

DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd, Aztec, NM  
87410

## OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

WELL API NO.  
**30-015-32821**

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name  
H B 2 State

8. Well No.

4

9. Pool name or Wildcat

Cedar Canyon; Bone Spring

### 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 TO PLUG BACK TO A  
(FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other \_\_\_\_\_

2. Name of Operator

DEVON ENERGY PRODUCTION COMPANY, LP

3. Address of Operator

20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 2287512

4. Well Location

Unit Letter N:860 Feet From The South Line and 1780 Feet From The West Line

Section 2

Township 24S

Range 29E

NMPM

Eddy

County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)

3062' GR

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 ☐

OTHER: \_\_\_\_\_ ☐

#### SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐

ALTERING CASING ☐

COMMENCE DRILLING OPNS. ☐

PLUG AND ABANDONMENT ☐

CASING TEST AND CEMENT JOB ☐

OTHER: COMPLETION SUNDRY ☒

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.

8/18/03 - Drilled out DV tool @ 6018'. RIH and tagged PBTD @8360'

8/19/03 - Log TOC @ 3404', GIH w/4" csg gun & perf Bone Springs @8106' '20 w/2 JSPF, perf @ 8128' - 32' and 8005' - 13' total 52 holes

8/20/03 - Spot 2000 gal 10% acetic acid from 8156' - 6100', frac'd w/150,000# 16/30 Ottawa & RC. Lubricate pkr to 7910', RIH w/tbg fish plug.

8/23/03 - Opened well to production @3:00 pm

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE

*Karen Cottom*

TITLE OPERATIONS TECHNICIAN

DATE September 17, 2003

TYPE OR PRINT NAME

Karen Cottom

TELEPHONE NO. (405) 235-3611

(This space for State use)

*Jim W. Brown*

*District Supervisor*

Approved by

TITLE

DATE

SEP 29 2003

Conditions of approval, if any: