Submit 3 Copies To Appropriate District Office	State of New Mexico	Form C-103 May 27, 2004
1625 N. French Dr., Hobbs, NM 88240	, Minerals and Natural Resources	WELL API NO.
District II 1301 W. Grand Ave., Artesia, NM 88210 OIL CONSERVATION DIVISION		30-045-33665
District III 1	220 South St. Francis Dr.	5. Indicate Type of Lease STATE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	,	SF 078988
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		7. Lease Name or Unit Agreement Name NEBU
PROPOSALS.)  1. Type of Well: Oil Well Gas Well Other		8. Well Number 321N
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 Dakota/Blanco Mesaverde
4. Well Location		
	theSouth line and780feet	
Section 18 Township 31N Range 7W NMPM County San Juan		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 6,385'		
Pit or Below-grade Tank Application or Closure		
Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water		
Pit Liner Thickness: mil Below-Gr	ade Tank: Volumebbls; C	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   CHANGE F	<u></u>	RILLING OPNS. P AND A
PULL OR ALTER CASING MULTIPLE	COMPL CASING/CEMEN	NT JOB ⊠
OTHER: OTHER:		
13. Describe proposed or completed operation	ons. (Clearly state all pertinent details, a	nd give pertinent dates, including estimated date Attach wellbore diagram of proposed completion
•		DOUGHOUGH
The 4 ½", J-55, LT&C, 11.6# casing set at 8,192' was tested to 1500 psi.		RCVD NOV27'06
		OIL CONS. DIV.
		DIST. 3
	for Record Only	
I hereby certify that the information above is true	and complete to the best of my knowled	ge and helief I further certify that any nit or helaw-
grade tank has been/will be constructed or closed according	ing to NMOCD guidelines $\boxtimes$ , a general permit $[$	or an (attached) alternative OCD-approved plan .
SIGNATURE AND LINE	TITLE Senior Operations	s Technician DATE //-21-06
Type or print name: Melisa Castro E-mail address: Melisa.castro@dvn.com Telephone No.: (405) 552-7917  For State Use Only		
APPROVED BY:  Conditions of Approval (if any):	TITLE	DATE
Conditions of Approval (if any):		20
	& Bel	reve this Federal well