

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

JUN 23 2009

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, Ste 1500, Oklahoma City, OK 73102 405-552-8198

4 Location of Well (Report location clearly and in accordance with Federal requirements)*
**1800 FSL 430 FWL
Sec 35 T17S R27E**

5. Lease Serial No. NMLC064050A	
6. If Indian, Allottee or Tribe Name	
7. Unit or CA Agreement Name and No.	
8 Well Name and No. Eagle 35 L Federal 4	
9. API Well No. 30-015-32836	
10. Field and Pool, or Exploratory Red Lake; Queen-Grayburg SA	
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 type="checkbox"/> Water Shut-Off
			<input type="checkbox"/> Well Integrity
			<input checked="" type="checkbox"/> Other DHC
			COMPLETION REPORT

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)

DHC Glorieta-Yeso and Queen-Grayburg San Andres:

9/28/05 MIRU PU. POOH w/ rods and pump. ND WH and NU BOP. POOH w/ TBG. RIH w/ bailer on tbg to 2500' and tagged sand. Cleaned out to 2570' and bailer quit. POOH w/ bailer and SDON.

9/26/05 RIH with bailer to 2570' and tagged sand. Cleaned out to 2849'. SDON.

9/30/05 RIH w/ dummy head and bailer on tbg to 2849' and cleaned out around RBP. POOH w/ dummy head and bailer. RIH w/ retrieving head and latched onto RBP and released. POOH w/ RBP. RIH w/ tbg. ND BOP and NU WH. SDON.

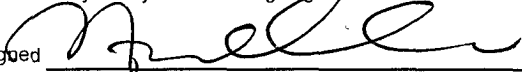
10/3/05 RIH w/ pump and rods. Hang well on production. RDMO PU.

ACCEPTED FOR RECORD

JUN 21 2009

BUREAU OF LAND MANAGEMENT
CARLISLE FIELD OFFICE

14 I hereby certify that the foregoing is true and correct

Signed 

Name **Norvella Adams**
Title **Sr. Staff Engineering Technician**

Date **6/12/2009**

(This space for Federal or State Office use)

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

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



Handwritten initials