

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.
NMNM100864 ✓

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

RECEIVED
MAY 16 2017

1. Type of Well
 Oil Well Gas Well Other: UNKNOWN OTH WDW

2. Name of Operator
✓ DEVON ENERGY PRODUCTION CO E-Mail: dana.delarosa@dvn.com Contact: DANA DELAROSA

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

3b. Phone No. (include area code)
Ph: 575-746-5594

8. Well Name and No.
RIO BLANCO 33 FEDERAL 2 ✓

9. API Well No.
30-025-36360

10. Field and Pool or Exploratory Area
BELL LAKE; DEVONIAN, NE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
✓ Sec 33 T22S R34E 1980FNL 1980FWL ✓

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

12. CHECK THE 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"/> Hydraulic Fracturing	<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	
	<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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

In response to Notification of UIC Testing Letter for District 1 received January 2017; Bradenhead test for Rio Blanco 33 Federal 2; API 30-025-36360 was completed on March 28, 2017 and witnessed by OCD Representative Gary Robenson. Bradenhead Test Report attached.

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

Electronic Submission #371390 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO, sent to the Hobbs
Committed to AFMSS for processing by DEBORAH MCKINNEY on 04/11/2017 ()

Name (Printed/Typed) DANA DELAROSA

Title FIELD ADMIN SUPPORT

Signature (Electronic Submission)

Date 03/28/2017

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

MAY 5, 2017
PR Swartz
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 or cause to be made any statement or representation of any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

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

Accepted for Record Only

MSB/OCD 5/17/2017

District I
 1625 N. French Dr., Hobbs, NM 88241
 Phone: (575) 393-6161 Fax: (575) 393-0720

State of New Mexico
 Energy, Minerals and Natural Resources Department
 Oil Conservation Division Hobbs District Office

BRADENHEAD TEST REPORT

Operator Name Rio Blanco <i>Deven</i>		API Number <i>30-025-36360</i>
Property Name <i>Rio Blanco Fed</i>		Well No. <i>#2</i>

7. Surface Location

UL - Lot <i>F</i>	Section <i>33</i>	Township <i>22S</i>	Range <i>34E</i>	Feet from <i>1980</i>	N/S Line <i>N</i>	Feet From <i>1980</i>	E/W Line <i>W</i>	County <i>LEA</i>
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Well Status

Well Status	SHUT-IN <i>No</i>	PRODUCING <i>SWD</i>	DATE <i>3-28-17</i>
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OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

OBSERVED DATA

If bradenhead flowed water, check all of the descriptions that apply:

	(A)Surf-Interm	(B)Interm(1)-Interm(2)	(C)Interm-Prod	(D)Prod Csng	(E)Tubing
Pressure	<i>0</i>			<i>0</i>	
Flow Characteristics					
Puff	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Steady Flow	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Surges	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Down to nothing	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Gas or Oil	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	
Water	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	<i>Y/N</i>	

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks:

INJECTING AT THIS TIME ___ WTR, ___ GAS, ___ CO2

Signature: <i>[Signature]</i>	OIL CONSERVATION DIVISION
Printed name: <i>Chris West</i>	Entered into RBDMS
Title: <i>Assistant Foreman</i>	Re-test
E-mail Address: <i>christopher.west@dvn.com</i>	
Date: <i>3-28-17</i>	Phone: <i>575-620-9425</i>
Witness: <i>[Signature]</i>	