State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

District Office		•		110. Det 1-1	1-07
DISTRICT I P.O. Box 1980, Hobbs NM 88241-1980	OIL CONSERVATION		WELL API NO.		
P.O. Box 1980, Hobbs NM 88241-1980 2040 Pacheco St. DISTRICT II Santa Fe, NM 87505			30-025-02696 5. Indicate Type of Lease		
P.O. Drawer DD, Artesia, NM 88210			3. mulcate Type of		FEE 🗌
DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410			6. State Oil & Gas	Lease No.	
- - · · - · · ·	CES AND REPORTS ON WEL				
(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.)			7. Lease Name or Unit Agreement Name Daisy Chambers		
1. Type of Well: OIL GAS WELL X OTHER			Daisy Chai	mers	
2. Name of Operator			8. Well No.		
Devon Energy Corp.					
3. Address of Operator 20 N. Broadway, Suite 1500 Oklahoma City, OK 73102			9. Pool name or Wildcat Townsend Permo (Upper Penn)		
4. Well Location Unit Letter M: 660	Feet From The South	Line and <u>660</u>	Feet From	The West	Line
Section 26			NMPM Le	ea	County
	DF 3973, KB 3974		2.)		
	propriate Box to Indicate		Report, or O	ther Data	
NOTICE OF IN	-	1		REPORT OF	:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING	OPNS F	PLUG AND ABANDON	IMENT X
PULL OR ALTER CASING		CASING TEST AND CE	MENT JOB		
OTHER:		OTHER:			
12. Describe Proposed or Completed Oper	ations (Clearly state all pertinent de	tails, and give pertinent da	tes, including estima	ted date of starting any	y proposed
work) SEE RULE 1103.					•
12/10-Co Rep NNMOCD Gat 1) 12/14-Set 5½" CIBP on w	/1 @ 9900'.				
3) 12/16-Mix mud @ circ ho	le w/MLF				
+) 12/16-Spot 25 sxs cmt "					
5) 12/17-Cut & pull 7000'5) 12/21-Spot 35 sxs "H" c		WOC. tag TOC @ 6	5948.		
') 12/21-Spot 35 sxs cmt 6		_			
3) 12/21-Spot 35 sxs "C" c					
1) 12/22-Spot 35 sxs "5" c		ed to tag as per	COCD Billy I		
0) 12/22-Perf @ 419'. Pr 1) 12/22-Perf @ 380' - Sqz		9-5/8" csg thru	perfs @ 1 br	om @ 1000 nsi.	16.7
	300'. SIP @ 300 psi.				
(2) Circ 20 sxs "C" cmt 60	' - surface.				
3) Cut wellhead. Install I hereby certify that the information above is to	DHM and backfill cel	lar and pit on l	12/27/99		
P	n . /	Area Mana	ger	12/29	9/99
SIGNATURE Your Man		mue Area Manag		915/	<u> </u>
TYPE OR PRINT NAME Roger Mas	sey		1	TELEPHONE NO. 57()-0646
(This space for State Use)					
APPROVED BY Selly E.	Truham TI	TLE		DATE	e પર્ણિ
CONDITIONS OF APPROVAL, IF ANY				i	
R GWW				\nearrow	B