

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS(OCID)
JUL 11 10 2015
RECEIVED

FORM APPROVED
OMB No. 1004-0137
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.

5. Lease Serial No. **BHL: NMNM100864**

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE – Other instructions on page 2.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Devon Energy Production Company, L.P.

3a. Address
333 West Sheridan, Oklahoma City, OK 73102

3b. Phone No. (include area code)
405-228-4248

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FNL & 1980' FWL Unit F, Sec 33, T22S, R34E ' & ' Unit, Sec , T, R PP: ' & '

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

8. Well Name and No.
Rio Blanco 33 Fed SWD 2

9. API Well No.
30-025-36360

10. Field and Pool or Exploratory Area
SWD; Devonian

11. Country or Parish, State
Lea, NM

12. CHECK THE 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 Completion Report
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

13-14 Oct 2014 - Ran out of hole with production tubing and packer
 15-22 Oct 2014 - Cleaned out wellbore w/ bit and scraper
 22-23 Oct 2014 - Run in hole w/ workstring
 24 Oct 2014 - Pumped 10,000 gal 15% HCL, no returns, well on vacuum
 27 Oct 2014 - 5 Nov 2014 - Run out of hole w/ workstring
 5-8 Nov 2014 - Run in hole w/ lined injection tubing and packer
 12 Nov 2014 - MIT witnessed and passed
 27 Apr 2015 - 9 May 2015 - Replaced the wellhead and plumbed in new facility. Ready for injection on 5/9/15. Injection commenced on 6/5/2015 with 100 bbls water, tbg pressure 2500 psi. Average injection volume reflects the data on 6/23/15: 1753 bbls water, tbg pressure 2,500 psi, well injection pressure 579.

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

Name (Printed/Typed)
Megan Moravec

Title
Regulatory Compliance Analyst

Signature *Megan Moravec*

Date
7/9/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date *KES*

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.

(Instructions on page 2)

JUL 30 2015

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

JUL 10 2015

FORM APPROVED
OMB NO. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG **RECEIVED**

5. Lease Serial No. BHL: NMNM100864

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

8. Lease Name and Well No.
Rio Blanco 33 Fed SWD 2

9. API Well No.
30-025-36360

10. Field and Pool or Exploratory
SWD; Devonian

11. Sec., T., R., M., on Block and
Survey or Area
Sec 33, T22S, R34E

12. County or Parish
Lea

13. State
NM

14. Date Spudded
5/2/04

15. Date T.D. Reached
7/26/04

16. Date Completed
5/9/15
 D & A Ready to Prod.

17. Elevations (DF, RKB, RT, GL)*
GL: 3406

18. Total Depth: MD 14660
TVD 14528.47

19. Plug Back T.D.: MD n/a
TVD

20. Depth Bridge Plug Set: MD
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)
0

22. Was well cored? No Yes (Submit analysis)
Was DST run? No Yes (Submit report)
Directional Survey? No Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wl. (#ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17-1/2"	13-3/8" K-55	1# & 54.4	0	2428		1900 sx CIC		0	150 bbls
12-1/4"	9-5/8" P-110	40#	0	5148	DV @ 3123.7	1900 sx CIC		0	211 sx
8-3/4"	7" P-110	26#	0	11977		600 sx CIH		9000	
6-1/8"	5" T-95	23.2#	11646	14569.9		460 sx CIH		11446	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
3-1/2"		14508.3						

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Devonian	14570	14660	14570 - 14660		0	open
B)						
C)						
D)						

27. Acid, Fracture, Treatment, Cement Squeeze, etc.

Depth Interval	Amount and Type of Material
14570 - 14660	10,000 gals 15% HCl

28. Production - Interval A

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method	Flow
5/9/15	1/0/00	24	→	0	0	0				
Choke Size	Tbg. Press. Flwg. SI	Csg. Press. psi	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status		
			→							

28a. Production - Interval B

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method	
			→							
Choke Size	Tbg. Press. Flwg. SI	Csg. Press. psi	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status		
			→							

*(See instructions and spaces for additional data on page 2)

28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production →	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate →	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	

29. Disposition of Gas (Solid, used for fuel, vented, etc.)

SOLD

30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
Devonian	14572			Delaware	5178
				Bone Spring	8478
				Wolfcamp	11173
				Strawn	11688
				Atoka Clastics	11995
				M Mrrw Clastics	12768
				Lower Morrow	13273
				Mississippian Lm	13866
Woodford	14373				
Devonian	14572				

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- Electrical/Mechanical Logs (1 full set req'd.)
 Geologic Report
 DST Report
 Directional Survey
 Sundry Notice for plugging and cement verification
 Core Analysis
 Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) Megan Moravec Title Regulatory Compliance Analyst
 Signature *Megan Moravec* Date 7/9/2015

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