Submit 3 Copies To Appropriate District Office	State of New Mexico			•	Form C	
District I	Energy, Minerals and Natural Resources			N-0	Revised March 25	5, 1999
1625 N. French Dr., Hobbs, NM 88240 District II		WELL API 1 30-045-3139				
811 South First, Artesia, NM 88210	OIL CONSERVATION	5. Indicate		Lease		
District III 1000 Rio Brazos Rd., Aztec, NM 87410	2040 South Pacheco		STAT		FEE	
District IV	Santa Fe, NM 87505				Lease No.	
2040 South Pacheco, Santa Fe, NM 87505						
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:			Lease Name or Unit Agreement     Name:  NORTHEAST BLANCO UNIT			
Oil Well Gas Well Other:  2. Name of Operator: Devon Energy Production Co. L.P.			8. Well No			
2. Name of Operator. Devon Energy Froduction Co. L.F.			5. Well No.			
Address of Operator:			Pool name or Wildcat:			
1751 Hwy 511 Navajo Dam, NM 87419 Attn: Kenny Rhoades			Basin Fruitla			
3. Well Location		· · · · · · · · · · · · · · · · · · ·				
3. Well Location						
Unit Letter C: 1020 fee	et from the North line and 1420	) feet from the West	line.			
Section: 16	Township 31N Range			unty Sa	n Juan	
	10. Elevation (Show whether D	PR, RKB, RT, GR, etc	c.)			
11. Check A	ppropriate Box to Indicate N	lature of Notice,	Report or O	ther Da	ata	K. 824
			SÉQUENT			
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WOR			ALTERING CASI	NG□
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRI	ILLING OPNS.		PLUG AND ABANDONMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION	CASING TEST AI CEMENT JOB	ND			
OTHER:						
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 was spu-	d on 11/20/2003.					
			910111273			
		for	DEC 2003		•	
		m Oz		8197		
			4.07. 3			
		₩.	202	ر کورا		
I hereby certify that the information	above is true and complete to the	best of my knowled	ge and belief.	<u>~</u>		
SIGNATURE / Mu	TITLE	Company Rep	_DATE_	12-1	(V-0)	
Type or print name Kenny Rh	oades	Telephone No. (5	505) 320-6310			
(This space for State use)  APPPROVED BY  Chall  TITLE  DEPUTY OIL & GAS INSPECTOR, DIST. BE DATE  DATE  DEC 1 2 2003						
Conditions of approval, if any:						

V