Form 3160-5 (June 1990)

UNTED STATES DEPARTML. f OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED

Budget Bureau No. 1004-0135

Expires March 31, 1993

Designation and Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS		5. Lease Designation and Serial No.
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.		NM-7721
Use "APPLICATION FO	R PERMIT—" for such proposals 5262	6. If Indian, Allottee or Tribe Name
CUDMIT	IN TRIPLICATE	
SUBMIT	\sqrt{N}	7. If Unit or CA, Agreement Designation
1. Type of Well	/8 to 300 %)	
Oil Gas Well Other RFCEIVED		8. Well Name and No.
2. Name of Operator	NY, L.P. E OCD - ARTESIA	D. 11 1 - 11-11 #00
DEVON ENERGY PRODUCTION COMPA	NY, L.P. COD - ARTESIA COL	West Red Lake Unit #90 9. API Well No.
3. Address and Telephone No.		
20 NORTH BROADWAY, SUITE 1500, OK	(LAHOMA CITY, OKLAHOMA 73102 (405) 235-3611	30-015-30540 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey I	Description)	1
841' FNL & 380' FWL, Section 9-18S-27E, Unit "D"		Red Lake (Q-GB-SA) 11. County or Parish, State
		Eddy County, NM
CUTCK ADDDODDIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPO	ORT, OR OTHER DATA
	TYPE OF ACTION	
TYPE OF SUBMISSION	_	Change of Plans
Notice of Intent	Abandonment	Change of Plans New Construction
	Recompletion	Non-Routine Fracturing
Subsequent Report	Plugging Back	Water Shut-Off
	Casing Repair Altering Casing	Conversion to Injection
Final Abandonment Notice	Other APD Extension	Dispose Water
	Z Calor in z = in z	(Note: Report results of multiple completion on Well
		Completion or Recompletion Report and Log form.)
" D. L. Canalated Operations (Clearly state all	pertinent details, and give pertinent dates, including estimated date of starting	Completion or Recompletion Report and Log form.)
Describe Proposed or Completed Operations (Clearly state all subsurface locations and measured and true vertical depths	pertinent details, and give pertinent dates, including estimated date of starting for all markers and zones pertinent to this work.)*	Completion or Recompletion Report and Log form.)
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