Submit to Appropriate District Office State Lease - 6 copies

State of New Mexico Energy, Minerals and Natural Resources Department

C	15/
Form C·101 Revised 1·1·89	m_

Fee Lease - 5 copies

OIL CONSERVATION DIVISION API NO. (assigned by OCD on New Wells) P.O. Box 2088 P.O. Box 1980, Hobbs, NM 88240 30-015-22724 Santa Fe, New Mexico 87504-2088 **DISTRICT II** 5. Indicate Type of Lease P.O. Drawer DD, Artesia, NM 88210 STATE X FEE DISTRICT III 6. State Oil & Gas Lease No. 1000 Rio Brazos Rd., Aztec, NM 87410 APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK la. Type of Work: 7. Lease Name or Unit Agreement Name DRILL RE-ENTER | DEEPEN PLUG BACK X b. Type of Well: MELL | SINGLE MULTIPLE WELL X OTHER 20NE X State CB COM 2. Name of Operator 8. Well No. Devon Energy Corporation (Nevada) 9. Pool name or Wildcat 3. Address of Operator 20 North Broadway Suite 1500 Oklahoma City, OK 73102 Winchester Atoka 4. Well Location 0 : `660 Feet From The south 1980 Line and Feet From The east Line 29 Township T19S Section **R28E** Range **NMPM** Eddy County 10. Proposed Depth 11. Formation 12. Rotary or C.T. 13. Elevations (Show whether DF, RT, GR, etc.) 14. Kind & Status Plug. Bond 15. Drilling Contractor 16. Approx. Date Work will start 3382' G. L./ 3400' RKB Blanket 12/1/93 17. PROPOSED CASING AND CEMENT PROGRAM SIZE OF HOLE SIZE OF CASING **WEIGHT PER FOOT** SETTING DEPTH SACKS OF CEMENT EST. TOP 17. 1/2" 13 3/8" 54.5# 4021 340 sx surface 12 1/4" 8 5/8" 32# 2550' 1540 sx surface 7 7/8" 4 1/2" 11.6# 11.140 2000 sx 7430'

It is proposed to isolate the existing inactive Atoka perforations (10,324'-10,334' and 10,342'-10,354') by placing a CIBP at 10,300' (+) and positioning 30' of cement above. The Strawn will be tested from 9914'-9937'. If the Strawn is found to be non-commercial, a CIBP will be set at 9875'(+) and 30' of cement will be positioned above. The Cisco (Penn) will then be tested from 9266'-9296'. Stimulation will be determined after perforating and testing.

perf @ 600'

600 sx

surface

4 1/2"

NOTE: The Strawn perfs will be tested prior to setting any CIBPs.		
IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM: IF PROPOSAL IS TO DESPEN OR FLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.	ZONE AND PROPOSED NEW PRODUCTIVE	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.		
SIONATURE DE DE D'DONNELL HILL Engineering Technician	DATE 11/23/93 (405)	
TYPEOR PRINT NAME Debby O'Donnell	TELEPHONE NO. 552-4511	
(This space for State Use) ORIGINAL SIGNED BY MIKE WILLIAMS	NOV 2 9 1993	
APPROVED BY SUPERVISOR, DISTRICT II TITLE	DATE	
CONDITIONS OF APPROVAL, IF ANY:		