

CISF
08

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

WELL API NO. 30-015-00812
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No. 8910089700
7. Lease Name or Unit Agreement Name West Red Lake Unit
8. Well No. 10
9. Pool name or Wildcat Red Lake QN, Grbg, 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 Production Co. LP.

3. Address of Operator
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611

4. Well Location
Unit Letter **J**: **2310'** Feet From The **South** Line and **1650'** Feet From The **East** Line

Section **7** Township **18-S** Range **27-E** NMPM County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3311' DF

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: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: **TA Set CIBP & Test** ☒

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.

9/1/01 MIRU.

Pick up tbg RIH w/bit & scraper to 1050'. POH w/bit & scraper.

TIH w/CIBP set at 990'. Circulate hole w/packer fluid.

POH w/workstring laying down. Flange up wellhead.

Run MIT test to 500 psi run 30 min chart ok.

RDMO.

See Attached chart.



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

SIGNATURE *Josie Paul*

TITLE ENGINEERING TECHNICIAN

DATE 9/21/01

TYPE OR PRINT NAME Josie Paul

TELEPHONE NO. (505) 748-3371

(This space for State use)

Approved by *[Signature]*
Conditions of approval, if any:

TITLE Compliance Officer

DATE 10/03/01