

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Well API NO.	30-015-33447
5. Indicate Type of Lease	<input checked="" type="checkbox"/> State <input type="checkbox"/> Fee
6. State Oil & gas Lease No.	
7. Lease Name or Unit Agreement Name	Parkway West Unit
8. Well Number	17
9. Ogrid Number	6137
10. Pool Name or Wildcat	Parkway; Morrow, West (Gas)

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 and Telephone No.
20 North Broadway, Ste 1500, Oklahoma City, OK 73102 **405-228-8209**

4. Well Location
Unit Letter **E** **1980** feet from the **North** line and **660** feet from the **West** line
Section **27** Township **19S** Range **29E** NMPM County **Eddy**

RECEIVED
DEC 30 2004
OPERATIONS

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3328

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

<p>NOTICE OF INTENTION TO:</p> <input type="checkbox"/> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPLETION <input type="checkbox"/> Other _____	<p>SUBSEQUENT REPORT OF:</p> <input type="checkbox"/> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input checked="" type="checkbox"/> COMMENCE DRILLING OPN <input type="checkbox"/> PLUG AND ABANDONMENT <input type="checkbox"/> CASING TEST AND CEMENT JOB <input type="checkbox"/> OTHER _____
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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 or proposed completion or recompletion. If a pit or below-grade tank is involved in the operation, complete the reverse side of this form.

10/29/04 Spud 26" hole. Ran 8 jts 20" 94# K55 BTC csg @ 335'. Cmt lead w/ 300 sx CI H, 2nd lead w/ 400 sx CI C, tail w/ 400 sx CI C. Circ 491 sx to pit. WOC 24 hrs.
 10/30/04 Test csg to 250#.
 11/01/04 TD 17 1/2" hole @ 1274'. Ran 29 jts 13 3/8" 54.5# J55 ST&C csg @ 1274'. Cmt lead w/ 665 sx CI C, tail w/ 350 sx CI C. Circ 263 sx to pit. WOC 24 hrs
 11/3/04 Tested csg to 730#--held.
 11/06/04 TD 12 1/4" hole @ 3230'.
 11/07/04 Ran 79 jts 9 5/8" 36# J55 ST&C csg @ 3230'. Cmt lead w/ 200 sx CI H, 2nd lead w/ 900 sx CI C, tail w/ 250 sx CI C. Circ 378 sx to pits. WOC 24 hrs.
 11/08/04 Test csg to 1000#-held.
 11/25/04 TD 8 4/5" hole @ 11,720'.
 11/27/04 Ran 270 jts 5 1/2" 17# P110H LT&C csg @ 11,718'. Cmt lead w/ 1070 sx CI C. Circ 75 sx off DV tool, cmt stg 2 w/1450 sx CI C.
 11/28/04 Released rig.

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

SIGNATURE Linda Guthrie TITLE Regulatory Specialist DATE 12/23/2004
 Type or Print name Linda Guthrie E-mail Address: linda.guthrie@dvn.com Telephone No. 405-228-8209
 (This space for State use)

JAN 03 2005

FOR RECORDS ONLY
 APPROVED BY _____ TITLE _____ DATE _____
 Conditions of approval, if any: