

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

OCD Artesia

FORM APPROVED
OMB NO. 1004-0135
EXPIRES: March 31, 2007

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	<input checked="" type="checkbox"/> Oil Well	<input type="checkbox"/> Gas Well	<input type="checkbox"/> Other
2. Name of Operator	DEVON ENERGY PRODUCTION COMPANY, LP		
3. Address and Telephone No.	20 N. Broadway, Oklahoma City, Ok 73102-8260 405-235-3611		
4. Location of Well (Report location clearly and in accordance with Federal requirements)*	330' FNL 1980' FWL C SEC 26 T23S R31E		
	BHL: 2310' FNL & 1980' FWL PP:550' FNL & 1980' FWL		

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NMOCD ARTESIA

5. Lease Serial No.	NM0418220A-SHL NM0405444A-BHL
6. If Indian, Allottee or Tribe Name	
7. Unit or CA Agreement Name and No.	
8. Well Name and No.	Todd 26C Fed Com 12H
9. API Well No.	30-015-36827
10. Field and Pool, or Exploratory	Ingle Wells; Delaware
11. County or Parish State	Eddy NM

12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input checked="" 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 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

Deveon Energy Production L.P. respectfully requests to change the casing design as follows:

Casing Program:

Hole Size	Hole Interval	OD Csg	Casing Interval	Weight	Collar	Grade
12-1/4"	750' - 3,000'	9-5/8"	0' - 3,000'	36#	LTC	J-55
12-1/4"	3,000 - 4,300'	9-5/8"	3,000 - 4,300	40#	LTC	J-55

Casing Size	Collapse Design Factor	Burst Design Factor	Tension Design Factor
9-5/8" 36# J-55 LTC	1.29	2.26	2.83
9-5/8" 40# J-55 LTC	1.15	1.77	10.00

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

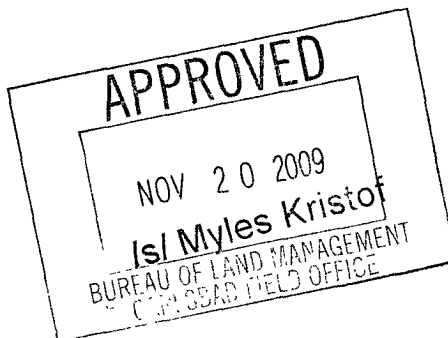
Signed Judy A. Barnett Name Judy A. Barnett X8699
Title Regulatory Analyst Date 11/12/2009

(This space for Federal or State Office use)

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

This form is a 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



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