

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCB
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.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	2. Name of Operator DEVON ENERGY PRODUCTION CO Contact: LUCRETIA A MORRIS Email: Lucretia.Morris@dvn.com	5. Lease Serial No. NMNM121489
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-552-3303	6. If Indian, Allottee or Tribe Name
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 23 T23S R33E SWSW 200FSL 850FWL 32.282972 N Lat, 103.551670 W Lon		7. If Unit or CA/Agreement, Name and/or No.
		8. Well Name and No. HOGNOSE VIPER 23 FED 1H
		9. API Well No. 30-025-41975-00-S1
		10. Field and Pool, or Exploratory BELL LAKE
		11. County or Parish, and State LEA COUNTY, NM

HOBBS OGD
NOV 30 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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.)

(2/16/15-2/20/15) Spud @ 22:30. TD 17-1/2? hole @ 1450?. RIH w/ 31 jts 13-3/8? 48# J-55 ST&C csg, set @ 1425?. Open DVT, set @ 268.1?. Lead w/ 860 sx HIC cmt, yld 1.86 cu ft/sk. 1st stage tail w/ 325 sx CIC cmt, yld 1.34 cu ft/sk. 2nd stage tail w/ 470 sx CIC cmt, yld 1.34 cu ft/sk. Displ w/ 217 bbls FW. Circ 70 bbls 2nd stage tail cmt. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1200 psi for 10 min, OK.

(2/23/15-2/25/15) TD 12-1/4? hole @ 5200?. RIH w/ 29 jts 9-5/8? 40# HCK-55 BT csg and 92 jts 9-5/8? 40# J-55 BT csg, set @ 5187.9?. Lead w/ 1395 sx Econocem HLC cmt, yld 1.87 cu ft/sk. Tail w/ 395 sx Halcem C cmt, yld 1.33 cu ft/sk. Displ w/ 390 bbls FW. Circ 1 bbl to surface. PT csg to 2750 psi for 30 min, OK.

(3/6/15-3/10/15) TD 8-3/4? hole @ 15746?. RIH w/ 123 jts 5-1/2? 17# P-110 BT csg and 240 jts 7? 29#

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

**Electronic Submission #295202 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 08/05/2015 (75LJ1391SE)**

Name (Printed/Typed) LUCRETIA A MORRIS	Title REGULATORY COMPLIANCE ANALYST
Signature (Electronic Submission)	Date 03/17/2015

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 _____

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.

ACCEPTED FOR RECORD
NOV 16 2015
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE
KJ

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

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Additional data for EC transaction #295202 that would not fit on the form

32. Additional remarks, continued

P-110 BT csg, set @ 15746?. Lead w/ 540 sx Tuned Light cmt, yld 3.32 cu ft/sk. Tail w/ 1060 sx Versacem cmt, yld 1.23 cu ft/sk. Displ w/ 512 bbls FW. RR @ 01:30.