sr. Staff Engineering Technician Date 8/7/2006

(This space for Federal or State Office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____

Accepted for record - NMOCD

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations to any matter within its jurisdiction.

*See Instruction on Reverse Side

Accepted for record - NMOCD