

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
**SUNDRY NOTICES AND REPORTS ON WELLS**

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

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

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, Oklahoma City, OK 73102 405-228-8699**

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*  
**1980' FNL 2310' FEL SEC17 T23S R31E**  
**BHL: 2206' FNL & 2262' FEL**

5. Lease Serial No.

**NM 45235**

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Well Name and No.

**Pure Gold C 17 Federal 2**

9. API Well No.

**30-015-26021**

10. Field and Pool, or Exploratory

**Sand Dunes West;**

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 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 checked="" 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 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.)

8/30/07 - 10/04/07 -

MIRU. ND tree. NU BOP. Rise pkr. Pump 130 bbls KCL wtr. Set CIBP @ 13,230' & dump 35' cmt on top. Test csg. New PBTD @ 13,195'. RU WL. Tag up @ 13,295'. TIH w/ 4 1/2" CIBP @ 13,230' shut off gas & wtr from Atoka perms: 13,255-66'. RD WL. CO csg valves & retest csg to 3000#, ok. RU WL & LH w/ 3 bbls KCL wtr, test csg to 3000#, ok. Perf Wolfcamp: 12,449-52' & 12,466-72' @ 2 spf: total 18 holes. RD WL. RU BJ Services & acidize perms 12,449-52' & 12,466-72' w/ 1800 gals 15% HCL & 36 BS. Flush w/ KCL wtr. RD BJ. RU & RIH w/ swab. RD swab. RIH w/ frac composite & perf guns to 12,430' & set plug. Perf Wolfcamp: 12,329-35' @ 2 spf: total 12 shots. RU BJ & acidize w/ 1200 gals 15% HCL acid & 16 BS. RD BJ. RU Schlumberger & perf Wolfcamp: 12,117-29' @ 2 spf: total 24 shots. RU BJ & acidize w/ 2400 gals 15% HCL acid. Test csg to 1000#. Perf Wolfcamp: 11,825-30' @ 2 spf: total 10 shots. Acidize w/ 1000 gals 15% HCL acid. RU & RIH w/ swab. POOH w/ tbg & pkr. CHC. RD PU. POP.

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

Signed Judy A. Barnett

Name Judy A. Barnett  
Title Regulatory Analyst

Date 1/9/2008

(This space for Federal or State Office use)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
Conditions of approval, if any: \_\_\_\_\_