

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.

HOBBS

5. Lease Serial No.
NMNMO25779A

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on page 2

MAY 08 2018

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. TAYLOR DRAW 7 FED COM 2Y
2. Name of Operator DEVON ENERGY PRODUCTION CO Contact: DENISE MENOUD Email: Denise.Menoud@dmn.com		9. API Well No. 30-025-42693
3a. Address PO BOX 250 ARTESIA, NM 88211	3b. Phone No. (include area code) Ph: 575-746-5544	10. Field and Pool or Exploratory Area LUSK; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 7 T19S R32E SESE 665FSL 400FEL 32.667736 N Lat, 103.797004 W Lon		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 checked="" 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 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 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.

THIS WELL LOCATION HAS BEEN DOWNSIZED. ACRES RECLAIMED = 2.3159

THIS WELL PAD ALSO CONTAINS THE PLUGGED AND ABANDONED WELL:

TAYLOR DRAW 7 FED COM 2H
30-025-42030
P-07-19S-32E
665 FSL & 375 FEL
32.6695747; -103.7982254



10-21-16 A. Arias - placed in monitor status - OK to accept for record.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #368254 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO LP, sent to the Hobbs

Name (Printed/Typed) DENISE MENOUD	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 02/27/2017

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)

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

Accepted for Record Only

MAB/OCD 5/8/2018

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

5. Lease Serial No.
NMNM104685

6. If Indian, Allottee or Tribe Name

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

8. Well Name and No.
TAYLOR DRAW 7 FED COM 2H

9. API Well No.
30-025-42030-00-X1

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
DEVON ENERGY PRODUCTION CO
Contact: DENISE MENOUD
Email: Denise.Menoud@dvn.com

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

3b. Phone No. (include area code)
Ph: 575-746-5544

10. Field and Pool, or Exploratory
LUSK

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 7 T19S R32E SESE 665FSL 375FEL
32.669567 N Lat, 103.798226 W Lon

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

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input checked="" 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 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 recompleat 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 recompleat 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.)

THIS WELL WAS PLUGGED AND ABANDONED ON 7/18/2015 BECAUSE OF CASING COLAPSE, THE RIG WAS SKIDDED OVER 25 FEET, AND THE TAYLOR DRAW 7 FED COME 2Y WAS DRILLED. A BELOW GROUND MARKER WAS PLACED ON THE 2H (SUBSEQUENT APPROVED SUNDRY COPY ATTACHED) STATING "RECLAMATION TO OCCUR WHEN REPLACEMENT WELL IS PLUGGED" (2Y).

PLEASE ACCEPT THIS SUNDRY AS A MATTER OF RECORD AND AN EXTENSION FOR RECLAMATION ON THE 2H UNTIL FINAL ABANDONMENT OF THE 2Y.

THANK YOU.

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

**Electronic Submission #348060 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 09/08/2016 (16PP1081SE)**

Name (Printed/Typed) DENISE MENOUD	Title AUTHORIZED REPRESENTATIVE
Signature (Electronic Submission)	Date 08/17/2016

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 _____

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UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

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NMNM104685
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side

AUG 16 2016

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

1. Type of Well
 Oil Well Gas Well Other

REGULATORY DEPT.
MID-CONTINENT DIVISION

8. Well Name and No.
TAYLOR DRAW 7 FED COM 2H

2. Name of Operator
DEVON ENERGY PRODUCTION CO
Contact: LINDA GOOD
ERMail: linda.good@dvn.com

9. API Well No.
30-025-42030-00-X1

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

3b. Phone No. (include area code)
Ph: 405.552.6558

10. Field and Pool, or Exploratory
LUSK

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 7 T19S R32E SESE 665FSL 375FEL
32.669567 N Lat, 103.798226 W Lon

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(7/3/2015 ? 7/5/2015) Spud @ 07:00. TD 17 1/2" hole @ 882'. RIH w/21 jts 13 3/8" 48# J-55 ST&C csg, set @ 882'. Lead w/700 sx CIC, yld 1.73 cu ft/sk. Tail w/150 sx CIC, yld 1.33 cu ft/sk. Disp w/132 bbls FW. Circ 324 sx cmt to surf. PT BOPE 250/3000 psi, OK. PT csg to 1211 psi, 70% csg burst.

(7/9/2910 ? 7/12/2015) TD 12 1/4" hole @ 4527'. RIH w/101 jts 9 5/8" 40# J-55 LT&C csg, set @ 4527'. 1st stage Lead w/348 sx CIPOZ/C, yld 1.65 cu ft/sk. Tail w/242 sx CIPOZ60/40, yld 1.38 cu ft/sk. Drop DV Tool @ 2988.8'. Disp to blw DV Tool 130 bbls FW. Disp dwn to DV Tool 210 bbl 10# brine. 2nd stage Lead w/1682 sx CIPOZ60/40C, yld 1.65 cu ft/sk. Tail w/300 sx CIPOZ60/40C, yld 1.38 cu ft/sk. Disp w/215 bbls FW. Cic 341 sx cmt to surf. PT BOPE 250/3000 psi, held each test for 10 min, OK. Drld out DV Plug @ 2965'. PT csg to 1500 psi for 30 min, OK.

Redemption to occur when replacement well is plugged

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

Electronic Submission #339627 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 06/01/2016 (16PP0657SE)

Name (Printed/Typed) LINDA GOOD	Title REGULATORY COMPLIANCE SPECIALI
Signature (Electronic Submission)	Date 05/18/2016

Accepted for Record THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <i>James R. [Signature]</i>	Title SPET	Date 7-31-16
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 C/O

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Additional data for EC transaction #339627 that would not fit on the form

32. Additional remarks, continued

(7/12/2015 ? 7/19/2015) Drld to 4557'. 1st stage cmt sqz 45 bbls cmt, yld 1.33 cu ft/sk. Disp w/67 bbls FW. ETOC @ 4265'. 2nd stage cmt sqz lead 400 sx cmt, yld 1.48 cu ft/sk. Tail w/455 sx cmt, yld 1.33 cu ft/sk. Disp w/67 bbls FW. ETOC @ 3355'. 3rd stage cmt sqz lead w/200 sx cmt, yld 1.48 cu ft/sk & 47 bbls cmt, yld 1.33 cu ft/sk. Disp w/51 bbls FW. ETOC 3308'. 1st stage cmt plug as follows: lead w/49 sx CiC, yld 1.33 cu ft/sk. Disp w/51 bbls FW. ETOC @ 2888'. (Witness by Paul Flowers w/BLM) . 2nd stage cmt plug as follows: lead w/49 sx CiC, yld 1.33 cu ft/sk. Disp w/41 bbls FW. ETOC @ 2300?. 3rd stage cmt plug as follows: test to 5000#, lead w/50 sx CiC, yld 1.33 cu ft/sk. Disp w/17 bbls FW. ETOC 810'. 4th stage cmt plug as follows: test to 5000#, lead w/50 sx CiC, yld 1.33 cu ft/sk. Disp w/6 bbls FW. Final pressure at 51 psi. Bleed pressure, remove cmt line from drill pipe. 2 bbls cmt returned ETOC @ surf. Added 1.5 bbls cmt to top of annulus. Welded on dry hole marker. RR @ 3:00.