

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

# OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

JUL 15 1993

O. C. D.

WELL API NO.

30-015-27365

5. Indicate Type of Lease

STATE ☒

FEE ☐

6. State Oil & Gas Lease No.

K-952

7. Lease Name or Unit Agreement Name

Todd "36D" State

8. Well No.

#2

9. Pool name or Wildcat

Ingle Wells Delaware

## SUNDRY NOTICES AND REPORTS ON WELLS

(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT"  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well:

OIL  
WELL ☒

GAS  
WELL ☐

OTHER

2. Name of Operator

Devon Energy Corporation (Nevada)

3. Address of Operator

20 North Broadway Suite 1500 Oklahoma City, OK 73102

4. Well Location

Unit Letter D : 330 Feet From The north Line and 330 Feet From The west Line

Section 36 Township T23S Range R31E NMPM Eddy County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3479.3'

11. Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

### NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐

PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐

CHANGE PLANS ☐

PULL OR ALTER CASING ☐

OTHER: ☐

### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: set intermediate casing ☒

12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

On 7-8-93, we set 4353' of 8 5/8", 32 ppf, J-55 intermediate casing in an 11" open hole. We cemented the casing to surface with the following cement slurries:

1300 sx LITE (35:65) + 6% gel + 15 lb/sk salt + 1/4 lb/sk Cellophane flakes  
500 sx Class "C" + 2% CaCl2 + 1/4 lb/sk Cellophane flakes

Cement was circulated to surface (32 sx). The BLM was notified prior to pumping the job.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Debby O'Donnell TITLE Engineering Technician DATE 7-13-93

TYPE OR PRINT NAME Debby O'Donnell

TELEPHONE NO. 405-552-4511

(This space for State Use)

ORIGINAL SIGNED BY  
MIKE WILLIAMS

APPROVED BY SUPERVISOR, DISTRICT II TITLE SUPERVISOR DATE JUL 20 1993

CONDITIONS OF APPROVAL, IF ANY: