

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Cons. Division
811 S. 1st Street
Artesia, NM 88210-2834

FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

C/SF

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 WIW
2. Name of Operator
DEVON ENERGY CORPORATION (NEVADA)
3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
990' FSL & 1650' FWL, Section 35-18S-31E, Unit "N"

5. Lease Designation and Serial No.
NM-10190
6. If Indian, Allottee or Tribe Name
7. If Unit or CA, Agreement Designation
14-08-001-11572
8. Well Name and No.
East Shugart Unit #24
9. API Well No.
30-015-05691
10. Field and Pool, or Exploratory Area
Shugart (Y-SR-Q-G)
11. County or Parish, State
Eddy County, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
- ☒ Subsequent Report
- ☐ Final Abandonment Notice

TYPE OF ACTION

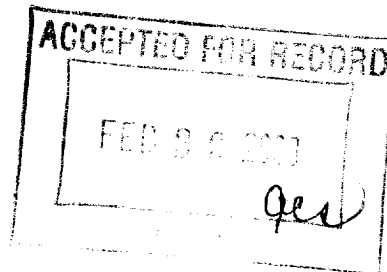
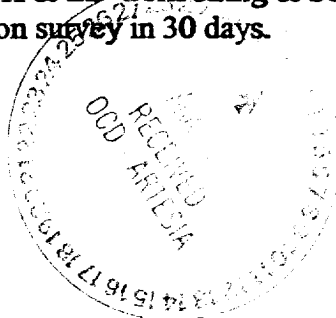
- ☐ Abandonment
- ☐ Recompletion
- ☐ Plugging Back
- ☐ Casing Repair
- ☐ Altering Casing
- ☒ Other Clean out fill, reperf & acidize

- ☐ Change of Plans
- ☐ New Construction
- ☐ Non-Routine Fracturing
- ☐ Water Shut-Off
- ☐ Conversion to Injection
- ☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Devon Energy Corporation cleaned out fill, reperforated & acidized the LQ3 & LQ4 as follows: On 1/25/00 RU PU, ND wellhead, NU BOP. Release pkr & TOH. TIH w/ 3-7/8" bit, DCs & 2-3/8" tbg. RU reverse unit & clean out fill from 3778' to PBTD @ 3928'. TOH & LD DCs & bit. RU wireline & reperforate the LQ3 & LQ4 @ 3870'-3880' (40 holes) & 3888'-3900' (48 holes). PU Sonic Hammer & TIH on 2-3/8" tbg. Acidize LQ3 & LQ4 perfs @ 3870'-3900' w/ 2000 gals 15% NE-FE acid. TOH & LD work string & Sonic Hammer. TIH w/ pkr & tbg. Ran MIT test, put well back on injection & will run injection survey in 30 days.



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

Signed Tonja Rutelonis

Title Engineering Technician

Date 2/18/00

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____

