Form 3160-5 (June 1990)

to any matter within its jurisdiction.

## UNITED STATES N.M. DIV-Dist. 2 DEPARTMENT OF THE INTERIOSO1 W. Grand Avenue BUREAU OF LAND MANAGEMEN Artesia, NM 88210

FORM APPROVED Budget Bureau No. 1004-0135

SUNDRY NOTICES  Do not use this form for proposals to drill o  Use "APPLICATION FO	5. Lease Designation and Serial No.  LC029387A  6. If Indian, Allottee or Tribe Name							
SUBMIT								
1. Type of Well  Oil  Well  Gas  Well  Other	20122224252	7. If Unit or CA, Agreement Designation						
2. Name of Operator DEVON ENERGY PRODUCTION COMPA	(5)	8. Well Name and No. West Shugart 29 Federal #4						
Address and Telephone No.     20 NORTH BROADWAY, SUITE 1100, OF	CLAHOMA CITY, OKLAHOMA 73102 (406) 228-7512  Description)	9. API Well No. 30-015-30870						
4. Location of Well (Footage. Sec., T., R., M., or Survey I 822' FSL & 2310' FWL, Sec 29, 18S 31E	10. Field and Pool, or Exploratory Area  West Shugart Delaware  11. County or Parish, State  Eddy, Nm							
TYPE OF SUBMISSION	) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA						
Notice of Intent	Abandonment	Change of Plans						
Subsequent Report	Recompletion Plugging Back	New Construction Non-Routine Fracturing Water Shut-Off						
Final Abandonment Notice	Final Abandonment Notice  Casing Repair  Altering Casing  Other							
13. Describe Proposed or Completed Operations (Clearly state all p subsurface locations and measured and true vertical depths	pertinent details, and give pertinent dates, including estimated date of starting ang for all markers and zones pertinent to this work.)*	Completion or Recompletion Report and Log form.)  y proposed work. If well is directionally drilled, give						
We respectfully request approval to TA the well for 180 days. We are currently doing an extensive Geological evaluation of our properties in Eddy County. The Shugart area is the next area to be studied. We are looking at deeper horizons first - Morrow and Atoka, but will also be looking at shallower pays. A quick review of the logs indicates that we may have recompletion potential in the Bone Springs and/or the Delaware intervals. Within 180 days, we will either propose a recompletion of the well, or we will submit a plugging procedure.								
Approved les								
Ending 2125704								
3								
14. I hereby certify that the foregoing is true and correct	Karen A. Cottom	August 25, 2002						
(This space for Federal or State office use)	Title Operations Technician	Date August 25, 2003						
Approved by Conditions of approval, if any:	Title & Charles of the Control of th	Date 10/22/03						
	Car A Carlotte and							

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and will any to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as

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Date

Assessment

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Number	03-PS-020			
Page	5	of	5	

Identification

IID: NMLC29387A

Lease: W SHUGART 29 FED

**************************************			NOTICE OF WRITTEN ORDER					API: 30 015 30870 Unit: PA:		
Bureau of Land Management CARLSBAD FIELD OFFICE				Operator DEVON ENERGY PRODUCTION COMPANY LP						
Address 62	Address 620 EAST GREEN STREET				Add	ress P.O.BO	X 250			
Inspector	ARLSBAD.	NM 88 Teleph			Atte	ARTESI ntion	A. NM 8821	1-025	50	
SWARTZ	1 37/ 11		505-234-5		Ĺ.,		T 3 (	т	Countri	
Site Name W SHUGART 29	Well NO. 4		1/4_1/4_Sec. SESW 29	Township 18S		Range 31E	Meridian NMP		County EDDY	State NM
The following	ng condition(s)	were t	found by Bureau	ı of Land Mana	geme	ent Inspectors (	on the date an	d at th	ne site(s) listed at	oove.
Date T	ime (24 – hour clock)		) Corrective Action To Be Completed		d By	By Date Corrected		Authority Reference		
07/23/2003	13:30					43 CFR 3162.3-4(c)				
When violation is corrected		- ,		ldress.	<u> </u>	. 0			<u> </u>	az las
Company Comments	1	to-	cicl	Signature			C+16Y		Date 0	
The Authorized Officer hereceipt of this Notice and reports to be Completed by", you assessments as outlined in next business day after the Section 109(d)(1) of the F43 CFR 3163.2(f)(1), prooffidavits, record, data, oviolation continues, not to A person contesting a vioreceipt of the Incidents of Interior Board of Lands A Management office for full services of the Incidents of Interior Board of Lands A Management office for full services of the Incidents of Interior Board of Lands A Management office for full services of the Incidents of Interior Board of Lands A Management office for full services of the Incidents of Interior Board of Lands A Management office for full services of the Incidents of Interior Board of Lands A Management of Interior Board of	business days and to the Bureau shall be issued in 43 CFR 3163 be prescribed time federal Oil and povides that any prother written is exceed a maxulation shall requippeals, 801 Nouther informatic	after the unit of Lard an Inc. I and the Inc. I and the Inc. I and I a	e date it is mailed and Management (cident of Noncommay also incur cine for correction.  Dyalty Manageme who "knowingly cition required by tof 20 days.  State Director revisite appropriate String Street, Suite (cident)	nccordance with a l, whichever is econfice at the addipliance (INC) in vil penalties (43 and Act of 1982, cor willfully" preports part shall be Review and Act of the Incidentate Director (see	arlier. ress sh accord CFR 3 as impares, n liable Appea	Each stipulation above. If dance with 43 C 163.2). All self lemented by the naintains, or sulfor a civil penal I Rights Noncompliance. FR 3165.3). Th	n must be correctly ou do not comp. FR 3163.1(a). If certified correctly applicable provenits, false, inactly of up to \$25,6.  This request me e State Director	ted with ply as no Failure ions musions curate, 000 per ust be review act the control of the con	hin the prescribed noted above under to comply with the ust be postmarked of the operating report of the operation for each of the operation	I time from receipt or "Corrective Action of the INC may result in a no later than the regulations at Title oports, notices, ch day such orking days of appealed to the au of Land
Signature of Bureau of Lan	d Management	Tutkoriz	_					Date	1/25/27	Time 1400
1	<u> </u>			FOR OFFIC	E USE	ONLY				

Penalty

Termination

Type of Inspection