

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
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.
NMNM63994

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

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

1. Type of Well
 Oil Well Gas Well Other

JAN 16 2018

8. Well Name and No.
BOUNDARY RAIDER 6-7 FED COM 211H

2. Name of Operator
DEVON ENERGY PROD CO LP

Contact: CHANCE BLAND
E-Mail: chance.bland@dvn.com

RECEIVED

9. API Well No.
30-025-44145

3a. Address
123 W. SHERIDAN AVE
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)
Ph: 405-693-9277

10. Field and Pool or Exploratory Area
SAND DUNES; BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 6 T23S R32E Mer NMP NWNW 535FNL 800FWL

11. County or Parish, State
LEA 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 recompleate 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 recompleation 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.

Devon Energy is respectfully informing you that casing is as follows.
(11/27/2017 ? 11/29/2017) Spud @ 17:00. TD 17-1/2? hole @852?. RIH w/ 23 jts 13-3/8? 54.50# J-55 BTC csg, set @ 840?. Lead w/ 865 sx CIC, yld 1.34 cu ft/sk. Disp w/ 123 bbls FW. Circ 70 sx cmt to surf. PT BOPE 250/3500 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 mins, OK.

(11/30/2017 ? 12/3/2017) TD 12-1/4? hole @6031?. RIH w/ 83 jts 9-5/8? 40# J-55 BTC csg & 59 jts 40# K-55 set @ 6026?. Lead w/ 800 sx CIC, yld 3.62 cu ft/sk. Tail w/ 235 sx CIC, yld 1.34 cu ft/sk. Disp w/ 200 bbls FW. Circ 104 sx cmt to surf. PT csg to 2765 psi for 30 mins, OK.

12/4/2017 ? 12/24/2017) TD 8-3/4? hole @ 10596? & 8-1/2? hole @ 20405?. RIH w/ 490 jts 5-1/2? 17# P110RY CDC-HTQ csg, set @ 20390?. 1st lead w/ 540 sx cmt, yld 3.64 cu ft/sk. Tail w/1985 sx cmt, yld 1.47 cu ft/sk. Disp w/ 472 bbls water. ETOC 3992?. RR @ 17:00.

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

**Electronic Submission #399564 verified by the BLM Well Information System
For DEVON ENERGY PROD CO LP, sent to the Hobbs
Committed to AFMSS for processing by JENNIFER SANCHEZ on 01/04/2018 ()**

Name (Printed/Typed) CHANCE BLAND	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 01/04/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD
JAN 5 2018
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.

(Instructions on page 2)

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

PMV

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