Submit 3 Copies to Appropriate District Office

State of New Mexico nergy, Minerals and Natural Resources Depa.

Form C	2-10
Revised	1-1-6

Form C-103	
levised 1-1-89	

C-103 1-1-89	215 F

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

5. Indicate Type of Lease

WELL API NO.

30-015-30506

	-	S1	ATE		FEE	\boxtimes
6.	State Oil &	Gas	Lease	No.		_

(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.)

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

Gas Well ⊠ Oil Well

Type of Well

Other

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

3. Address of Operator

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

9. Pool name or Wildcat

Red Lake (Q-GB-SA)

4 Well Location

Unit Letter J:2200 Feet From The South

Line and 2450

Feet From The East

County

Range 27E Township 18S 10. Elevation (Show whether DF, RKB, RT, GR, etc.)

NMPM

3289' GL

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

NOTICE OF INTENTION TO:

REMEDIAL WORK

SUBSEQUENT REPORT OF:

TEMPORARILY ABANDON

PERFORM REMEDIAL WORK

PLUG AND ABANDON

COMMENCE DRILLING OPNS.

ALTERING CASING

PULL OR ALTER CASING

CHANGE PLANS

CASING TEST AND CEMENT JOB

PLUG AND ABANDONMENT

OTHER:

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 this well was approved November 20, 1998.

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



hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE TITLE ENGINEERING TECHNICIAN	DATE 11/23/99
TYPE OR PRINT NAME Tonja Rutelonis	TELEPHONE NO. (405) 235-3611

(This space for State use)

Sim W. Sum Approved by Conditions of approval, if any:

Wistrict Supervisor

DATE 12-1-99