Submit 3 Copies to Appropriate District Office

P.O. Box 1980, Hobbs, NM 88240

P.O. Drawer DD, Artesia, NM 88210

1000 no Brazos Rd, Aztec, NM 87410

State of New Mexico Liergy, Minerals and Natural Resources Department

Form C	-103
Revised	1-1-89

OIL CONSERVATION DIVISION

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

i.	Indicate Type of Lease		7	
	STATE	X	FEE	П

SUNDR	Y NOTICE	SANDE	PEPORTS	ONIMEL

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"

7. Lease Name or Unit Agreement Name West Red Lake Unit

6. State Oil & Gas Lease No.

WELL API NO.

30-015-28454

(FORM C-101) FOR SUCH PROPOSALS.) 1. Type of Well ⊠ Oil Well Other proposed

2. Name of Operator **DEVON ENERGY CORPORATION (NEVADA)** 8. Well No. 54

Feet From The west

3. Address of Operator

20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611

Red Lake (Q-G-SA)

9. Pool name or Wildcat

Eddy

4 Well Location

Unit Letter N: 1150 Feet From The south

Line and __2350

Section 7

Township 18S

Range 27E 10. Elevation (Show whether DF, RKB, RT, GR, etc.) **NMPM**

County

Line

GL 3280^t

Check Appropriate Box To Indicate Nature Of Notice, Report, Or Other Data

NOTICE OF INTENTION TO:

PLUG AND ABANDON

REMEDIAL WORK

SUBSEQUENT REPORT OF:

ALTERING CASING

TEMPORARILY ABANDON

PERFORM REMEDIAL WORK

CHANGE PLANS

COMMENCE DRILLING OPNS. CASING TEST AND CEMENT JOB PLUG AND ABANDONMENT

PULL OR ALTER CASING

OTHER:

OTHER: APD extension request

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 #54 was approved October 13, 1995.

An extension was granted and due to expire April 13, 1996.

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

MAR ISTO

APPROVAL VALID FO PERMIT EXPIRES 6-20-9 UNLESS DRILLING UNDERWAY OIL CON. DIV DIST. 2

(This space for State use) ORIGINAL SIGNED BY TIM W. GUK	B46D 0 0 11
TYPE OR PRINT NAME Candi Graham	TELEPHONE NO. (405) 235-3611
SIGNATURE Candi Fraham TITLE ENGINEERING TECHNICIAN	DATE March 14, 1996
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	

DISTRICT II SUPERVISOR Approved by

Conditions of approval, if any:

TITLE

MAK 2 0 1996 DATE