

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

WELL API NO.  
30-015-31437

5. Indicate Type of Lease  
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
Southern Cross 21 State Com

8. Well No.

3

9. Pool name or Wildcat

Undes. Antelope Sink Strawn

### 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 PRODUCTION COMPANY, LP

3. Address of Operator

20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 228-7512

4. Well Location

Unit Letter P-1100 Feet From The South Line and 990 Feet From The East Line

Section 21

Township 18S

Range 24E

NMPM

Eddy

County

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

3783' GR

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: Drill out CIBP ☒

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.

3/29/02 Drilled out CIBP at 8080', commingled perfs below on rod pump, per pool extension letter (Cantanach)  
4/1/02 RIH with pump and rods respace well, Hung well on RDMO

5/4/02 22 mcf, 12 bwpd, 0 bopd

Strawn 8116-22'

Canyon 7580-7586'

Cisco 6506-12, 6520-26, 6528-32, 6542-50', 6964-6971'

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

SIGNATURE Karen Cottom

TITLE ENGINEERING TECHNICIAN

DATE May 14, 2002

TYPE OR PRINT NAME Karen Cottom

TELEPHONE NO. (405) 235-3611

(This space for State use)

Approved by Receivd only BCB  
Conditions of approval, if any:

TITLE \_\_\_\_\_

DATE MAY 17 2002