

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. 30-025-28189

5. Indicate Type of Lease STATE ☒ FEE ☐

6. State Oil & Gas Lease No. NM899

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER		State AZ
2. Name of Operator Devon Energy Corporation (Nevada)		8. Well No. 2
3. Address of Operator 20 N. Broadway, Suite 1500, OKC, OK 73102-8260		9. Pool name or Wildcat Scharb (Bone Spring)
4. Well Location Unit Letter H : 1980 Feet From The N Line and 660 Feet From The E Line Section 6 Township 19S Range 35E NMPM Lea County 10. Elevation (Show whether DF, RKB, RT, GR, etc.) GI 3931'		

11. 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: Test well for fluid entry ☒

12. 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.

04-07-94 Pulled rods. Ran swab using depthometer. Tagged SN at 8984', no fluid. TOH with swab, no fluid. Rods and swab were dry. Reran rods. SI for evaluation.

4-27-94 MI and spotted pulling unit. Attempted to RU but SD due to high winds.

4-28-94 TOH with rods. Ran swab using depthometer. Tagged SN at 8984', no fluid in hole. Swab, line and rods were dry. TIH with rods. SI.

Current plans are to plug back and perf Upper Bone Spring 9087-9094'. See Form C-101 dated 4/19/94.

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

SIGNATURE C. L. Butts TITLE District Engineer DATE 1/25/50 /cg

TYPE OR PRINT NAME

TELEPHONE NO. _____

(This space for State Use)

ORIGINAL SIGNED BY JERRY SEXTON
DISTRICT 1 SUPERVISOR

APPROVED BY _____ TITLE DISTRICT 1 SUPERVISOR DATE MAY 10 1961

CONDITIONS OF APPROVAL IF ANY:

RECEIVED

MAY 09 1994

**DOUG HODDS
OFFICE**