

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

NMOC D Copy

5. Lease Serial No.
NMNM113964

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No. **4**
COTTON DRAW 33 FED 1H ✓

9. API Well No.
30-025-41263 -

10. Field and Pool, or Exploratory
PADUCA; DELAWARE NORTH

11. County or Parish, and State
LEA COUNTY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
DEVON ENERGY PRODUCTION COMPANY
Contact: LUCRETIA A MORRIS
Loretta.Morris@dvn.com

3a. Address
333 W. SHERIDAN AVENUE
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)
Ph: 405-552-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 33 T24S R32E NWNW 330FNL 1295FWL ✓

HOBBS OCD
MAY 19 2015
RECEIVED

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 recompleation 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.)

(12/13/14-12/16/14) Spud @ 23:30. TD 17-1/2? hole @ 936?. RIH w/ 23 jts 13 3/8? 48# H-40 csg, set @ 936?. Lead w/ 1150 sx CIC, yld 1.33 cu ft/sk. Disp w/ 140 bbls FW. Circ 378 sx cmt to surf. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1211 psi for 30 min, OK.

(12/21/14-12/25/14) TD 12-?? hole @ 4658?. RIH w/ 102 jts 9-5/8? 40# HCK-55 BT csg, set @ 4655?. Lead w/ 1820 sx CIC, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 349 bbls FW. Circ 600 sx back to surf. PT csg to 1500 psi for 30 min, OK.

(1/5/15-1/11/15) TD 8-3/4? hole @ 13038?. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. RIH w/ 298 jts 5-1/2? 17# HCP-110 BT csg, set @ 13038?. 1st stage cmt lead w/ 740 sx CIH, yld 1.98 cu ft/sk. Tail w/ 1345 sx CIH, yld 1.36 cu ft/sk. Disp w/ 301 bbls FW. Open DVT, set @ 5031.8?. Circ 35bbls cmt off top of DVT. 2nd stage cmt lead w/ 240 sx CIC, yld 2.86 cu ft/sk. Tail w/ 150 sx

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

**Electronic Submission #288670 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 04/30/2015**

Name (Printed/Typed) LUCRETIA A MORRIS Title REGULATORY COMPLIANCE ANALYST

Signature (Electronic Submission) Date 01/20/2015

APPROVED FOR RECORD

MAY 7 2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____

Office BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

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.

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 ****

MAY 19 2015 dm

Additional data for EC transaction #288670 that would not fit on the form

32. Additional remarks, continued

CIC, yld 1.33 cu ft/sk. Disp w/ 116.7 bbls FW. ETOC @ 1622?. RR @ 06:00.