orm 3160-5

UNITED STATES

FORM APROVED OMB NO. 1004-0135

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this firm for proposate is off off in to re-write an anandoned well. Use From \$100-5 (API) (of such proposate) SUBMIT IN TRIPLICATE Type of Well	.ugust 1999)	DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT				EXPIRES: NOVEMBER 30, 2000				
SUBMIT IN TRIPLICATE J. Type of Well □ OI Well □ Gas Well □ Other □ S. Well Name and No. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP OAT SEASON OF The Company of Part of The Company of The Comp				LS	[Lease Serial	No.			
1. Type of Well Operator										
Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP Address and Telephone No. 20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-522-8193 Location of Well (Report location death) and in accordance with Foderal requirements)* 1980 FM Lead on Of Well (Report location death) and in accordance with Foderal requirements)* 1980 FM Lead on Of Well (Report location death) and in accordance with Foderal requirements)* 1980 FM Lead on Well (Report location death) and in accordance with Foderal requirements)* 1980 FM Lead on Well (Report location death) and in accordance with Foderal requirements)* 1997 FO SUBMISSION 1997 FO SUBMISSION 1997 FO ACITION 1998 Ind Abandonment Notice 1999 and Abandon Recompleted	SUBMIT IN TRIPLICATE					7. Unit or CA Agreement Name and No.				
Name of Operator DEVON INTEGRY PRODUCTION COMPANY, LP Address and Telephone No. 2 North Broadway, Ste 1500, Oklahema City, OK 73102 405-652-8198 10 Field and Pool or Exploratory Anti-Epop Tiocate Month Seath (Approximate Month (Approximate Month)	a. Type of Well Oil Well Gas Well Other					9 Woll Name and No				
DEVON EMERCY PRODUCTION COMPANY, LP Address and Telephone No. 2 No North Broadway, Ste 1500, Oklahoma City, OK 73102 405-552-3598 10. Field and Pool, or Expiratory ANTELOPE RIDGE NORTH BELL LAKE 1886 FNL. E17-235-34E CHECK APPROPRIATE BOXIS TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA TYPE OS SUBMISSION No. ONCO OF Treat ARE Casing Fracture Treat Subsequent Report Charge R										
Address and Telephone No 20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-552-8798 10 Field and Pool to Exploratory ANTELOPE RIOGE (NORTH BELL LAKE 120 County of Parish 13 State Lea NM ET 233 34E CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OS SUBMISSION Notice of Intent Address Deopen Production (Start/Resume) Water Shut-Off			ION COMPANY I P	•				ed Colli i		
20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-552-8188 10 Field and Poct of Explorators 1886 FAIL 666 FWI. Exploration of Well (Report location clearly and in accordance with Federal recurrents)* Exploration of Well (Report location clearly and in accordance with Federal recurrents)* CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OS SUBMISSION ON Notice of Intent Address Address Subsequent Report Classing Repair Notice of Intent Address Prival Abardonment Notice Classing Repair Deepen Prival Abardonment Notice Classing Repair Deepen Prival Abardonment Notice Classing Repair Deepen Prival Abardonment Notice Classing Repair Deep Bass Prival Abardonment Notice Convert to Injection Prival Abardonment Notice Convert Injection Prival Abardonment Notice Convert Injection Prival Abardonment Notice Convert Injection Recomplete Injection Start, Resume West Integrity Abardon Recomplete Trive Treat Recomplete Re	DEVON ENERGY PRODUCTION COMPANY, EF									
Location of Well Report location clearly and in accordance with Federal requirements)* Location of Well Report location clearly and in accordance with Federal requirements)* Location of Well Report Location clearly and in accordance with Federal requirements)* Location of Well Report Location Clearly and Indiana. Helder Appropriate BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE O'S SUBMISSION And Casing Repair And Active And Casing Repair And Casing Repair Read Abandonment Notice Casing Repair Read Abandonment Notice Convert to Injection Plug Bock Descriptor Provide Converted Convert to Injection Plug Bock Descriptor Converted Converted Convert to Injection Plug Bock Descriptor of Converted Converted Convert to Injection Plug Bock Descriptor of Converted Converted Convert to Injection Plug Bock Descriptor of Converted Converted Convert to Injection Plug Bock Descriptor of Converted Converted Convert to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted Converted Converted to Injection Plug Bock Descriptor of Converted C			0 Oklahama City OK 73102	405-552-819	18	10 Field and F				
Type OF SUBMISSION CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA Type OF ACTION Actidise Deepen Production (Start/Resume) Water Shut-Off Redamation Water Shut-Off Redamation Check Appropriate	20 North Broadway, otc 1000, Oktaholina Oky, O. 10102						1			
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF ACTION Notice of Intent Acidize Deepen Production (Start/Resurve) Water Shut-Off							12. County or Parish 13. State			
Type OF ACTION Notice of Intent	E 17 :							NIVI		
Notice of Intent	7/05.00		APPROPRIATE BOX(s) TO IND	OICATE NATURE OF NOT	TICE, REPORT	, OR OTHER D.	ATA			
Subsequent Report	TYPE US	20RMI22ION		-		n (Start/Pasume) [Water	r Shut-∩ff		
Subsequent Report	☑ Notice of I	Intent					' =	į.		
Final Abandonment Notice	Subsequent Pepert			=	==	==		- '		
3. Describe Proposed or Completed Operations (Coerny steer to Injection — Institute of the Control of the Proposed or Completed Operations (Poers) steer a perferred details, and you performed uses, and upon performed uses, and you performed uses the control of the moduled operations. If the operation results in a multiple completion or no recorded horizontally, you substantially and use the second performance of the moduled operations. If the operation results in a multiple completion or no recorded and analysis of the performance of the moduled operations. If the operation results in a multiple completion or no recorded and analysis of the moduled operations. If the operation results in a multiple completion or no recorded uses the second of the moduled operations. If the operation results in a multiple completion or no recorded uses the performance of the moduled operations. If the operation results in a multiple completion or no recorded uses the performance of the moduled operations. If the operation results in a multiple completion or no recorded uses the performance of the moduled operations. If the operation results in a multiple completion or no recorded uses the performance of the moduled operations. If the operation results in a multiple completion in a multiple completion or no recorded to the operation results in a multiple completion or no recorded to the operation results in a multiple completion or no recorded to the operation results in a multiple completion or no recorded to the operation results in a multiple completion or no recorded to the operation results in a multiple completion or no recorded to the operation results in a recorded to the operation results in a recorded to the operation results in a recorded to the operation resu				Plug and Abandon	Tempora	arily Abandon				
aspen directionshy or recomplish philotrophis, give substrates became measured and true worked depths of all phenotent markets and zeros. Attach the 80th of the process of the models and the 80th of the philotrophism and the file with a file and to the state of the model and the state of the sta			Convert to Injection							
14. I hereby sertify that the foregoing is true and correct Signed Name Norvella Adams Title Sr. Staff Engineering Technician Date 2/1/2007 Approved by Conditions of approval, if any: Title Date APPROVED FEB 6 2007 FEB 18	favorable. H recompleted following pro-	owever, production in the Delaware. ocedure. MIRU PU. POH RIH with CIBP at Perforate Delaware.	on declined rapidly and Devon Energy Product with rods and tubing. and set plug at 10690'. Gare 6800' – 8314' (OA) als. Acidize and frac bases	the decision has b tion Company, LP Cap with 25' ceme).	een made to respectfully ent.	o abandon the requests as	pproval to d	and o so per the		
Conditions of approval, if any: FEB 6 2007 Reverse Side FEB 6 2007 FEB 10 2007	Signed		Name Title		lams	_	2/1/200	07		
Conditions of approval, if any: FEB 6 2007 Reverse Side FEB 6 2007 FEB 10 2007 FEB 10 2007						Date	APP	ROVED		
FEB 6 2007 18 n on Reverse Side			I RIE			- " -				
18 n on Reverse Side EPEDERICK WRIGHT	Conditions of ap	ргочан, п апу:								
n on Reverse Side							FEB	6 2007		
EPEDERICK WRIGHT										
	n on Reverse S	ide					FREDER	RICK WRIGHT		