

Submit 3 copies  
to Appropriate  
District Office

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-103  
Revised 1-1-89

OIL CONSERVATION DIVISION

District I

P.O. Box 1980, Hobbs, NM 88240

District II

P.O. Box Drawer DD, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

2040 Pacheco St.  
Santa Fe, NM 87505

Well API No. 30-045-27285

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

FEE

7. Lease Name or Unit Agreement Name

NEBU

8. Well No. NEBU #469

9. Pool name or Wildcat Basin Frtl Coal

SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR  
PLUG BACK TO A DIFFERENT RESERVOIR, USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

Oil Well ☐ Gas Well ☒ Other

2. Name of Operator Devon Energy Corporation

3. Address of Operator 3300 North Butler Ave. Suite 211 Farmington, NM 87401

4. Well Location

Unit Letter H: 1315 Feet From The North Line and 645 Feet From The East Line

Section 13 Township 30N Range R8W NMPM County: San Juan

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

6317' RKB

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG & ABANDON  
TEMPORARILY ABANDON ☐ CHANGE PLANS  
PULL OR ALTER CASING ☐  
OTHER: CBM Re-Cavitation ☒

SUBSEQUENT REPORT OF: X

☐ REMEDIAL WORK ☐ ALTERING CASING  
☐ COMMENCE DRILLING OPNS. ☐ PLUG & ABANDON  
CASING TEST & CEMENT JOB ☐  
☒ OTHER

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) See Rule 1103.

Re-cavitation operations commenced on 2/7/00 and ended on 2/28/00. The 5-1/2" uncemented, pre-perforated liner was installed. Top of liner hanger at 2937'. Bottom of liner bit shoe at 3211'. 2-3/8", 4.7#, J55 tubing set at 3183'.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: Lori Cave TITLE: Company Representative

DATE: 3/3/00

TYPE OR PRINT NAME Lori Cave

TELEPHONE NO. 505-324-0033

(This space for State Official Signature)

APPROVED BY ORIGINAL SIGNED BY CHARLIE T. PERREN TITLE DEPUTY OIL & GAS INSPECTOR, DIST. #2

CONDITIONS OF APPROVAL IF ANY:

MAR - 7 2000