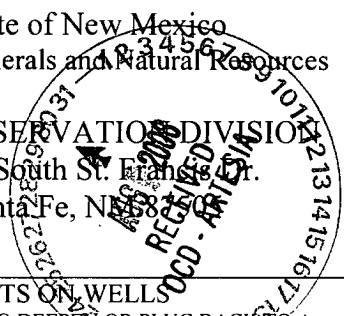


Submit 3 Copies To Appropriate District Office
 District I
 1625 N. French Dr., Hobbs, NM 88240
 District II
 1301 W. Grand Ave., Artesia, NM 88210
 District III
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 May 27, 2004

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



WELL API NO. 30-015-33947
5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
6. State Oil & Gas Lease No.

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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	7. Lease Name or Unit Agreement Name Delta M Fee 12
	8. Well Number 2
2. Name of Operator Devon Energy Production Company, LP	9. OGRID Number 6137
3. Address of Operator 20 North Broadway Oklahoma City, Oklahoma 73102-8260 (405) 552-7802	10. Pool name or Wildcat Morrow
4. Well Location Unit Letter <u>M</u> : <u>660</u> feet from the <u>South</u> line and <u>660</u> feet from the <u>West</u> line Section <u>12</u> Township <u>22S</u> Range <u>27E</u> NMPM County <u>Eddy</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3070'	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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

NOTICE OF INTENTION TO: 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 COMPL <input type="checkbox"/> OTHER: <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: COMPLETION <input checked="" type="checkbox"/>	
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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 of proposed completion or recompletion.

- 07/22/05: MIRU. Drill out DV tool. Tst casing to 1500 psi – ok. PBTB @ 12,100'. Log TOC @ 2000'. POOH.
- 08/01/05: RIH & perf 11,812-11,840'; (6SPF) 48 holes. RIH & set pkr @ 11,775'.
- 08/02/05: Acidize w/1000 gal 15% HCL acid w/methanol. Flow back, swab.
- 08/03/05: Rls pkr & TOOH w/tbg.
- 08/04/05: Perf 11,672 – 11,784; (6SPF) 168 holes. Set pkr @ 11,650'. Tst csg to 1500 psi – ok. Swab.
- 08/06/05: Acidize w/4,000 gal gal of 15% HCL w/methanol + 360 ball slrs. Swab.
- 08/11/05: Rls pkr & POOH w/pkr & tbg.
- 08/12/05: Frac w/17,349 gal DHSQ bi-foam, 67,000# Ultraprop 18/40, flush w/4,965 gal 57 DHSW bi-foam.
- 08/16/05: RIH set pkr w/plug @ 11,600' & run production tbg.
- 09/17/05: Rls pkr & TOOH.
- 09/19/05: TIH & set RBP @ 11,400', spot 2 sx of sn on top of RBP, TOOH.
- 07/22/06: Latch onto RBP & rls.
- 07/27/06: TIH w/ON/OFF tool, 2 7/8" sub, 2.31F nipple, 2 7/8" sub, 2.25 R Nipple, EOT @ 11,602', pkr set @ 11,588'. Swab.
- 07/28/06: Bring well on line.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan .

SIGNATURE _____ TITLE Senior Engineering Technician DATE 08/29/06
 Type or print name Stephanie A. Ysasaga E-mail address: Stephanie.Ysasaga@dv.com Telephone No. (405) 552-7802
For State Use Only

APPROVED BY: _____ FOR RECORDS ONLY DATE AUG 30 2006
 Conditions of Approval (if any): _____