

Submit 3 Copies
to Appropriate
District Office

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-103
Revised 1-1-89

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

NOV 1 - 89

WELL API NO.

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No. B-936

7. Lease Name or Unit Agreement Name
Etz State Unit (Tr 3)

8. Well No. 6

9. Pool name or Wildcat
Grayburg J-SR-B-6-SA

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 ☒ GAS WELL ☐ OTHER ☐	
2. Name of Operator Devon Energy Corporation	
3. Address of Operator 1500 Mid-America Tower, Okla. City, OK 73102	
4. Well Location Unit Letter <u>N</u> : <u>990</u> Feet From The <u>South</u> Line and <u>1650</u> Feet From The <u>West</u> Line Section <u>16</u> Township <u>17S</u> Range <u>30E</u> NMPM <u>Eddy</u> County	
10. Elevation (Show whether DF, RKB, RT, GR, etc.) <u>3665 GR</u>	

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☒ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: Plug Back to Grayburg-Changelump ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
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.

Note: 5 1/2 csg set at 4048 ft. Top San Andres perf at 2886 ft. Bottom Grayburg perf at 2768 ft.
1. MIRU pulling unit. Pull rods & pump. Shop pump for repairs. Install BOPs. Pull tbg.
2. Run csg scraper to 2890 ft. Set CIBF at 2870 ft. Dump 35 ft of cmt on top.
3. Run tbg, rods & pump. Hang well back on. Return to production.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

TITLE

District Engineer

DATE

10-31-89

TYPE OR PRINT NAME

J.M. Duckworth

TELEPHONE NO.

(405) 235-3611

(This space for State Use)

APPROVED BY

MAJ Williams

TITLE

SUPERVISOR, DISTRICT II

DATE

NOV 6 1989

CONDITIONS OF APPROVAL, IF ANY: