Submit 3 conie

## **State of New Mexico Energy, Minerals and Natural Resources Department**

Form C-103

Revised 1-1-89

Submit 3 copies
to Appropriate
District Office

District I	OIL CONSE	RVATION D	IVISIC	N	Well API No.	30-045-27298	
P.O. Box 1980, Hobbs, NM 88240	2	040 Pacheco St.					
District H	Sar	ita Fe, NM 87505			5. Indicate Type of I	Lease	_
P.O.Box Drawer DD, Artesia, NM 882	10				STATE	FEE X	
District III					6.State Oil & Gas L	easeNo.	_
1000 Rio Brazos Rd., Aztec, NM 87410	0				E-3150-1		
SUND	RY NOTICES AND R	EPORTS ON WELL	S				
(DO NOT USE 1	THIS FORM FOR PROPOSA	LS TO DRILL OR TO DE	EPEN OR		7. Lease Name or U	nit Agreement Name	
PLUG BACK TO /	A DIFFERENT RESERVOIR	., USE "APPLICATION FO	R PERMIT"		NEBU		
	(FORM C-101) FOR SUC	H PROPOSALS.)			ļ		
1. Type of Weil:							
Oil Well Gas Well	Other O		<del> </del>			NEEDLE VARA	
	Energy Corporation				8. Well No.	NEBU #473	_
	rth Butler Ave. Suite 21	Farmington, NM 874	401		9. Pool name or W	/il Mesaverde/	
	eet From The NORTH	<del></del>			Country Con	Luca	
Section 36	Township 31N	Range R8V	<u>v</u>	NMPM	County: San	Juan	
	10. Elevation (Show whethe 6655' GL	r DF, RKB, RT, GR, etc.)					
11.	Check Appropriat	e Box to Indicate Natu	are of Notice	, Report, or O	ther Data		
NOTICE OF INT	ENTION TO:		SUBS	SEQUENT RE	PORT OF:		
PERFORM REMEDIAL WORK	PLUG & ABANDON	REMEDIAL WORK		<u> </u>	LTERING CASIN	₹G 📙	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRIL		PI	.UG & ABANDO		
PULL OR ALTER CASING		CASING TEST & C	CEMENT JOB				
OTHER: CBM Re-Cavitation		X OTHER					
12. Describe Proposed or Completed Operation work) See Rule 1103.  Devon Energy proposes to hole. Re-cavitate open hole workover rig (open hole) proposes.	clean out and remo	ve 5-1/2" liner. Prowell bore coal mate	essure test erial. Re-i	7" casing to nstall 5-1/2"	o 500 psi. U ' liner. Use a		n
Therby certify that the information about	ve is true and complete to the	best of my knowledge and	belief.	the bigger		<u>.                                    </u>	
SIGNATURE www.	<b>₩\</b> 111	TLE: <u>COMPANY REPRE</u>	<u>SENTATIV</u> E	DATE <u>1/8/</u>	02		
TYPE OR PRINT NAME	JOHN FREIER		<u> </u>	TELEPHONE N	O. 505-324-0	0033	
APPROVED BYCONDITIONS OF APPROVAL IF A	-	TITLE	INSPECTOR,	BIST. SAHE	N - 9 20	02	