

50-015-28564

Osgid- 6137

2 Repeal- 3491

Pool-

Oxford[®]

⊗ ESSELTE

MADE IN U.S.A.

NO. R753 1/3

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11-16-95

Comp. Neutron

11-16-99

Dual Laterolog

11-16-99

Cement Bond

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Co. is. DIV-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

CISF

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 PRODUCTION COMPANY, LP.
3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1100, OKLAHOMA CITY, OKLAHOMA 73102 (405) 228-7512
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 1650' FWL, Section 4-18S-27E, Lot 18

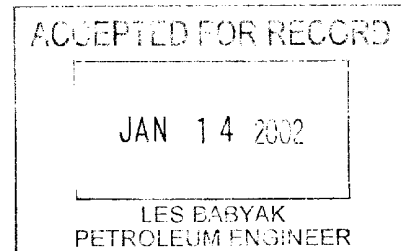
FORM APPROVED Budget Form No. 1004-0135 Expires March 31, 1993	
5. State Designation and Serial No. NM-7720	
6. If Indian, Allottee or Tribe Name	
7. If Unit or CA, Agreement Designation West Red Lake 8910089700	
8. Well Name and No. West Red Lake Unit # 43	
9. API Well No. 30-015-28564	
10. Field and 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

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.)*

Well was converted to injection on 12/21/01 per the attached BLM and OCD approvals. Packer was set @ 1769' on 2 3/8" IPC tubing. MIT test ran on 12/21/01 was witnessed by Mike Bratcher with OCD. Copy of MIT chart attached.



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

<i>Karen A. Cottom</i> Signed _____ his space for Federal or State office use)	Karen A. Cottom Title <u>Engineering Technician</u>	Date <u>January 4, 2002</u>
<i>Bruce Bury</i> Approved by _____ conditions of approval, if any:	Title <u>Compliance Officer</u>	Date <u>1-30-02</u>

Section 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations in any matter within its jurisdiction.

*See Instruction on Reverse Side

