

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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) 226-7512

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1730 FNL & 660 FEL, Sec 25, T22S R30E, Unit H

5. Lease Designation and Serial No.
NMNM89052

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.
APACHE 25 FEDERAL #1

9. API Well No.
30-015-27410

10. Field and Pool, or Exploratory Area
LOS MEDANOS; MORROW

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 checked="" 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 _____	<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.)*

7/14/03 – POH w/tbg

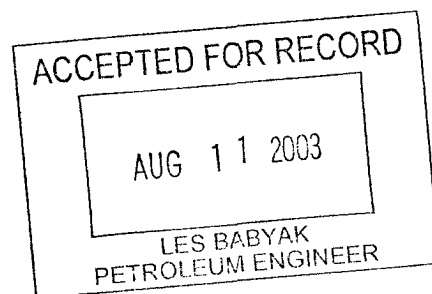
7/18/03 – Set Cement retainer @12,855', pulled out of retainer spot 10.5 BBLS Cement (50sx) cement @11,166', pressured annulus to 1050 pis hesitation squeezed 5 times to 5000 psi

7/25/03 – Perf w/1 11/16" through tubing from 13,911' – 13,916' 4SPF, total 20 holes

7/26/03 – Switched well to sales line

7/29/03 – Acidized well w/1000 gal of Acetic Acid & 833 gal Methanol

7/30/03 – Switched to Sales line @8:00am



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

Signed Karen A. Cottom

Karen A. Cottom

Title Operations Technician

Date August 5, 2003

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____