

Submit 3 Copies To Appropriate District Office
District I
1626 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
May 27, 2004

WELL API NO. 30-018-28181
5. Indicate Type of Lease STATE <input type="checkbox"/> <input checked="" type="checkbox"/> AUG 05 2006 RECEIVED
6. State Oil & Gas Lease No. OCD - ARTESIA
7. Lease Name or Unit Agreement Name West Red Lake Unit
8. Well Number 42
9. OGRID Number 6137
10. Pool name or Wildcat Red Lake Queen Grayburg San Andres

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> Temporary Abandon	
2. Name of Operator Devon Energy Production Company, LP	
3. Address of Operator P. O. Box 250 - Artesia, NM 88211-0250	
4. Well Location Unit Letter O; 330 feet from the South line and 1650 feet from the East line Section 7 Township 18S Range 27E NMPM Eddy County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3282' GR	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Temporary Abandon & MIT Test <input checked="" type="checkbox"/>
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13. 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 recompletion.

7-29-31-2006 - Moved in and rigged up pulling unit. Nipped up BOP. TIH with CIBP and set CIBP at 1047'. Rigged up pump truck and chart recorder. Performed Mechanical Integrity Test. Leaked off 60#. Retested CIBP to 1500#, held okay. Tested casing at 800' to 600# and held for 30 minutes. Set packer at 697'. Held 600# for 30 minutes. Set packer at 377' - would not test. Set packer at 567' and tested to okay. Set packer at 500' and tested okay. Set packer at 377' and tested okay. Set packer at 190' and tested okay. Set packer at 124' and tested okay. Set packer at 60' and tested okay. Set packer at 30' and tested okay. Set packer at surface and tested okay. Rigged up pump truck and chart recorder for Mechanical Integrity Test. Pressured up on casing to 530# for 30 minutes, held okay. NOTE: Lost 5# in 30 minutes. Rigged down pump truck and chart recorder. Rigged down pulling unit. TEMPORARILY ABANDONED 7-28-2006.

APPROVED INTENT Requested CIBP to be set @ 1377'

Please see attached chart for Mechanical Integrity Test conducted on 7-28-2006.

Temporary Abandoned Status approved
Date **7-28-07**

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Rusty Klein TITLE Field Tech II DATE August 1, 2006

Type or print name Rusty Klein E-mail address: rusty.klein@dvni.com Telephone No. 505-748-3371

For State Use Only

APPROVED BY: [Signature] TITLE _____ DATE **AUG 09 2006**
Conditions of Approval (if any): _____

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AUG 2008
RECEIVED
OCD - ARTESIA

