

District I
P. O. Box 1988, Hobbs, NM 88240
District II
P. O. Drawer DD, Artesia, NM 88210
District III
1000 Rio Brazos Rd. Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Well API NO.	30-015-33293
5. Indicate Type of Lease	<input checked="" type="checkbox"/> State <input type="checkbox"/> Fee
6. State Oil & gas Lease No.	
7. Lease Name or Unit Agreement Name	Eddy FT State Com
8. Well Number	3
9. Ogrid Number	169355
10. Pool Name or Wildcat	

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	<input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator	DEVON LOUISIANA CORPORATION
3. Address and Telephone No.	20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-228-8209

4. Well Location	Unit Letter <u>E</u> <u>1570</u> feet from the <u>NORTH</u> line and <u>660</u> feet from the <u>WEST</u> line
	Section <u>26</u> <u>20S</u> Township <u>27E</u> Range <u>NMPM</u> <u>Eddy</u> County
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	3307 GL

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: <input type="checkbox"/> PERFORM REMEDIAL WORK <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> Other _____	SUBSEQUENT REPORT OF: <input type="checkbox"/> REMEDIAL WORK <input checked="" type="checkbox"/> COMMENCE DRILLING OPN <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER _____

13. 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.
For Multiple Completions: Attach wellbore diagram or proposed completion or recompletion. If a pit or below-grade tank is involved in the operation, complete the reverse side of this form.

04/17/04 Spud 17 1/2" hole
04/18/04 Ran 11 jts 13 3/8" 48# H40 ST&C csg @ 508'. Cmt lead w/180 sx Class H, tail w/250 sx Class C. No returns. Run temp survey TOC @ 350'. RIH w/1". Tag cmt @ 361' - pump plug #1 - 50 sx Class C, WOC 2 hrs. Tag cmt @ 335' - pump plug #2 25 sx CI C, WOC 1 1/2 hrs Tag cmt @ 321' pump plug #3 25 sx CI C, WOC 1 1/2 hrs
04/19/04 Tag cmt @ 301', pump plug #4 25 sx CI C, WOC 1 1/2 hrs Tag cmt @ 255', pump plug #5 50 sx CI C, WOC 1 1/2 hrs, Tag cmt @ 176 pump plug 6 192 sx CI C, Circ 3 bbls to surface, WOC 18 hrs Test to 1000 psi Held
04/23/04 TD 12 1/4" hole @ 2203'. Ran 49 jts 9 5/8" J55 36# ST&C csg @ 2202'. Cmt lead w/250 sx Class h, tail w/500 sx 35:65 Pozmix C.
04/24/04 Ran temp survey-TOC @ 820'. TIH w/1", tag cmt @ 615'. Pump 297 sx CI C. Circ 20 sx to surf. WOC 18 hrs. Test to 3000 psi -held
05/14/04 TD 8 3/4" hole @ 11275. Circ & cond hole for logs
05/17/04 Ran 255 jts 5 1/2" P110 17# LT&C csg @ 11293. Cmt lead w/668 sx Class C, circ out 106 sx. 2nd stage cmt w/1935 sx 60:40 Poz off DV tool
05/18/04 Released rig.

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

SIGNATURE Linda Guthrie TITLE Regulatory Specialist DATE 5/24/2004
Type or Print name Linda Guthrie E-mail Address: linda.guthrie@dvn.com Telephone No. 405-228-8209
(This space for State use)

FOR RECORDS ONLY

APPROVED BY _____ TITLE _____ DATE JUN 02 2004

Conditions of approval, if any: