

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

UCD-HOBBS

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.

HOBBS OCD

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

JUN 01 2015

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM94191
2. Name of Operator DEVON ENERGY PRODUCTION CO		6. If Indian, Allottee or Tribe Name
Contact: SHEILA A FISHER Email: Sheila.Fisher@dm.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 575-748-1829	8. Well Name and No. SHINNERY 14 FED 5
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 14 T18S R32E SENE 2310FNL 660FEL		9. API Well No. 30-025-30719-00-S2
		10. Field and Pool, or Exploratory UNDESIGNATED
		11. County or Parish, and State LEA 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 checked="" 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 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 recompleat 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 recompleat 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.)

Please find the attached Bradenhead Test Report for the Shinnery 14 Fed 5 that was conducted on 1/20/15.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #291530 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO LP, sent to the Hobbs Committed to AFMSS for processing by LINDA JIMENEZ on 05/04/2015 (15LJ1099SE)	
Name (Printed/Typed) SHEILA A FISHER	Title FIELD ADMIN SUPPORT
Signature (Electronic Submission)	Date 02/12/2015
ACCEPTED FOR RECORD	
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.	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.	

FOR RECORD ONLY BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

B8 OCD 6/5/2015 JUN 09 2015

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Devon				API Number 30-025-3719			
Property Name Shinnery 14 Fed				Well No. 5			
Surface Location							
UL. Loc H	Section 14	Township 18S	Range 35E	Feet from 2310	NS Line N	Feet from 460	EW Line E
County Lea							
Well Status							
TA-O WELL YES	YES NO	SALT-D. NO	INJECTOR NO	SWD NO	OIL NO	PRODUCER NO	GAS NO
							DATE 1/20/2015

OBSERVED DATA

	1-10 Surface	1-10 Intersect	1-10 Intersect	1-10 Intersect	1-10 Intersect
Pressure	0			0	1160
Flow Characteristics					
Fast	Y/N	Y/N	Y/N	Y/N	CO2
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR X
Bubbles	Y/N	Y/N	Y/N	Y/N	GAS
Downward Flowing	Y/N	Y/N	Y/N	Y/N	Type of Fluid
Gas or Oil	Y/N	Y/N	Y/N	Y/N	Reported
Water	Y/N	Y/N	Y/N	Y/N	Applied

Remarks - Please state for each string (A, B, C, D, E) pertinent information regarding down or continuous down or up or other.

B8 1-21-15

Signature: Randy Gladden	OIL CONSERVATION DIVISION
Printed name:	Entered into EEDMS
Title:	Re-test:
E-mail Address:	
Date: 1/20/2015	Phone:
Witness: [Signature]	Witness:

JAN 26 2015

[Signature]