

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD 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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

5. Lease Serial No.
NMNM100567

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
RAGIN CAJUN 12 FED 3H ✓

9. API Well No.
30-025-42257 ✓

10. Field and Pool, or Exploratory
JABALINA; DELAWARE SW

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

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
DEVON ENERGY PRODUCTION CO
Contact: LUCRETIA MORRIS
Email: Lucretia.Morris@dvn.com

3a. Address
333 WEST SHERIDAN
OKLAHOMA CITY, OK 73102-5015

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 12 T26S R34E SWSW 10FSL 1085FWL ✓

OCT 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 recomplete 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.)

(4/29/15-5/3/15) Spud @ 23:00. TD 17-1/2? hole @ 1115?. RIH w/ 27 jts 13-3/8? 54.50# J-55 BT csg, set @ 1115?. Lead w/ 450 sx CIC, yld 1.87 cu ft/sk. Tail w/ 545 sx CIC, yld 1.34 cu ft/sk. Disp w/ 164 bbls FW. Circ 90 bbls cmt back to surf. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1500 psi, held for 10 min, OK.

(5/5/15-5/8/15) TD 12-1/4? hole @ 5250?. RIH w/ 120 jts 9-5/8? 40# HCK-55 BT csg, set @ 5250?. Lead w/ 1135 sx CIC, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 394 bbls FW. Circ 90 sx cmt back to surf. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1500 psi, held for 30 min, OK.

(5/21/15-5/25/15) TD 8-3/4? hole @ 14000?. RIH w/ 119 jts 5-1/2? 17# P-110 CDC-HTQ csg and 189 jts 7? 29# HCP-110 BT csg, set @ 14000?. Lead w/ 525 sx CIC, yld 3.32 cu ft/sk. Tail w/ 1490 sx CIC,

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

Electronic Submission #310036 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 08/19/2015

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

Signature (Electronic Submission) Date 07/23/2015

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 _____

ACCEPTED FOR RECORD
OCT 15 2015
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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 ****

OCT 22 2015

Additional data for EC transaction #310036 that would not fit on the form

32. Additional remarks, continued

yld 1.23 cu ft/sk. Disp w/ 443 bbls 8.3 ppg water. Circ 35 bbls cmt back to surf. RR @ 06:00.