Form 3160-5 (June 1990)

## UNITED STATES DEPARTME... OF THE INTERIOR N.M. Oil Co. . Division

BUREAU OF LAND MANAGEMENT 811 S. 1st Street

FORM APPROVED Budget Bureau No. 1004-0135

SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  Use "APPLICATION FOR PERMIT—" for such proposals  SUBMIT IN TRIPLICATE  1. Type of Well  Other  2. Name of Operator  DEVON ENERGY CORPORATION (NEVABA)  3. Address and Telephone No.  20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611		5. Lease Designation and Serial No.  LC-029548A  6. If Indian, Allottee or Tribe Name			
		7. If Unit or CA, Agreement Designation			
				8. Well Name and No.  C.A. Russell #7  9. API Well No.  30-015-05220	
		4. Location of Well (Footage. Sec., T., R., M., or Survey Description) 1650' FNL & 1384' FWL of Section 18-T17S-R31E			10. Field and Pool, or Exploratory Area  Grayburg-Jackson Field  11. County or Parish, State  Eddy County, NM
		CHECK APPROPRIATE BOX(s	) TO INDICATE NATURE OF NOTICE, REP		
TYPE OF SUBMISSION	TYPE OF ACTION				
<ul><li>✓ Notice of Intent</li><li>☐ Subsequent Report</li></ul>	Abandonment Recompletion Plugging Back Casing Repair	Change of Plans  New Construction  Non-Routine Fracturing			
Final Abandonment Notice	Altering Casing Other	Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well			
13 Describe Proposed or Completed Operations (Clearly state all per locations and measured and true vertical depths for all marker	rtinent details, and give pertinent dates, including estimated date of starting any ps and zones pertinent to this work )*				
	* REVISED *				
To be converted to water injection well as follows:		50 <b>2</b>			
1. RIH with 4 1/2" 11.6# J-55 casing and set at 3535'. Cement casing back to surface.		a. 31 - 31 - 31			
2. Selectively perforate the injection into		( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( )			
3. RIH with Baker AD-1 packer on 2 3/	8"(IPC) tubing and set at ±100' above top pe	erforation $\overset{\sim}{\omega}$			
4. Inject through perforations within injection interval.					
4. I hereby certify that the foregoing is true and correct signed	The Profession of the Control of the	Date August 7, 1996			
Conditions of approval, if any:  SUBJECT  LIKE APPRI  BY STATE	NMOCD	Date 8/20/96			
itle 18 U.S.C. Section 1001, makes it a crime for any person knowing my matter within its jurisdiction.	ly and willfully to make to any department or agency of the United States any fal	se, fictitious or fraudulent statements or representations as			