

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.I. Cons. Division  
811 S. 1st Street  
Artesia, NM 88210-2834

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.

SUBMIT IN TRIPLICATE

1. Type of Well  
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator  
DEVON ENERGY CORPORATION (NEVADA), Wally Frank X4582

3. Address and Telephone No.  
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611

4. Location of Well (Footage. Sec., T., R., M., or Survey Description)  
SHL: 1320' FSL & 2323' FWL, Lot 10, Section 20-21S-26E, Eddy County, NM  
Revised BHL: 1677' FSL & 2007' FWL, Unit K, Section 20-21S-26E, Eddy County, NM

5. Lease Designation and Serial No.  
SHL & BHL: NM-NM84-B

6. If Indian, Allottee or Tribe Name  
N/A

7. If Unit or CA, Agreement Designation  
N/A

8. Well Name and No.  
ARCO "20" FEDERAL COM. #2

9. API Well No.  
30-015-30599

10. Field and Pool, or Exploratory Area  
Avalon (Morrow)

11. County or Parish, State  
Eddy County, New Mexico

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Spud, running casing strings, WOCU
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

\*\*\*Please note the bottom hole location has been amended after drilling.\*\*\*

This well spud on 05-12-1999 at 1600 hrs and drld a 17 1/2" hole to 451'. On 05-13-1999 ran 11 jts 13 3/8" 48# H-40 ST&C csg, set at 451'; cemented w/137 sx 35/65/6 Pozmix "C" + 300 sx Class "C" + topped w/10 yds Redi-Mix; TOC at surface. WOC 22 hrs.

Drld 12 1/4" hole to 2121'. On 05-17-1999 ran 49 jts 9 5/8" 36# J-55 LT&C csg, set at 2121'; cemented w/690 sx 35/65/6 Pozmix "C" + 220 sx Class "C" + topped w/5 yds Redi-Mix; TOC at surface. WOC 22 hrs. Began drlg 8 3/4" hole. Ran kickoff assembly at 5700'. On 06-05-1999 ran DST 9889-9920' (open hole Strawn). TOH with packer. Reached TD 11,321' MD (11,285' TVD) at 2400 hrs 06-12-1999. Schlumberger ran Platform Express Azimuthal Laterlog/Natural GR and Compensated Neutron/Three Detector Density/NGT logs.

On 06-16-1999 ran 261 jts 7" 26# L-80 and 23# J-55 LT&C csg, set at 11,320' w/DV tool at 6493'; cemented w/575 sx Pozmix "H" + 1450 sx Pozmix "C" + 100 sx Class "H"; preceded cement w/Surebond-2% KCl; TOC calc at 1800'.

Released rig at 1200 hrs 06-17-1999. WOCU.

14. I hereby certify that the foregoing is true and correct

Signed Candace R. Graham  
(This space for Federal or State office use)

Candace R. Graham

Title Engineering Technician

Date July 7, 1999

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title

Date

(ORIG. SGD.) DAVID R. GLASS

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

\*See Instruction on Reverse Side

