` !							
ົງ ທີ່ 3160-5	RECEIVE						
igust 1999)	DEPARTMENT OF THE INTERIOR				OMB NO. 1004-0135		
	DEC BUREA	U OF LAND MANAGEMENT		I.S.	. Lease Serial No.	NOVEMBER 30, 2000	
		ICES AND REPORTS ON WEL		5		LC-029489C	
	Donot use this form for proposals to drill or to re-enter an abundented were used form 3160-3 (APD) for such proposals				6. It Indian, Allottee or Tribe Name		
		UBMIT IN TRIPLICATE				went Name and No	
				/	. Unit of CA Agree	ement Name and No.	
Type of Well	🗹 Oil Well 🗌 Ga	as Well Other			Well Name and N	No.	
. Name of Operator					Cockburn G Federal 2		
Devon Energy Production Company, LP					1.30-025-39597		
Address and Telephone No. 20 North Broadway, Oklahoma City, OK 73102 405-552-8198					10. Field and Pool, or Exploratory		
				· · · · · · · · · · · · · · · · · · ·		Escarpe; Bone Springs	
Location of Well (Report location clearly and in accordance with Federal requirements)* 2190' FNL 610' FWL, Unit E					12. County or Parish 13. State		
	Sec 10 T18S R33E				Lea	NM	
		APPROPRIATE BOX(s) TO INI	DICATE NATURE OF NOT	ICE, REPORT, E OF ACTION	OR OTHER DATA	L	
ITPE OS	SUBMISSION				(Start/Becume)	Water Shut-Off	
Notice of	Intent	Acidize	Deepen		(Start/Resume)	Well Integrity	
		Alter Casing	Fracture Treat	Reclamatio			
Subsequent Report		Casing Repair	New Construction	Recomplete			
Final Aba	ndonment Notice	Change Plans	Plug and Abandon	Temporaril			
		Clearly state all pertinent details, and give	Plug Back	Water Disp		revenues duration thereof. If the proposa	
∍von Energy F	roduction Company L	.P, respectfully requests appro		nange.			
Rig change to	Patterson # 80 (see a & dristorb	ttached rig layout) Gince 20 170'	an close] loop	side	A pie,	
. Thereby cer	tity that the foregoing is	true and correct					
igned	2 al	Name Title	e Norvella Ada Sr. Staff Engineering		Date	12/14/2009	
his space for F	Federal or State Office			- 0	ת		
pproved by	/s/ Don Pete	Title	FOR FIELD MANAGE	:K	Date	DEC. 2 2 2008	
onditions of ap	proval, if any.	-	CARLSBAD FIELD OF	FICE			
	in 1001, makes it a crime for an	ry person knowingly and winiting to make a	any department or agency of the on	ieu States any taise,	ncillious of fraudulent st	atements or representations to any mate	
jurisdiction							
		*See	e Instruction on Reverse	Side			

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