

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.

5. Lease Serial No.
NMNM114988

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

HOBBS OCD
AUG 21 2019
RECEIVED

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
DEVON ENERGY PRODUCTION COMPANY
Contact: SHEILA FISHER
Email: Sheila.Fisher@dvn.com

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

3b. Phone No. (include area code)
Ph: 575-748-1829

8. Well Name and No.
SEAWOLF 1-12 FED 92H

9. API Well No.
30-025-43769-00-S1

10. Field and Pool or Exploratory Area
WC025G08S203506D-BONE SPRING

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 1 T26S R33E NWNW 200FNL 450FWL
32.079185 N Lat, 103.533142 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 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	Site Facility Diagram/Security Plan
	<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.

Production method change from flowing to gas lift.

Attached is the gas lift diagram and updated CTB site diagram.

ACCEPTED FOR RECORD
AUG - 5 2019
Sheila Fisher UE
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

14. I hereby certify that the foregoing is true and correct.
**Electronic Submission #476237 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION COMPAN, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 08/01/2019 (19PP2729SE)**

Name (Printed/Typed) SHEILA FISHER Title FIELD ADMIN SUPPORT

Signature (Electronic Submission) Date 08/01/2019

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 _____

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 ****

KS

Seawolf 1-12 Fed 81H, Seawolf 1-12 Fed 82H; Seawolf 1-12 Fed 81H; Seawolf 1-12 Fed 82H; Seawolf 1-12 Fed 102H
ITEM 1000, 81, 1003, 8100
 200' FNL & 360' FWL; 200' FNL & 390' FWL; 200' FNL & 330' FWL; 200 FNL & 450 FWL; 200 FNL & 420 FWL
 Lea County, NM
 API #30-025-43762; API #30-025-43763; API #30-025-43768; API #30-025-43769; API #30-025-43791

Production System: Open

1) Oil sales by tank gauge to tank truck.

2) Seal requirements:

A. Production Phase: On all Tanks.

(1) All valves 6 sealed closed.

Sales Phase: On Tank being hauled.

(1) Valve 1 sealed closed.

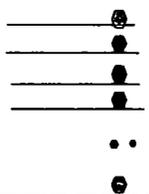
(2) Valve 3 sealed closed.

(3) Valve 4 sealed closed.

(4) Valve 6 sealed closed.

(5) Other Valves: Plugged or otherwise inaccessible.

NOTE: Valve 2 to either a test or rod line if there is a valve 2 it will be sealed closed.



Ledger for Site Diagram

Valve #1:	<u>Production Line</u>	
Valve #2:	<u>Test or Rod Line</u>	
Valve #3:	<u>Equalizer Line</u>	
Valve #4:	<u>Chp. Chain Line</u>	
Valve #5:	<u>Extra Lines</u>	
Valve #6:	<u>BS&W Load Line</u>	

Buried Lines:

Firehead:

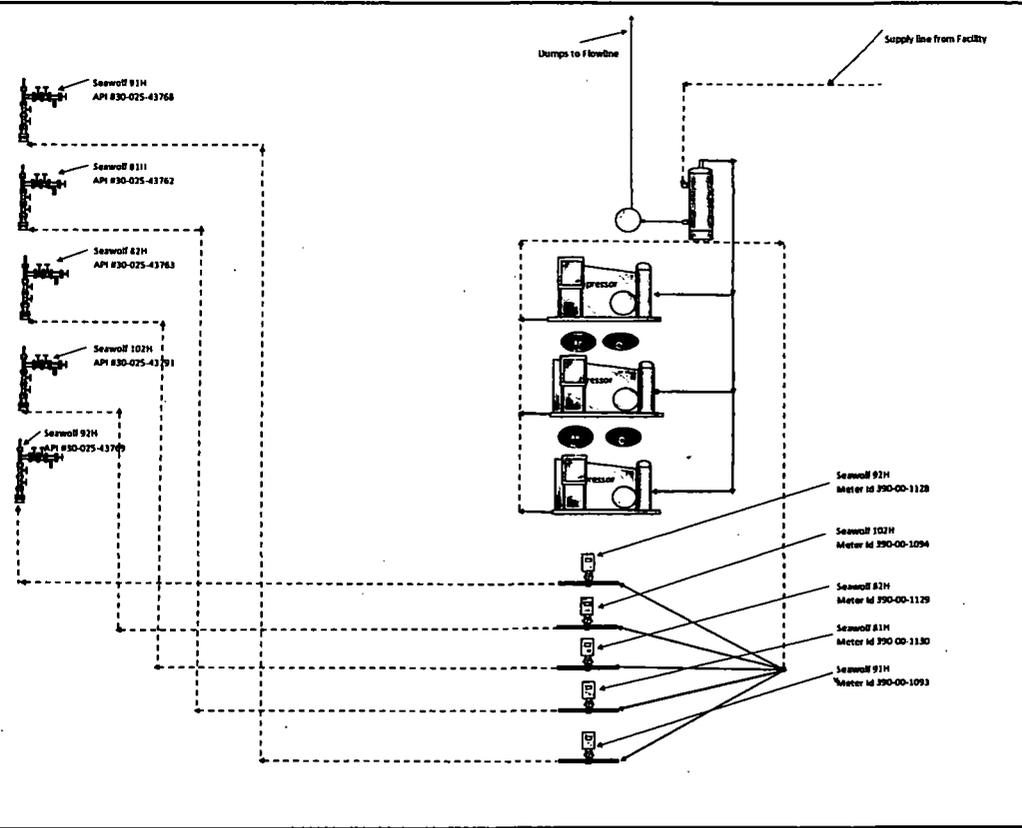
Wellhead:

Stack-pak:

Production line:

Water line:

Gas Meter



Sewerall 1-12 CTS 1
 SWS 1 7200 R30E
 S10 FHL & 343E PEL
 Lea County, NM

Production System: Open

(1) Oil water by LACT to pipeline.
 (2) Sand separation only.

A. Production Phase: On all Tanks.
 (1) All valves 0 needed closed.

Safety Phase: On Tank being isolated.

(1) Valve 1 Open
 (2) Valve 3 Open
 (3) Valve 4 needed closed
 (4) Valve 5 needed closed

(5) **Flow Valves:** Flipped or otherwise non-operational.
 (6) **Valve 2:** In either a rest or well flow state in a valve 2 it will be needed closed.

Legend for Bits Diagram

Valve #1: Production Line
 Valve #2: Test or Flow Line
 Valve #3: Choke/Drain Line
 Valve #4: Extra Line
 Valve #5: 82474 Level Line

Gas Line:
 Pressure:
 High/Low:
 Backflow:
 Production Box:
 Water Box:
 Gas Meter:
 Choke/Drain Line

