Submit 3 Copies To Appropriate District State of New Mexico Form C-103 Office May 27, 2004 Energy, Minerals and Natural Resources District 1 WELL API NO. 1625 N. French Dr., Hobbs, NM 88240 30-045-32380 District II **OIL CONSERVATION DIVISION** 1301 W. Grand Ave., Artesia, NM 88210 5. Indicate Type of Lease District III 1220 South St. Francis Dr. STATE 🖂 FEE 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 7. Lease Name or Unit Agreement Name SUNDRY NOTICES AND REPORTS ON WELLS (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 Gas Well Other 1. Type of Well: Oil Well 481A 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 Unit Letter : 765' feet from the North line and 1,290' feet from the East line Section 35 Township 31N Range 7W **NMPM** County San Juan 11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 6.341' 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: PERFORM REMEDIAL WORK □ PLUG AND ABANDON □ REMEDIAL WORK ALTERING CASING **TEMPORARILY ABANDON** П **CHANGE PLANS** COMMENCE DRILLING OPNS.□ P AND A **PULL OR ALTER CASING** MULTIPLE COMPL \Box **CASING/CEMENT JOB** OTHER: Spud Sundry 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 3/24/06. I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or belowgrade tank has been/will be constructed or closed according to NMOCD guidelines \(\sigma, \text{ a general permit } \subseteq \) or an (attached) alternative OCD-approved plan \(\subseteq \). DATE 4-76-06 SIGNATURE / TITLE Senior Operations Technician Type or print name: Melisa Zimmerman E-mail address: melisa.zimmerman@dvn.com Telephone No.: (405) 552-7917 For State Use Only DEPUTY OR & GAS INSPECTOR, DIST. &3 TITLE Conditions of Approval (if any)