

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

FORM APPROVED
 Budget Bureau No. 1004-0135
 Expires: September 30, 1990

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill, 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**

3. Address of Operator: **3300 N. Butler Avenue, Suite 211, Farmington, NM 87401**

4. Location of Well: (Footage, Sec., T., R., M., or Survey Description)

810' FNL, 1530' FEL, Section 12, T31N, R7W

5. Lease Designation and Serial No.
NM 03358

6. If Indian, Allottee or Tribe Name

7. If Unit or CA. Agmt. Design.:
Northeast Blanco Unit

8. Well Name and No.:
N.E.B.U. #492

9. API Well No.:
30-045-27660

10. Field & Pool/Exploratory Area:
Basin Fruitland Coal

11. County or Parish, State:
San Juan, New Mexico

12. 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 type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion <input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back <input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair <input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing <input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other: CBM Re-Cavitation
	(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.)*

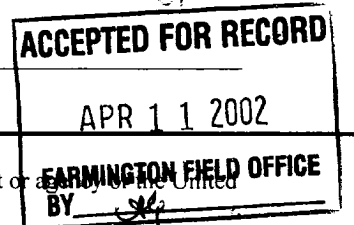
Re-cavitation operations commenced on 3-1-02 and ended on 4-4-02. Pressure tested 7" casing before operations began. The 5-1/2" uncemented pre-perforated liner was installed. Top of liner hanger at 2980' KB. Bottom of liner bit shoe at 3311' KB. 2-3/8" tubing set at 3302' KB.

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

Signed: Steve Zink **STEVE ZINK** Title: **COMPANY REPRESENTATIVE** Date: 4-5-02

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
 Conditions of approval, if any:



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 as to any matter within its jurisdiction.