

HOBBS OCD

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CONFIDENTIAL

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Operator

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.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. REBEL 20 FED 8H
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY Contact: LINDA GOOD Email: linda.good@dvn.com	9. API Well No. 30-025-43159-00-X1
3a. Address 6488 SEVEN RIVERS HIGHWAY ARTESIA, NM 88211	10. Field and Pool or Exploratory Area COTTON DRAW
3b. Phone No. (include area code) Ph: 405.552.6558	11. County or Parish, State LEA COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 20 T24S R32E NENE 250FNL 870FEL	

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MID-CONTINENT DIVISION

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 Drilling Operations
	<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 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 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.

(6/9/2017 - 6/11/2017) Spud @ 22:00. TD 17-1/2" hole @ 925'. RIH w/21 jts 13-3/8" 54.5# J-55 BTC csg, set @ 913'. Lead w/ 960 sx CIC, yld 1.35, 14.80 cu ft/sx. Disp w/134.8 bbls FW. Circ 374 sx cmt to surf. PT BOPE 250/5000 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 min, good test.

6/12/2017 - 6/15/2017) TD 12-1/4" hole @ 4635'. RIH w/109 jts 9-5/8" 40# J-55 BTC csg, set @ 4623'. Lead w/1635 sx CIC, yld 1.74, 12.90 cu ft/sx. Tail in w/425 sx CIC, 7ld 1.33, 14.80 cu, ft/sx. PT BOPE 250/5000 psi, held each test for 10 min, OK. PT to 2765 psi for 30 min, good test.

(6/16/2017 - 6/28/2017) TD 8-3/4" hole @ 10,979' & 8-1/2" hole @ 15,630'. RIH w/375 jts 5-1/2" P110RY CDC-HTQ csg, set @ 15,630'. 1st Lead w/615 sx, yld 3.50, 9.00 cu ft/sx. 2nd lead w/445 sx, yld 2.91, 11.00 cu ft/sx. Disp w/20 bbl MMCR wtr. Tail in w/935 sx, yld 1.46, 13.20 cu ft/sx.

TOC? touchface?  
TOC?

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

Electronic Submission #381221 verified by the BLM Well Information System  
For DEVON ENERGY PRODUCTION COMPANY LP, sent to the Hobbs  
Committed to AFSS for processing by PRISCILLA PEREZ on 07/17/2017 (17PP0451SE)

Name (Printed/Typed) LINDA GOOD	Title REGULATORY COMPLIANCE SPECIALIST
Signature (Electronic Submission)	Date 07/13/2017

ACCEPTED FOR RECORD  
AUG 1 2017  
BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

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.

(Instructions on page 2)

\*\* BLM REVISED \*\*

KZ

Additional data for EC transaction #381221 that would not fit on the form

32. Additional remarks, continued

Disp w/347 bbl FW. RR @ 19:30.