

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OIL CONTS.  
N.M. DIV-Dist. 2  
1301 W. Grand Avenue  
Artesia, NM 88210

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

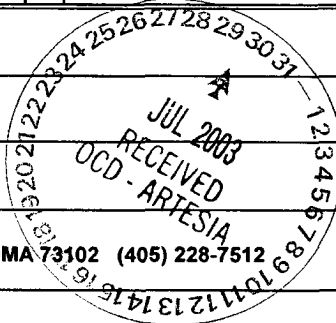
**SUBMIT IN TRIPLICATE**

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, SUITE 1100, OKLAHOMA CITY, OKLAHOMA 73102 (405) 228-7512**

4. Location of Well (Footage. Sec., T., R., M., or Survey Description)  
**660 FSL & 1980 FWL, Unit N Sec 11 T23S R31E,**



5. Lease Designation and Serial No.  
**NMNM0404441**

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
**Barclay 11 N Federal 14**

9. API Well No.  
**30-015-32333**

10. Field and Pool, or Exploratory Area  
**Ingle Wells Delaware**

11. County or Parish, State  
**Eddy, NM**

**CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other <u>Spud Sundry</u>	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

7/1/03 – Spud 17 1/2" hole

7/3/03 – Ran 19jts 13 3/8", H40, 48#, ST&C csg set @856', cmt'd lead w/615 sx Class C & tail w/250 sx Class C, circ 108 sx to pit WOC 18hrs

7/9/03 – Td'd 11" hole, ran 96jts, 8 5/8", 32#, J55, LT&C csg set @4390', cmt'd lead w/950 sx Class C & tail w/300sx Class C, circ 280 sx, WOC 20 hrs

7/18/03 – TD'd 7 7/8" hole @8495', circ for logs,

7/21/03 – Ran 187 jts 5 1/2", J55, 15.5# & 17#, LT&C set @8495', cmt'd lead w/435 sx Class C & tail w/500 sx Class C.

7/22/03 – Released rig.

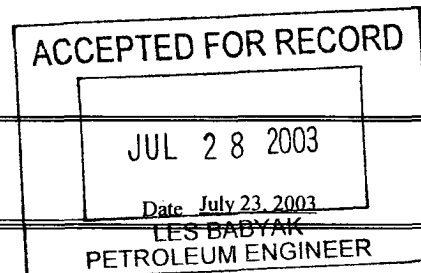
14. I hereby certify that the foregoing is true and correct

Signed *Karen A. Cotton*

Karen A. Cotton

Title Operations Technician

(This space for Federal or State office use)



Approved by \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any: \_\_\_\_\_