

NMN

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000**SUNDRY NOTICES AND REPORTS ON WELLS**
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*5. Lease Serial No.
NMNM0428854

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side.7. If Unit or CA/Agreement, Name and/or No.
NMNM70798A8. Well Name and No.
BURTON FLAT DEEP UNIT 89. API Well No.
30-015-20959-00-S110. Field and Pool, or Exploratory
BURTON FLAT11. County or Parish, and State
EDDY COUNTY, NM1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator
DEVON LOUISIANA CORP
Contact: LINDA GUTHRIE
E-Mail: linda.guthrie@dvn.com3a. Address
20 NORTH BROADWAY SUITE 1500
OKLAHOMA CITY, OK 73102-82603b. Phone No. (include area code)
Ph: 405.228.8209
Fx: 405.552.46214. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 27 T20S R28E SWSE 660FSL 1980FEL

OCT 28 2004

OOD-ARTERIA

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Devon Louisiana Corporation respectfully requests approval to recomplete as follows:

1. MIRU workover rig. ND tree, NU BOP. RIH w/ GR to approximately 8500' to ensure casing is clear for perforating.
2. MIRU Wireline company. Run CBL log from 8500' to surface to determine cement integrity.
3. RIH w/ perforating guns and perforate Bone Spring formation from 8156' - 8166'.
4. RIH w/ 2 7/8" tubing and flow/swab well to determine if zone is commercially productive.

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

Electronic Submission #50361 verified by the BLM Well Information System
For DEVON LOUISIANA CORP, sent to the Carlsbad
Committed to AFMSS for processing by LINDA ASKWIG on 10/25/2004 (05LA0044SE)

Name (Printed/Typed) LINDA GUTHRIE

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 10/25/2004

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By ALEXIS C SWOBODA

Title PETROLEUM ENGINEER

Date 10/26/2004

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office Carlsbad

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

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SUBMIT IN TRIPLICATE - Other instructions on reverse side.

7. If Unit or CA/Agreement, Name and/or No.
NMNM70798A

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

8. Well Name and No.
BURTON FLAT DEEP UNIT 8

2. Name of Operator
DEVON LOUISIANA CORP

Contact: LINDA GUTHRIE
E-Mail: linda.guthrie@dvn.com

9. API Well No.
30-015-20959-00-S1

3a. Address
20 NORTH BROADWAY SUITE 1500
OKLAHOMA CITY, OK 73102-8260

3b. Phone No. (include area code)
Ph: 405.228.8209
Fx: 405.552.4621

10. Field and Pool, or Exploratory
BURTON FLAT

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

Sec 27 T20S R28E SWSE 660FSL 1980FEL

OCT 28 2004

RECEIVED

11. County or Parish, and State

EDDY COUNTY, NM

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1. MIRU pulling unit, RIH and drill out CIBP's at 9082' and clean well out to 10,275'.
2. RIH with 5" HSC perforating guns to perforate Strawn from 10164' - 10180' at 6 spf.
3. POOH with WL, RIH with 2-7/8" tubing carrying two 7" packers to isolate existing Wolfcamp perforations located at 9197' - 9204'.
4. Swab well in and acidize Strawn depending on swab results. Return well to production.

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

Electronic Submission #30995 verified by the BLM Well Information System
For DEVON LOUISIANA CORP. sent to the Carlsbad
Committed to AFMSS for processing by ARMANDO LOPEZ on 05/24/2004 (04AL0177SE)

Name (Printed/Typed) LINDA GUTHRIE

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 05/20/2004

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

CANCELLED

ALEXIS C SWOBODA
Title PETROLEUM ENGINEER

Date 10/26/2004

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Office Carlsbad

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