	UNITED STATE: EPARTMENT OF THE I JUREAU OF LAND MANA	) Artesta	FORM APPROVED OMB NO. 1004-0135 Expires: July 31, 2010			
SUNDRY		<ol> <li>Lease Serial No. NMNM103878</li> <li>If Indian, Allottee or Tribe Name</li> </ol>				
Do not use th abandoned we						
SUBMIT IN TRI		7. If Unit or CA/Agreement, Name and/or No.				
1. Type of Well Oil Well S Gas Well Oth		8. Well Name and No. RUSSELL 8 FEDERAL 1				
2. Name of Operator DEVON ENERGY PRODUCT	Contact: FION CO EFMail: ERIN.WOF		9. API Well No. 30-015-31392-00-S1			
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 7310	2 .	3b. Phone No. (include area cod Ph: 405-552-7970	le)	10. Field and Pool, or BURTON FLAT	10. Field and Pool, or Exploratory BURTON FLAT	
4. Location of Well (Footage, Sec., 7	C., R., M., or Survey Description	i)	11. County or Parish, and State			
Sec 8 T20S R29E NWNW 76	0FNL 660FWL			EDDY COUNT	Y, NM	
12. CHECK APP	ROPRIATE BOX(ES) TO	O INDICATE NATURE OF	NOTICE, R	EPORT, OR OTHE	R DATA	
TYPE OF SUBMISSION		ТҮРЕ (	OF ACTION			
X Notice of Intent	☐ Acidize	🗖 Deepen	Produc	Production (Start/Resume) 🔲 Water Shut-Of		
_	Alter Casing	Fracture Treat	🗖 Reclam	ation	U Well Integrity	
Subsequent Report	Casing Repair	New Construction	🔀 Recom	plete	Other	
Final Abandonment Notice	Change Plans	Plug and Abandon				
	Convert to Injection	Plug Back	🗖 Water I	Disposal		
If the proposal is to deepen direction:	ally or recomplete horizontally.	give subsurface locations and measure	sured and true v	ertical depths of all pertir	ent markers and zones.	
3. Describe Proposed or Completed Op If the proposal is to deepen directiona Attach the Bond under which the wor following completion of the involved testing has been completed. Final At determined that the site is ready for fin Devon Energy Production Cor and recomplete to the Atoka for	ally or recomplete horizontally, rk will be performed or provide l operations. If the operation res pandonment Notices shall be file inal inspection.) npany, LP respectfully red	give subsurface locations and meas the Bond No. on file with BLM/BI sults in a multiple completion or re- ed only after all requirements, inclu	sured and true vo A. Required su completion in a ading reclamatio	ertical depths of all pertir bsequent reports shall be new interval, a Form 316 n, have been completed,	ent markers and zones. filed within 30 days 0-4 shall be filed once	
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## Additional data for EC transaction #291554 that would not fit on the form

32. Additional remarks, continued

5. RIH w/ tubing and TOP.

Attachments: Wellbore Schematic & Revised C-102

Thank You!

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District 1 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District 11 811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District 111 1000 Rio Brázos Road, Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505

Phone: (505) 476-3460 Fax: (505) 476-3462

## State of New Mexico Energy, Minerals & Natural Resources Department OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505

Form C-102 Revised August 1, 2011 Submit one copy to appropriate District Office

X AMENDED REPORT

		W	/ELL LOO	CATION	AND ACRE	EAGE DEDIC	ATION PLA	T	
<sup>1</sup> API Number <sup>2</sup> Pool Code 30-015-31392 73200				<sup>3</sup> Pool Name Burton Flat; Atoka East (Gas)					
	<sup>4</sup> Property Code 26814 See Sederal					<sup>6</sup> Well Number			
<sup>7</sup> OGRID No. 6137 DEVON ENERGY PRODUCTION COMPANY, LP						'Elevation 3279			
					<sup>10</sup> Surface Lo	ocation			······································
UL or lot no. D	Section 8	Township 20S	Range 29E	Lot Idn	Feet from the 760'	North/South line NORTH	Feet from the 660'	East/West line WEST	County EDDY
				× • •		>:00	<u> </u>		

<sup>a</sup> Bottom Hole Location If Different From Surface									
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
		_							-
			II		L				
<sup>12</sup> Dedicated Acres <sup>13</sup> Joint or Infill <sup>14</sup> Consolidation Code <sup>15</sup> Order No.									
320									

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

16		" OPERATOR CERTIFICATION
760'		I hereby certify that the information contained herein is true and complete
n n		to the best of my knowledge and bellef, and that this organization either
		owns a working interest or unleased mineral interest in the land including
660'		the proposed bottom hole location or has a right to drill this well at this
000		location pursuant to a contract with an owner of such a mineral or working
		interest, or to a voluntary pooling agreement or a compulsory pooling
		order heretofore entered by the division.
		Erin Workman 02.12.15 Date
		Printed Name
		Erin.workman@dvn.com
		E-mail Address
	 	 <b>*SURVEYOR CERTIFICATION</b>
		I hereby certify that the well location shown on this
		plat was plotted from field notes of actual surveys
		made by me or under my supervision, and that the
		same is true and correct to the best of my belief.
·····		 Date of Survey
		Signature and Seal of Professional Surveyor.
		Signature and Seat OF FIORSSIGNAL SUPPOP
		Certificate Number



