

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**NMOCD**  
**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		5. Lease Serial No. NMNM113964
2. Name of Operator DEVON ENERGY PRODUCTION CO Contact: LUCRETIA MORRIS Email: Lucretia.Morris@dvn.com		6. If Indian, Allottee or Tribe Name
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-552-3303	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 33 T24S R32E SESW 200FSL 1980FWL		8. Well Name and No. PAINT 33 FEDERAL 2H
		9. API Well No. 30-025-42591-00-S1
		10. Field and Pool, or Exploratory WC-025 G06 S253206M
		11. County or Parish, and State LEA COUNTY, NM

**HOBBS OCD**  
**JAN 25 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 checked="" 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 recomplate 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 recomplate 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.)

Please see attached MIT Charts:

8/28/2015 Casing test after DO cement squeeze.  
8/31/2015 17:30 1st & 2nd test after casing patch was set.  
8/31/2015 19:00 3rd & 4th test after casing patch was set.

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

**Electronic Submission #316264 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 10/21/2016 (16LJ0121SE)**

Name (Printed/Typed) LUCRETIA MORRIS	Title REGULATORY COMPLIANCE PROFESSI
Signature (Electronic Submission)	Date 09/14/2015

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

**ACCEPTED FOR RECORD**  
JAN 20 2016  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

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.

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

*Handwritten initials and signature*

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10

50

14000  
13000  
12000  
11000  
10000  
9000  
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15

45

CHART NO. MD MP-15000-BH

METER \_\_\_\_\_

8-28-15  
CHART PUT ON

TAKEN OFF

LOCATION *Point 33 Fed #2H*  
REMARKS *Casing test after D/O  
Cement Squeeze.*

*D. J. [Signature]*

14000  
13000  
12000  
11000  
10000  
9000  
8000  
7000  
6000  
5000  
4000  
3000  
2000  
1000

20

40

14000  
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60 0

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11000  
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9000  
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2000  
1000



CHART NO. MC MP-15000-1H

METER

8-31-15

CHART PUT ON  
7:00 pm M

TAKEN OFF  
8:20 pm M

LOCATION *Point 33 Fed # 211*

REMARKS *3rd 1/2 hr test after casing patch was set*

*J. H. [Signature]*

*Pressure backing  
1 1/2 hr test*

30

35

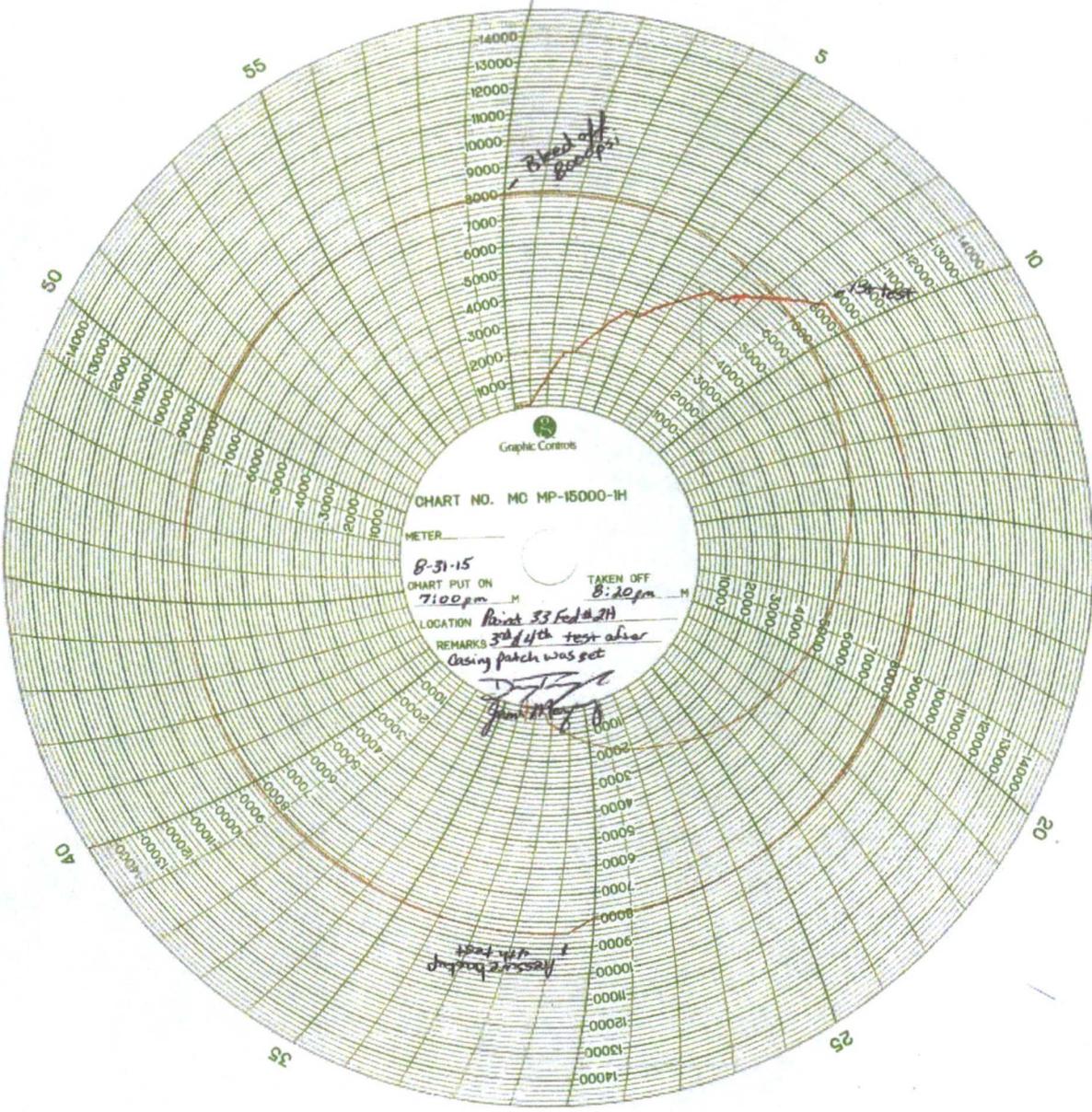
25

20

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14000  
13000  
12000  
11000  
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9000  
8000  
7000  
6000  
5000  
4000  
3000  
2000  
1000

50

10

Blood test press  
9000 psi

Graphic Controls

CHART NO. MC MP-15000-BH

METER

8-31-15

CHART PUT ON

5:30pm

TAKEN OFF

6:50pm

LOCATION

Point 33 Fed 42H

REMARKS

1st end test after

Casing patch was set

*John M. [Signature]*

1st test

Pressure backing  
1st end test

45

15

40

20

35

25

30

10000