

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
Parishad Field Office  
DCD 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.  
NMNM86154

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**

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
DIAMOND TAIL 24 01

2. Name of Operator  
DEVON ENERGY PRODUCTION COM LP  
Contact: JENNIFER HARMS  
Mail: jennifer.harms@devon.com

9. API Well No.  
30-025-33344-00-S1

3a. Address  
P O BOX 250  
ARTESIA, NM 88201

3b. Phone No. (include area code)  
Ph: 405-552-6560

10. Field and Pool or Exploratory Area  
DIAMONDTAIL-DELAWARE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 24 T23S R32E NWSW 1980FSL 660FWL

11. County or Parish, State  
LEA COUNTY, NM  
*Bone Spring*

RECEIVED  
FEB 07 2019  
HOBBS DCD

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 checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Deepen                    |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Hydraulic Fracturing      |
|   | <input type="checkbox"/> Production (Start/Resume) |
|   | <input type="checkbox"/> Alter Casing              |
|   | <input type="checkbox"/> Reclamation               |
|   | <input type="checkbox"/> Water Shut-Off            |
|   | <input type="checkbox"/> Casing Repair             |
|   | <input type="checkbox"/> New Construction          |
|   | <input type="checkbox"/> Well Integrity            |
|   | <input type="checkbox"/> Change Plans              |
|   | <input type="checkbox"/> Recomplete                |
|   | <input checked="" type="checkbox"/> Other          |
|   | <input type="checkbox"/> Plug and Abandon          |
|   | <input type="checkbox"/> Temporarily Abandon       |
|   | <input type="checkbox"/> Production Start-up       |
|   | <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 recomplate 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 Production Co., L.P. (Devon) respectfully requests to change the wells status to producing effective 11/15/2018.

Test date: 10/25/2018  
OIL: 5.6  
GAS: 0  
WATER: 107

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

Electronic Submission #449090 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 01/28/2019 (19PP0734SE)

|                                     |                                     |
|-------------------------------------|-------------------------------------|
| Name (Printed/Typed) JENNIFER HARMS | Title REGULATORY COMPLIANCE ANALYST |
| Signature (Electronic Submission)   | Date 01/07/2019                     |

**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 *1/13/2019* /s/ Jonathon Shepard

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