| Submit 3 Copies To Appropriate District Office | State of New | Mexico | | Form C-103 |
|---|---------------------------------------|--------------------------------|--------------------------------|---------------------------|
| District I | Energy, Minerals and N | atural Resources | | March 4, 2004 |
| 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | |
| <u>District II</u> 1301 W. Grand Ave., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | 30-045-32138 | - C.T. |
| District III | 1220 South St. Francis Dr. | | 5. Indicate Type of | |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe, NM 87410 Santa Fe, NM 87505 | | STATE [| FEE |
| District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 | Santa I O, I VIV | . 67505 | 6. State Oil & Ga SF-079082 | is Lease No. |
| SUNDRY NOTIC (DO NOT USE THIS FORM FOR PROPOSA | 7. Lease Name or | Unit Agreement Name | | |
| DIFFERENT RESERVOIR. USE "APPLICA | | | NORTHEAST E | RLANCO LINIT |
| PROPOSALS.) | | 15777 | 8. Well Nur | |
| 1. Type of Well: Oil Well Gas Well | Other | LICO WAY | 457A | |
| 2. Name of Operator DEVON E | NERGY CORP. | | 9. OGRID Numb | er |
| 3. Address of Operator | 10 | * | 9. Pool nam | ne or Wildcat |
| 1751 HIWAY 511 NAVAJO DAM | , NEW MEXICO 87419 | - V - 3 - χ | Basin Fruitla | nd Coal |
| 4. Well Location | ph. | 000000 | <i>j</i> | |
| | | | | |
| Unit LetterF :20 | 30feet from theNorth | Sine and | 585feet from the | Westline |
| Section 30 Townsh | | NMPM | County - SA | N JUAN |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6292' GL | | | | |
| Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached) | | | | |
| Pit Location: UL_FSect30_Twp31NRng7WPit typeWorkoverDepth to Groundwater_>_250_Distance from nearest fresh water well_>_300 | | | | |
| Distance from nearest surface water_>_300_ Below-grade Tank Location ULSectTwpRng; | | | | |
| feet from theline and | feet from the line | | | |
| | | | | _,,,,,, |
| | | | | |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data | | | | |
| NOTICE OF INT | | | SEQUENT RE | |
| PERFORM REMEDIAL WORK | PLUG AND ABANDON . | REMEDIAL WOR | к 🗆 | ALTERING CASING |
| TEMPORARILY ABANDON | CHANGE PLANS □ | COMMENCE DRI | LLING OPNS. | PLUG AND |
| PULL OR ALTER CASING | MULTIPLE | CASING TEST A | ND 🗆 | ABANDONMENT |
| | COMPLETION | CEMENT JOB | | |
| OTHER: CONSTRUCT WORKOVE | | ☑ OTHER: | | |
| 13. Describe proposed or comple | | | | |
| | k). SEE RULE 1103. For Mu | Itiple Completions: At | tach wellbore diagra | am of proposed completion |
| or recompletion. | | | | |
| 14. | ILL BE CONSTRUCTI | | DIZOVED DIT | A NID. XX/E |
| | | - · · · - | | |
| | LOSURE OF THE SAN | TE PIT IN ACCO. | RDANCE WIT | H GENERAL PLAN |
| SUBMITTED JUNE 4 | , 2004. | | | |
| | | | | |
| I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan. | | | | |
| SIGNATURE A | TITL | Company Represer | ntative | DATE 2/3/05 |
| | - | | | |
| Type or print name Kenny Rhoades | E-mail addi | ess: Kenny.rhoades@d | vn.com Teleph | one No. 505-320-6310 |
| (This space for State use) | | | | P == - |
| | | | TARAB BUTT RATE | FEB 10 2000 |
| APPPROVED BY CHIN | 1 took TITLE | eputy or a cas hisp | mentioned manage form | DATE |
| Conditions of approval, if any: | | | | |