Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office Energy, Minerals and Natural Resources May 27, 2004 District I WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 District II OIL CONSERVATION DIVISION 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease 1220 South St. Francis Dr. District III STATE 🔀 1000 Rio Brazos Rd., Aztec, NM 87410 Santa Fe, NM 87505 6. State Oil & Gas Lease No. District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505 SUNDRY NOTICES AND REPORTS ON WELLS 7. Lease Name or Unit Agreement Name (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A Northeast Blanco Unit DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.) 8. Well Number 1. Type of Well: Oil Well Gas Well 🛛 Other 450A 2. Name of Operator 9. OGRID Number Devon Energy Production Company, L.P. 6137 3. Address of Operator 10. Pool name or Wildcat PO Box 6459, Navajo Dam, NM 87419 **Basin Fruitland Coal** 4. Well Location :\_1,920'\_\_feet from the North line and 1,920' feet from the West line Unit Letter Township 31N Range 7W Section 32 **NMPM** County San Juan 11. Elevation (Show whether DR. RKB, RT. GR. etc.) GR 6,352' Pit or Below-grade Tank Application 🗌 or Closure 🗍 Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water Pit Liner Thickness: Below-Grade Tank: Volume bbls; Construction Material 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ABANDON □ REMEDIAL WORK TEMPORARILY ABANDON **CHANGE PLANS** COMMENCE DRILLING OPNS.□ P AND A PULL OR ALTER CASING MULTIPLE COMPL  $\Box$ CASING/CEMENT JOB OTHER: Spud Sundry  $\boxtimes$ OTHER: 13. 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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion. The above referenced well was spud on 10/6/05 I hereby certify that the information above is true and complete to the best of my knowledge and best structure that any pit or belowgrade tank has been/will be constructed or closed according to NMOCD guidelines 🗵, a general permit 🗌 or an (attached) alternative OCD-approved plan 🔲. TITLE Senior Operations Technician **SIGNATURE** Type or print name: Melisa Zimmerman E-mail address: melisa.zimmerman@dvn.com Telephone No.: (405) 552-7917 For State Use Only DEC 1 2 2005 SUPERVISOR DISTRICT # 3 APPROVED BY: TITLE

Conditions of Approval (if any):