

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.

5. Lease Serial No.
NMNM92781

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
NMNM94480X

8. Well Name and No.
GAUCHO UNIT 12H

9. API Well No.
30-025-41564

10. Field and Pool, or Exploratory
WC-025 G06 S223421L

11. County or Parish, and State
LEA 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 CO

Contact: DENISE MENOUD

Email: Denise.Menoud@dvn.com

3a. Address

PO BOX 250
ARTESIA, NM 88211

3b. Phone No. (include area code)

Ph: 575-746-5544

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 20 T22S R34E NENE 275FNL 575FEL
32.384037 N Lat, 103.485374 W Lon

HOBBS OCD

DEC 21 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 checked="" 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 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.)

THIS 2-WELL LOCATION HAS BEEN DOWNSIZED. ACRES RECLAIMED = 1.5783.

12H: LISTED ABOVE

13H: 30-025-41565
225 FNL & 575 FEL, A-20-22S-34E
LAT: 32.3841743
LONG: -103.4853745 NAD83

Accepted for Record Purposes.
Approval Subject to Onsite Inspection.
If BLM Objectives are not achieved,
additional work may be required.

Date: 12-13-15
Signature: *[Handwritten Signature]*

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

Electronic Submission #324518 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 12/01/2015 ()

Name (Printed/Typed) DENISE MENOUD

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 11/24/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____

Title _____ Date _____

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.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

Accepted for Record Only
MAB/OCD 12/21/2015

DEC 23 2015

[Handwritten Initials]

Additional data for EC transaction #324518 that would not fit on the form

32. Additional remarks, continued