

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  
March 4, 2004

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

WELL API NO. 30-015-28564
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name West Red Lake
8. Well Number 43
9. OGRID Number 6137
10. Pool name or Wildcat Red Lake (Q-GB-SA)

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 Co. LP

3. Address of Operator  
PO Box 250, Artesia, NM 88210

4. Well Location

Unit Letter : 680 feet from the South line and 1650 feet from the West line

Section 4 Township 18S Range 27E NMPM County Eddy

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

Pit or Below-grade Tank Application (For pit or below-grade tank closures, a form C-144 must be attached)

Pit Location: UL\_ \_Sect\_ Twp Rng\_ Pit type\_ Depth to Groundwater\_ Distance from nearest fresh water well \_  
Distance from nearest surface water Below-grade Tank Location UL\_ \_Sect\_ Twp\_ Rng\_ ;  
feet from the \_line and \_feet from the \_line

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐

TEMPORARILY ABANDON ☐ CHANGE PLANS ☐

PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☒

OTHER: ☐

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.

Gerry Guye

Test and Chart attached for the casing integrity test for workover performed on well. Approved and witnessed by Gary Wink. Pressure tested to 300 psi for 30 minutes.

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 Jennifer Van Curen TITLE Production Field Tech DATE 7-21-05

Type or print name Jennifer Van Curen E-mail address: Jennifer.vancuren@dmn.com Telephone No.  
(This space for State use)

APPROVED BY [Signature] TITLE DFO DATE 7-28-05

