| Submit 3 Copies To Appropriate District Office  | State of New Mexico  |                          | Form C-103   |                                    |
|---|--|--------------------------|--|------------------------------------|
| District 1  | Energy, Minerals and Natural Resources   |                          |  | May 27, 2004                       |
| 1625 N. French Dr., Hobbs, NM 88246   |  |                          | WELL API NO.   |                                    |
| District II 1301 W. Grand Ave., Artesia, NM 88  | OIL CONSERVATION DIVISION  |                          | 30-015-00284<br>5. Indicate Type                           | of Loosa                           |
| District III  | 1220 South St. Francis Dr.   |                          | STATE  |                                    |
| 1000 Rio Brazos Rd., Aztec, NM 874<br>District IV   | Santa Fe, NM 87505   |                          | 6. State Oil & G   |                                    |
| 1220 S. St. Francis Dr., Santa Fe, NM   | District Control of the Control of t |                          |  | as news item                       |
| 87505   | 7 Loosa Nama a   | or Unit Agreement Name   |  |                                    |
| SUNDRY NOTICES AND REPORTS ON WELLS  (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO  |  |                          | 7. Lease Name or Unit Agreement Name Atoka San Andres Unit |                                    |
| DIFFERENT RESERVOIR. USE "APPLICA   | TION FOR PERMIT" (FORM C-101) FOR  | RSUCH                    | 8. Well Number   |                                    |
| PROPOSALS.)  1. Type of Well: Oil Well  | Gas Well  Other  | Month - Year             | 133  |                                    |
| 2. Name of Operator   |  |                          | 9. OGRID Numl  | her                                |
| 2. Name of Operator  Devon Energy Production Company, LP  |  | 6137                     |  |                                    |
| 3. Address of Operator  |  | 10. Pool name or Wildcat |  |                                    |
| 20 North Broadway, Oklahoma City, OK 73102-8260 (405) 552-8198  |  |                          | San Andres   |                                    |
| 4. Well Location  |  |                          |  |                                    |
| Unit LetterD:_990_feet from the North line and990 feet from the _Westline   |  |                          |  |                                    |
| Section 14  |  | Range 26E                | NMPM   | County Eddy                        |
| L   | 11. Elevation (Show whether DR,  |                          |  |                                    |
| 3329' GR  |  |                          |  |                                    |
| Pit or Below-grade Tank Application or Closure  |  |                          |  |                                    |
| Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance 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: SUBSEQUENT REPORT OF:   |  |                          |  |                                    |
| PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING  |  |                          |  |                                    |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. PAND A   |  |                          |  |                                    |
| PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   |  |                          |  |                                    |
| OTHER: TA STATUS  | $\boxtimes$  | OTHER                    |  | П                                  |
| 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.  |  |                          |  |                                    |
|   |  |                          |  |                                    |
|   |  |                          |  |                                    |
| Development Development Commen  | I D saas attilli, saas atta aa   |                          | -  | ACALLia avacated to                |
| Devon Energy Production Company, LP respectfully requests an extension of our TA status. As the ASAU is expected to produce for quite some time, the potential usefulness of this well will also be ongoing. This well is in our waterflood area. |  |                          |  |                                    |
| Therefore, this well has disposal utility should one of our other disposals fail. As this situation is not expected to change, we   |  |                          |  |                                    |
| are requesting a longer term temporary abandonment status   |  |                          |  |                                    |
|   |  |                          |  |                                    |
| TA Status will be approved only upon receipt of Final C-103 and a witnessed   |  |                          |  |                                    |
|   |  |                          | otify OCD 24 hou   |                                    |
| testing.  |  |                          |  |                                    |
|   |  |                          |  |                                    |
|   |  |                          |  |                                    |
|   |  |                          |  |                                    |
|   |  |                          |  |                                    |
| I hereby certify that the information at  | ove is true and complete to the bes  | st of my knowledge       | e and belief. I furth<br>or an (attached) alter            | her certify that any pit or below- |
| grade tapk has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.  |  |                          |  |                                    |
| SIGNATURE   | TITLE SI   | r. Staff Engineerii      | ng Technician  | DATE_2/27/06                       |
|   |  | _                        |  |                                    |
| Type or print name Norvella Adam  | ns E-mail address: norvella.a  | dams@dvn.com             | Telephone No.  | (405) 552-8198                     |
| For State Use Only  |  | استيا                    | sor record   |                                    |
| APPROVED BY:  | TITLE  | Accepted                 | 000  | DATE                               |
| Conditions of Approval (if any):  | ^*********************************   | MM                       | <del>~~/                                   </del>          |                                    |
| 11 - ()   |  |                          | /  |                                    |