

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

2040 Pacheco St.  
Santa Fe, NM 87505

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

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

Well API No. 30-045-25709
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6.State Oil & Gas LeaseNo. E-178-1
7. Lease Name or Unit Agreement Name Northeast Blanco Unit
8. Well No. NEBU #218
9. Pool name or Wildcat Basin Fruitland 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 Production Co., L.P.**

3. Address of Operator **3300 N Butler Ave., Suite 211, Farmington, New Mexico 87401**

4. Well Location  
Unit Letter: **D: 990 ft From the North Line and 990 ft From the West Line**

Section **16** Township **31N** Range **7W** NMPM County: **San Juan**

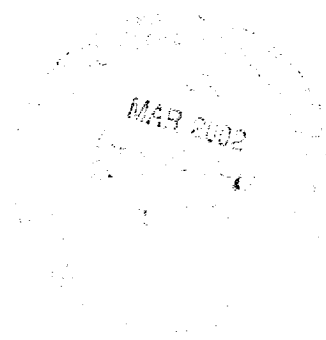
10. Elevation (Show whether DF, RKB, RT, GR, etc.)  
**6638 GL**

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG & ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	PLUG & ABANDON <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>		CASING TEST & CEMENT JOB <input type="checkbox"/>	
OTHER: _____		OTHER <b>Mechanical Integrity test</b> <input checked="" type="checkbox"/>	

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.

See attached.



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

SIGNATURE *Steve Zink* TITLE: Production Foreman DATE **3-26-02**  
TYPE OR PRINT NAME **STEVE ZINK** TELEPHONE NO. **505-324-0033**

(This space for State Use)  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL IF ANY:



**NEW MEXICO ENERGY, MINERALS  
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION  
AETEC DISTRICT OFFICE  
1000 RIO GRAZOS ROAD  
AETEC NM 87410  
(808) 834-4178 FAX: (808) 834-4179  
<http://em.nrd.state.nm.us/ocd/District/10/aetec.htm>

**MECHANICAL INTEGRITY TEST REPORT  
(TA or UIC)**

Date of Test 2/15/02 Operator Devon Energy API # 30-045-25709  
 Property Name North East Blanco Unit Well # 218 Location: Unit D Sec 16 Twn 31N Rge 7W  
 Land Type: State          Well Type: Water Injection           
 Federal  Salt Water Disposal           
 Private          Gas Injection           
 Indian          Producing Oil/Gas           
 Pressure observation

Temporarily Abandoned Well (Y/N): Yes TA Expires:         

Casing Pres. 18 Tbg. SI Pres.          Max. Inj. Pres.           
 Bradenhead Pres. 0 Tbg. Inj. Pres.           
 Tubing Pres. 18  
 Int. Casing Pres.         

Pressured annulus up to 560 psi. for 30 mins. Test passed/failed

REMARKS:  
Bleed csg to 0 psig. Start pumping fluid in w/ pump truck. Pressured up to  
560 psig. stopped pump. Immediately fell off to 430 psig.  
Bleed csg back to 0 psig. Pressured up again w/ pump truck to 580 psig.  
immediately fell off to 500 psig. Bleed csg OFF TO 0 psig. Re-pressured up to  
560 psig. let hold for 30 mins. After 30 mins pressure was 521 psig.

[Signature] Kyle Beebe  
 (Operator Representative)  
Field Administrator  
 (Position)

Witness          (NMOCD)

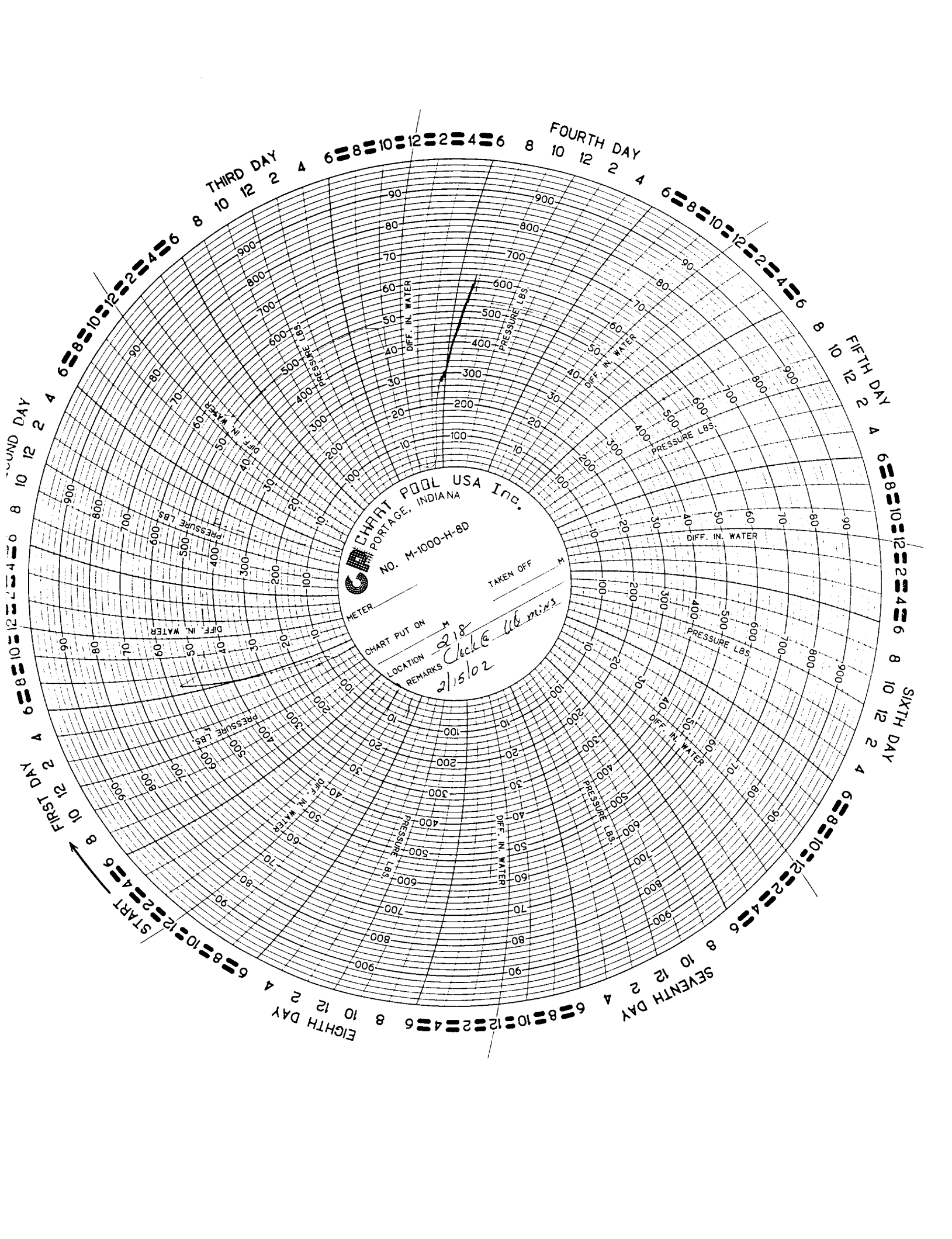


CHART POOL USA Inc.  
PORTAGE, INDIANA  
NO. M-1000-H-80

METER \_\_\_\_\_ TAKEN OFF \_\_\_\_\_  
CHART PUT ON \_\_\_\_\_  
LOCATION \_\_\_\_\_  
REMARKS 218  
Check @ 46 mins  
2/15/02

START  
FIRST DAY 2 4 6 8 10 12  
SECOND DAY 2 4 6 8 10 12  
THIRD DAY 2 4 6 8 10 12  
FOURTH DAY 2 4 6 8 10 12  
FIFTH DAY 2 4 6 8 10 12  
SIXTH DAY 2 4 6 8 10 12  
SEVENTH DAY 2 4 6 8 10 12  
EIGHTH DAY 2 4 6 8 10 12