

Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 811 South First, Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 2040 South Pacheco, Santa Fe, NM 87505

RECEIVED
 State of New Mexico
 Energy, Minerals and Natural Resources
 MAY 22 2003
 OIL CONSERVATION DIVISION
 2040 South Pacheco
 Santa Fe, NM 87505

Form C-103
 Revised March 25, 1999

WELL API NO. 30-045-31367
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name: NORTHEAST BLANCO UNIT
8. Well No. 410A
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.

Address of Operator:
 20 North Broadway, Oklahoma City, OK 73102
 Attn: Diane Busch

3. Well Location
 Unit Letter I: 1535 feet from the South line and 1275 feet from the East line.
 Section: 9 Township 31N Range 7W NMPM County San Juan
 10. Elevation (Show whether DR, RKB, RT, GR, etc.)
 6601' 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 AND 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 AND ABANDONMENT <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>	CASING TEST AND CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>		OTHER: Spud Well <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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.

The above referenced well spud on 5/17/03.



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

SIGNATURE Diane Busch TITLE Sr. Operations Technician DATE 5/19/03

Type or print name Diane Busch Telephone No. (405) 228-4362

(This space for State use) Chah R. DEPUTY OIL & GAS INSPECTOR, DIST. 3 JUN - 9 2003

APPROVED BY Chah R. TITLE _____ DATE _____

Conditions of approval, if any: