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dp

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

DISTRICT II
P.O. Drawer D11, Artesia, NM 88210

DISTRICT III
1000 no Brazos Rd, Aztec, NM 87410

OIL CONSERVATION DIVISION

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

WELL API NO.
30-015-28199

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
NM-7720

7. Lease Name or Unit Agreement Name
West Red Lake

8. Well No.
40

9. Pool name or Wildcat
Red Lake (Q-G-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 (NEVADA)

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

4. Well Location
Unit Letter N 330 Feet From The south Line and 1650 Feet From The west Line

Section 7 Township 18S Range 27E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
GL 3277'

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: APD extension ☒

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.

The Application for Permit to Drill the West Red Lake Unit #40 was approved November 23, 1994.

At this time Devon Energy Corporation (Nevada) requests an extension of one year to drill this well.

RECEIVED

OCT 16 1995

OIL CON. DIV.
DIST. 2

APPROVAL VALID FOR 11/23/95 DAYS
PERMIT EXPIRES 11/23/95
UNLESS DRILLING UNDERWAY

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

SIGNATURE Candi R. Graham

TITLE ENGINEERING TECHNICIAN

DATE October 13, 1995

TYPE OR PRINT NAME Candi Graham

TELEPHONE NO. (405) 235-3611

(This space for State use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR

Approved by _____
Conditions of approval, if any:

TITLE _____

DATE OCT 20 1995