

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Oil Cons.
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) 2287512

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1980' FNL & 1780' FWL, Sec 22 T23S R31E

5. Lease Designation and Serial No.

NMNM0405444A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Todd 22 F Federal #6

9. API Well No.

30-015-32660

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 checked="" type="checkbox"/> Other <u>Completion</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.)*

8/28/03 – Ran CBL, found TOC @5506', RIH w/guns & perf'd 8033' – 8052' 2SPF

8/31/03 – Frac'd w/120,000# 16/30 Ottawa & RC

9/3/03 – TIH w/4" csg gun Perf Brushy Canyon 2 SPF @ 7744' – 7755' & 7452' – 68' total 54 holes. Acidized 7744' – 7755' w/1000 gal 7.5% Pentol acid.

9/5/03 – Frac'd 7744' – 7755 w/11,910 gal wtr & 28,000 #16/30 sd

9/8/03 – Acidized 7452' – 68' w/1500 gal 7.5% Pentol acid. Frac w/28,000# 16/30 Ottawa & RC

9/11/03 – TIH w/4" csg gun shot 4 squeeze holes @ 5470'. TIH w/cement retainer set @5420' pumped 250 sx 35:65:6 + 5% salt. Follow w/50sx Class C neat TOC 3560' by Temp survey

9/15/03 – Drilled out cement tested squeeze perfs @5470', test to 1000 psi held.

9/17/03 – TIH w/pump & rods. Hung well on prod.

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

Signed Karen A. Cottom Title Operations Technician

(This space for Federal or State office use)

Approved by _____

Conditions of approval, if any:

Title _____

