

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division

311 S. ...

Artesia, NM 87003-2834 **FORM APPROVED**

Budget Bureau No. 1004-0135
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to 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 (NEVADA)

3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
990' FNL & 1980' FEL, Unit B, Sec. 7-18S-27E

5. Lease Designation and Serial No.
NM-7718

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
West Red Lake Unit 8910089700

8. Well Name and No.
West Red Lake Unit #7

9. API Well No.
30-015-00805

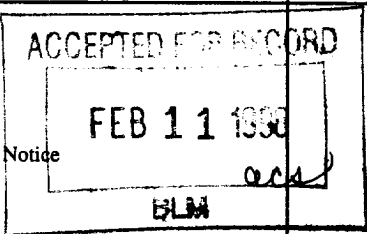
10. Field and Pool, or Exploratory Area
Red Lake (Q-GB-SA)

11. County or Parish, State
Eddy County, NM

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 checked="" type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<input type="checkbox"/> Dispose Water

(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.)*

Administrative Order #WFX-726

Work began on 1/15/98. TIH w/RBP, set @ 1200'. Set pkr @ 1000'. Pumped into Premier perms @ 5 bpm @ 1700 psi. Tstd backside to 500#, okay. TOOH w/tbg & pkr, dmpd 2 sxs sd on RBP. TIH w/tbg, tagged sd @ 1187'. TIH w/ret on 2-3/8" tbg, set ret @ 1009'. BJ squeezed Premier Perfs 1103-1115' w/100 sxs cl "C" cmt. TOOH w/tbg & setting tl. TIH w/bit, DC's & tbg, Drld ret @ 1009', drld cmt to 1130'. Tstd squeeze perms 1103-1115' to 500#, held okay. TOOH w/tbg & RBP. RU Wedge WL & Perf'd San Andres w/lspf @ 1648', 50', 52', 54', 56', 62', 64', 66', 68', 70', 72', 74', 76', 78', 80', 82', 1789', 92', 94', 96', 98', 1800', 02', 04', 06', 08', & 1810; for a total of 27 holes. TIH w/fullbore pkr and set pkr @ 1547'. Acidized San Andres perms 1648-1810' w/5000 gals 15% NEFE acid w/2000# rock salt. ISIP 618#. TIH w/Baker J-loc Nickle plated pkr on 2-3/8" IPC tbg, set pkr @ 1552'. Ran MIT test to 320#, okay. Notified OCD (Ray Smith). Well began injection on 1/22/98.

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

Signed Diana Keys
(This space for Federal or State office use)

Diana Keys

Title Engineering Technician

Date 1/29/98

Approved by _____
Conditions of approval, if any:

Title _____

Date _____