

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.

30-025-05207

5. Indicate Type of Lease

STATE ☐ FEE ☒

6. State Oil & Gas Lease No.

N/A

7. Lease Name or Unit Agreement Name
W.T. MANN "B"

8. Well No.

4

9. Pool name or Wildcat

Denton (Devonian)

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 TA'd

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 J : 1980 Feet From The SOUTH Line and 2310 Feet From The EAST Line

Section 36 Township 14S Range 37E NMPM LEA County

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

GL 3800'

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: SI for evaluation ☒

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.

01-08-98 Tried to run a pressure test on the casing but would not hold. Possible casing leak between 7" casing and surface casing. SI.

Devon Energy Corporation (Nevada) requests 12 months TA status while evaluating for remedial work or plug and abandoning. SI

CIBP set at 12,340' w/cement on top
Perfs: 12440-12552'

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

SIGNATURE Candi R. Graham

TITLE ENGINEERING TECHNICIAN

DATE June 3, 1998

TYPE OR PRINT NAME Candi Graham

TELEPHONE NO. (405) 235-3611

(This space for State use)

Approved by _____
Conditions of approval, if any:

ORIGINAL SIGNED BY
GARY W. TITLE
FIELD REP. II

DATE JUL 15 1998

Sent Rule 203