Form 3160-5 (June 1990)

UNITED STATES **DEPARTME** OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED	
Budget Bureau No. 1004-01:	35

	S AND REPORTS ON WELLS	5. Lease Designation and Serial No.
	or to deepen or reentry to a different reservoir.	+0-020874-F- LC-064384
Use "APPLICATION F	OR PERMIT—" for such proposals	6. If Indian, Allottee or Tribe Name
SUBMI	T IN TRIPLICATE	l NA
		7. If Unit or CA, Agreement Designation
1. Type of Well		
Gas Other Well Other		NA N
2. Name of Operator	/ADA\	8. Well Name and No.
DEVON ENERGY CORPORATION (NEV	VADA)	Carter Collier 5 Federal #2
3. Address and Telephone No.		9. API Well No.
20 NORTH BROADWAY, SUITE 1500, (OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611	30-015-
Location of Well (Footage Sec. T. P. M. or Surve	v Description)	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2310' FNL & 330' FEL of Section 5-18S-27E, Unit "H"		Red Lake (Q-GB-SA)
2310 FNL & 330 FEL 01 39011011 3-103-2	7E, Onit A	11. County or Parish, State
		Eddy County, NM
CHECK APPROPRIATE BOX	(s) TO INDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTIO	N
Notice of Intent	Abandonment	Change of Plans
. Tolled of Intelli	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
• • •	Casing Repair	Water Shut-Off
7		Conversion to Injection
Final Abandonment Notice	Altering Casing	
Final Abandonment Notice	Altering Casing Other	Dispose Water
Describe Proposed or Completed Operations (Clearly state a subsurface locations and measured and true vertical depth.)	Other Il pertinent details, and give pertinent dates, including estimated date of startins for all markers and zones pertinent to this work.)*	Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) ng any proposed work. If well is directionally drilled, give
3. Describe Proposed or Completed Operations (Clearly state a subsurface locations and measured and true vertical depth.) Please amend the APD to show that the	Other Ill pertinent details, and give pertinent dates, including estimated date of startins for all markers and zones pertinent to this work.)* The BOP will be tested to 1000 psi with the rig psi.	Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) ng any proposed work. If well is directionally drilled, give
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