

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**SUNDRY NOTICES AND REPORTS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such purposes.*

5. Lease Serial No.  
NMNM100864  
6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

**AUG 06 2018**

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

1. Type of Well  
 Oil Well  Gas Well  Other: INJECTION

8. Well Name and No.  
RIO BLANCO 33 FED 2

2. Name of Operator  
DEVON ENERGY PRODUCTION COM LP  
Contact: DENISE MENOUD  
E-Mail: Denise.Menoud@dvn.com

9. API Well No.  
30-025-36360-00-S1

3a. Address  
6488 SEVEN RIVERS HIGHWAY  
ARTESIA, NM 88211

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

10. Field and Pool or Exploratory Area  
BELL LAKE  
SWD

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

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 Well Test
	<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.

IN RESPONSE TO NOTIFICATION UIC TESTING LETTER FOR DISTRICT 1,  
PLEASE SEE ATTACHED COPY OF BRADENHEAD TEST REPORT TAKEN 6/27/2018,  
WITNESSED AND FILED BY OCD REPRESENTATIVE, GILBERT CORDERO.

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

**Electronic Submission #427141 verified by the BLM Well Information System  
For DEVON ENERGY PRODUCTION COM LP, sent to the Hobbs  
Committed to AFMSS for processing by PRISCILLA PEREZ on 07/13/2018 (18PP1447SE)**

Name (Printed/Typed) DENISE MENOUD

Title AUTHORIZED REPRESENTATIVE

Signature (Electronic Submission)

Date 07/12/2018

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

**ACCEPTED FOR RECORD**

Approved By Kerry Fortner

Title

Date 8-10-18

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.

JUL 18 2018

/s/ Jonathon Shepard

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.

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

(Instructions on page 2)

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

*For Record only*

AUG 10 2018

RECEIVED

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

BRADENHEAD TEST REPORT

Operator Name <b>DEVON ENERGY PRODUCTION CO LP</b>	API Number <b>30-025-36360 -</b>
Property Name <b>RIO BLANCO 33 FEDERAL</b>	Well No. <b>2</b>

Surface Location

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

Well Status

TA'D WELL YES	<input type="radio"/> NO	SHUT-IN YES	<input type="radio"/> NO	INJ	INJECTOR <input type="radio"/> SWD	OIL	PRODUCER GAS	DATE <b>6/27/2018</b>
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OBSERVED DATA

	(A)Surface	(B)Interm(1)	(C)Interm(2)	(D)Prod Casing	(E)Tubing
Pressure	○	—	—	○	74.5
<b>Flow Characteristics</b>					
Puff	Y/ <input type="radio"/> N	Y/N	Y/N	<input checked="" type="radio"/> Y/ <input type="radio"/> N	CO2 —
Steady Flow	Y/ <input type="radio"/> N	Y/N	Y/N	Y/ <input type="radio"/> N	WTR <input checked="" type="checkbox"/>
Surges	Y/ <input type="radio"/> N	Y/N	Y/N	Y/ <input type="radio"/> N	GAS —
Down to nothing	<input checked="" type="radio"/> Y/ <input type="radio"/> N	Y/N	Y/N	<input checked="" type="radio"/> Y/ <input type="radio"/> N	Type of Fluid
Gas or Oil	Y/ <input type="radio"/> N	Y/N	Y/N	Y/ <input type="radio"/> N	Injected for
Water	Y/ <input type="radio"/> N	Y/N	Y/N	Y/ <input type="radio"/> N	Waterflood if applies.

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>Denise Menoud</i>	OIL CONSERVATION DIVISION
Printed name: Denise Menoud	Entered into RBDMS
Title: Admin. Field Support	Re-test <i>[Signature]</i>
E-mail Address: denise.menoud@dmn.com	
Date: 7/12/2018	
Phone: 575-746-5544	
Witness: KERRY FORTNER	

575-399-2991

INSTRUCTIONS ON BACK OF THIS FORM

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

HOBBS OCD

JUN 28 2018

BRADENHEAD TEST REPORT

RECEIVED

DEVON ENERGY PRODUCTION COMPANY		Operator Name	API Number	
RIO BLANCO 33 FEDERAL		Property Name	30-025-36360-00-00	
			Well No.	002

Surface Location

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

TA'D Well	SHUT-IN	INJECTOR	PRODUCER	DATE
YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	INJ <input type="checkbox"/> SWD <input checked="" type="checkbox"/>	OIL <input type="checkbox"/> GAS <input type="checkbox"/>	6/27/18

OBSERVED DATA

	(A)Surf-Interm	(B)Interm(1)	(C)Interm(2)	(D)Prod Csmg	(E)Tubing
Pressure	0	—	—	0	745
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2 _____
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR _____
Sarges	Y/N	Y/N	Y/N	Y/N	GAS _____
Down to nothing	Y/N	Y/N	Y/N	Y/N	If applicable type _____
Gas or Oil	Y/N	Y/N	Y/N	Y/N	fluid injected for _____
Water	Y/N	Y/N	Y/N	Y/N	Waterflood _____

Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

Signature: <i>John Baga</i>	OIL CONSERVATION DIVISION
Printed name: John Baga (575) 748-5248	Entered into RBDMS
Title:	Re-test <i>[Signature]</i>
E-mail Address:	
Date: 6/27/18	Phone:
	Witness: KERRY FORTNER 575-399-2991