

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 for or re-enter an abandoned well. Use form 3160-3 (APP) for such proposals.

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		5. Lease Serial No. NMNM94186
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY Contact: MEGAN MORAVEC megan.moravec@dvn.com		6. If Indian, Allottee or Tribe Name
3a. Address 333 WEST SHERIDAN AVENUE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-552-3622	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 28 T23S R33E NWNW 200FNL 430FWL		8. Well Name and No. THISTLE UNIT 51H
		9. API Well No. 30-025-41896
		10. Field and Pool, or Exploratory TRIPLE X; BONE SPRING
		11. County or Parish, and State LEA COUNTY 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 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 checked="" type="checkbox"/> Other Drilling Operations
	<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 recompleate 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.)

(9/13/14-9/17/14) Spud @ 21:30. TD 17-1/2? hole @ 1437?. RIH w/ 32 jts 13-3/8? 48# H-40 STC csg, set @ 1437?. Set DVT @ 313.7?. Lead w/ 660 sx CIC, yld 1.72 cu ft/sk. Tail w/ 345 sx CIC, yld 1.34 cu ft/sk. Disp w/ 219 bbls FW. Circ 258 sx cmt to surf. PT all BOPE @ 250/3000 psi, OK. PT mud lines @ 250/3500 psi, OK. PT csg to 1211 psi, OK.

(9/23/14-9/27/14) TD 12-1/4? hole @ 5157?. RIH w/ 127 jts 9-5/8? 40# HCK-55 BTC csg, set @ 5157?. 1st lead w/ 450 sx Econocem HLC, yld 1.87 cu ft/sk. 2nd lead w/ 1550 sx Econocem HLC, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 387.7 bbls FW from frac tanks. Pump 210 sx CIC, yld 1.34 cu ft/sk. Circ 7 bbls cmt to surf. PT annular, inside kill and HCR @ 250/3500 psi, OK. PT all remaining valves, upper and lower pipe rams, blind rams @ 250/5000 psi, OK. PT surface lines back to pumps @ 250/3500 psi, OK. Held all tests for 10 min. PT csg to 1500 psi, OK.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #272403 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION COMPANY, sent to the Hobbs Committed to AFMSS for processing by LINDA JIMENEZ on 03/12/2015		ACCEPTED FOR RECORD MAR 13 2015	
Name (Printed/Typed) MEGAN MORAVEC	Title REGULATORY ANALYST		
Signature (Electronic Submission)	Date 10/21/2014		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved By _____		Title _____	
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.		BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE	
		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 ****

MAR 19 2015

Additional data for EC transaction #272403 that would not fit on the form

32. Additional remarks, continued

(10/7/14-10/12/14) TD 8-3/4? hole @ 15636?. RIH w/ 114 jts 5-1/2? 17# HCP-110 BTC csg, followed by 247 jts 7? 29# HCP-110 BTC csg, set @ 15628?. Lead w/ 650 sx Tuned Light cmt, yld 3.21 cu ft/sk. Tail w/ 1100 sx Versacem cmt, yld 1.20 cu ft/sk. Disp w/ 509 bbls FW. No cmt to surf. RR @ 06:00.