State of New Mexico
rgy, Minerals and Natural Resources Departn.

Form C-103
Revised 1-1-89

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

WELL API NO.
30-015-30506

5. Indicate Type of Lease
STATE ☐   FEE ☒

6. State Oil & Gas Lease No.

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.)

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

1. Type of Well
☒ Oil Well   ☐ Gas Well   ☐ Other

2. Name of Operator
DEVON ENERGY PRODUCTION COMPANY, L.P.

8. Well No.
87

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 _____ Line

Section 7	Township 18S	Range 27E	NMPM	Eddy	County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
3289' GL

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 this well was approved November 20, 1998.

An extension was granted in 1999, expiring in November, 2000.

At this time, Devon Energy Production Company, L.P. requests an extension of one year to drill this well.

RECEIVED
OCD - ARTESIA

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

SIGNATURE _____   TITLE ENGINEERING TECHNICIAN   DATE 10/31/00

TYPE OR PRINT NAME   Tonja Rutelonis   TELEPHONE NO. (405) 235-3611

(This space for State use)

ORIGINAL SIGNED BY TIM W. GUM
DISTRICT II SUPERVISOR   TITLE _____

Approved by _____   DATE NOV 08 2000

Conditions of approval, if any: