

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.
30-025-29106

5. Indicate Type of Lease
STATE ☒ FEE ☐

6. State Oil & Gas Lease No.
E-3499-2

7. Lease Name or Unit Agreement Name
CAPROCK STATE

8. Well No.
1

9. Pool name or Wildcat
Caprock, East (Penn)

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 CORPORATION (NEVADA)

3. Address of Operator
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611

4. Well Location
Unit Letter E : 1650 Feet From The north Line and 990 Feet From The west Line

Section 23 Township 12S Range 32E NMPM County

10. Elevation (Show whether DF, RKB, RT, GR, etc.)
GL 4340.5'

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: Acidize to remove skin damage & restore previous production rate ☒

3. 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.

11-07-95 thru 11-09-95 TOH w/rods and pump. RU Newsco. Displaced hole, spotted 1000 gals 7 1/2% Pentol acid. Acid washed perfs 10,375-10,384' seven times. AIR 1 1/2 BPM at 900 psi. ISIP 0 psi.

TIH w/rods and exchange pump. Returned to production.

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

SIGNATURE Candi Graham TITLE ENGINEERING TECHNICIAN DATE January 22, 1996

TYPE OR PRINT NAME Candi Graham TELEPHONE NO. (405) 235-3611

(This space for State use)

APPROVED BY ORIGINAL SIGNED BY TITLE DATE FEB 17 1996

Conditions of approval, if any: