

(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD

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

5. Lease Serial No.
NMNM114992

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
FIGHTING OKRA 18 19 FED 71H

9. API Well No.
30-025-42973-00-X1

10. Field and Pool, or Exploratory
BRADLEY

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: LUCRETIA A MORRIS
Email: Lucretia.Morris@dvn.com

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

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

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 18 T26S R34E NWNW 200FNL 330FWL

HOBBS OCD

APR 05 2016

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.)

(12/15/15-12/16/15) Spud well @ 02:00. TD 17-1/2" hole @ 894.4'. RIH w/ 21 jts 13-3/8" 54.5# J-55 BTC csg, set @ 894.4'. Tail w/ 935 sx CIC, yld 1.34 cu ft/sk. Disp w/ 132 bbls brine. Circ 72 bbls cmt to surf. PT BOPE @ 250/5000 psi; PT annular to 3500 psi, OK. PT csg to 1500 psi for 30 min, OK.

(12/18/15-12/20/15) TD 12-1/4" hole @ 5192'. RIH w/ 118 jts 9-5/8" 40# HCK-55 BTC csg, set @ 5177.6'. Lead w/ 1340 sx CIC, yld 1.88 cu ft/sk. Tail w/ 395 sx CIC, yld 1.31 cu ft.sk. Disp w/ 387 bbls FW. Circ 200 bbls cmt to surf. PT csg to 2765-psi, OK.

(12/29/15-1/2/16) TD 8-3/4" hole @ 13086'. RIH w/ 277 jts 7" 29# P-110HC BTC csg and 25 jts 7" 29# P110RY DWC/C csg, set @ 13070'. Lead w/ 535 sx CIH, yld 3.42 cu ft/sk. Tail w/ 370 sx CIH, yld 1.22 cu ft/sk. Disp w/ 478 bbls OBM. ETOC @ 3049'. PT back to mud pumps @ 250/6000 psi and PT BOPE @ 250/5000 psi, OK. PT annular to 3500 psi, good test. PT csg to 1500 psi for 30 min, OK.

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

**Electronic Submission #331193 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO LP, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 02/10/2016 (16PP0308SE)**

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

Signature (Electronic Submission) Date 02/10/2016

ACCEPTED FOR RECORD

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.

** BLM REVISED **

Handwritten signature and initials.

Additional data for EC transaction #331193 that would not fit on the form

32. Additional remarks, continued

(1/14/16-1/20/16) TD 6-1/8" hole @ 22587'. RIH w/ 243 jts 4-1/2" 13.5# P-110 CDC-HTQ csg, set @ 22577'. Lead w/ 885 sx CIH, yld 1.22 cu ft/sk. Disp w/ 150 bbls KCL and disp w/ 115 bbls OBM. Circ 10 bbls cmt back. RR @ 15:00.

WHERE IS TOP OF LIVER?