Form 3160-5 (June 1990) Do not use this form Use	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993 5. Lease Designation and Serial No. NMO405444-A 6. If Indian, Allottee or Tribe Name			
	NA 7. If Unit or CA, Agreement Designation			
1. Type of Well X Oil Gas Well Well	NA 8. Well Name and No.			
2. Name of Operator Devon Energy Corporation (Nevada)				o. Wei Name and No. Todd "26" Federal #10 9. API Weil No.
3. Address and Telephone No. 20 N. Broadway Suite 1500 Oklahoma City, OK 73102 (405) 235-3611				30-015-27102
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10. Field and Pool, or Exploratory Area Ingle Wells Delaware
1980' FSL & 2310' FWL 				11. County or Parish, State Eddy County, NM
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA				
TYPE OF SU	BMISSION		TYPE OF ACTION	
X Subsequent I		Abandonment Recompletion Plugging Back		Change of Plans Change of Plans New Construction Non-Routine Fracturing
Final Abande	onment Notice	Casing Repair Altering Casing X Other <u>lst</u>	jas sales	Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

CKF

3. 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 markets and zones pertinent to this work.)*

On 12-9-92 we began selling gas produced from this new well. The transporter is NGPL.



14. I hereby certify that the foregoing is true and correct Signed Active Protocol Control Con	Debby O'Donnell Tide Engineering Technician	Date 12-14-92
(This space for Fight of Starsoffic first) with Approved by Conditions of approval, if any	Title	Date
7 Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly or representations as to any matter within its jurisdiction.	and willfully to make to any department or agency of the United Str	ates any false, fictitious or fraudulent statement: