

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

C/SF

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

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)
2250' FNL & 1910' FEL, Unit "H", Section 35-T18S-R31E

RECEIVED
CD - ARTESIA

5. Lease Designation and Serial No.
NM-10191

6. If Indian, Allottee or Tribe Name
NA

7. If Unit or CA, Agreement Designation
14-08-001-11572

8. Well Name and No.
East Shugart Unit #56

9. API Well No.
30-015-27949

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

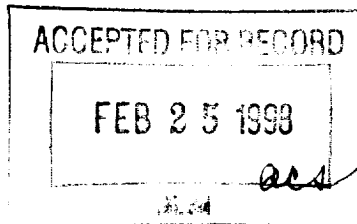
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input checked="" type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<input type="checkbox"/> 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.)*

Administrative Order #WFX-721

Work began 10/4/97. RU Wedge WL & perforated 3545', 3546', 3553', 3554', 3563', 3564', 3886', 3887', 3888', 3889', 3890', for a total of 12 holes. RD Wedge. Set pkr @ 3457', RU BJ Services. Acidize perfs w/5000 gals 15% acid + 500 gals xylene + 3500# rock salt. ISIP 1290 psi. Flwd back well. Rel'd pkr. Tagged fill @ 3915', TIH w/bailer & cld f/3915-3950'. L/D Bailer. Change out BOP rams f/2-7/8" to 2-3/8" PU Baker J-Loc Nickle plated pkr & 110 jts plastic coated tbq. Set pkr @ 3484.50'. Tstd csg & pkr to 300 psi for 15 min. Began water injection into Queen perforations @ 3545-3932' @ 500 BPD 10/7/97.

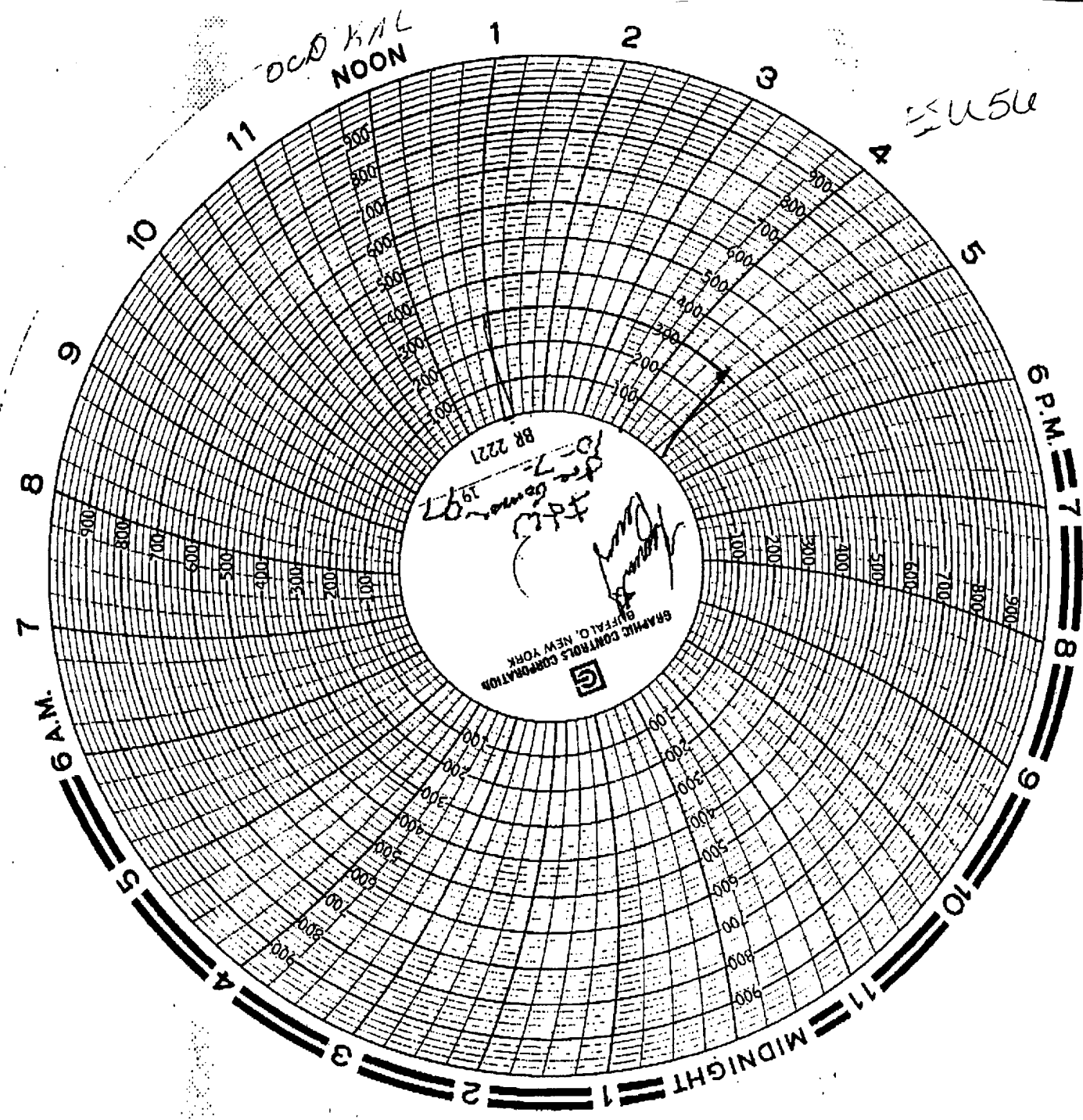


14. I hereby certify that the foregoing is true and correct

Signed Diana Keys Title Engineering Technician Date 1/29/98
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

BR



W5U