Submit 3 Copies to Appropriate District Office	State of New Mexico ergy, Minerals and Natural Resources Depart t		t	Form C-103 Revised 1-1-89	
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. <b>30-025-35665</b> 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No.	
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.)				7. Lease Name or Unit Agreement Name Outland State Unit	
1. Type of Well Gas   Oit Well   Well Other     2. Name of Operator				8. Well No.	
DEVON SFS OPERATING, INC.				5	
3. Address of Operator				9. Pool name or Wildcat	
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 228-7512				Wilson Morrow Gas	
4 Well Location		· · · · · · · · · · · · · · · · · · ·			
Unit Letter G :1980' Feet From The North Line and 1650' Feet From The East Line					
Section 11	Township 21S Range		<u>APM</u>	Lea County	
Image: Market DF, RKB, RT, GR, etc.)     Image: Market DF, RKB, RT, GR, etc.)       Image: Market DF, RKB, RT, GR, etc.)     Image: Market DF, RKB, RT, GR, etc.)					
Check Appropriate Box To Indicate Nature Of Notice, Report, Or Other Data					
			QUEN	IT REPORT OF:	
PERFORM REMEDIAL WOF		REMEDIAL WORK		ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	COMMENCE DRILLING OPN	s. 🗌	PLUG AND ABANDONMENT	
PULL OR ALTER CASING		CASING TEST AND CEMENT	јов [	]	
OTHER: Waiver Request	□	OTHER:			
13. Describe Proposed or Completed	d Operations (Clearly state all pertinent details, and give pert	inent dates, including estimated date of	starting any	proposed work.) SEE RULE 1103.	

Due to the low volume of production from this well and the limited value of the data that will be obtained from a 4-point test. Devon requests a wavier of the 4-point test.

Production on 1/23/02 0 BO 18 BW 251 MCF		25262128293037 123 123 123 123 123 123 123 123 123 123
	f mulmanuladas and balief	CE C
I hereby certify that the information above is true and complete to the best of SIGNATURE ALLOW ATTEMPT SIGNATURE TYPE OR PRINT NAME Karen Cottom	TITLE ENGINEERING TECHNICIAN	DATE February 19, 2002 TELEPHONE NO. (405) 235-3611
(This space for State use) Approved by Conditions of approval, if any:	ORIGINAL SIGNED BY PAUL F. KAUTZ TITLEPETROLEUM ENGINEER	DATE MAR 1 3 2002