Submit 3 Copies To Appropriate District	State of New N	lexico		Form C-103	
Office District I	Energy, Minerals and Na	tural Resources		June 19, 2008	
1625 N French Dr , Hobbs, NM 88240			WELL API NO.		
<u>District II</u> 1301 W Grand Ave, Artesia, NM 88210	OIL CONSERVATION DIVISION		30-015-39650		
District III	ict III 1220 South St. Francis Dr		5. Indicate Type of Lease		
1000 Rio Brazos Rd, Aztec, NM 87410	razos Rd, Aztec, NM 87410 Santa Fe, NM 87505		-	FEE	
<u>District IV</u> 1220 S St Francis Dr , Santa Fe, NM	Suita i e, i vivi	37303	6. State Oil & Ga	s Lease No.	
87505					
SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or	Unit Agreement Name	
(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			Lone Tree Draw 13 State Com		
PROPOSALS)		8. Well Number	Draw 13 State Com		
1. Type of Well: Oil Well Gas Well Other		8. Well Number			
2. Name of Operator				9. OGRID Number	
Devon Energy Production Co., LP			i	6137	
3. Address of Operator		10. Pool name or			
20 North Broadway, OKC OK 73102-8260		Fenton; Delaware, Northwest			
4. Well Location		 			
	feet from the North	line and 355	feet from the Wes	st line	
	vnship 21S Range 27E		Eddy County,		
	11. Elevation (Show whether D				
	3195' GI				
12. Check A	ppropriate Box to Indicate	Nature of Notice	Report or Other	Data	
· ·	• •		•		
NOTICE OF INT		1	BSEQUENT REI		
- t				ALTERING CASING	
TEMPORARILY ABANDON	CHANGE PLANS	k		P AND A	
PULL OR ALTER CASING DOWNHOLE COMMINGLE	MULTIPLE COMPL	CASING/CEMEN	AL JOB		
DOWNHOLE COMMINGLE					
OTHER:		OTHER: Drillin	g Operations: Addition	onal 2' 🛛	
13. Describe proposed or comple					
	k). SEE RULE 1103. For Multi	iple Completions: A	Attach wellbore diagra	am of proposed completion	
or recompletion.					
04/02/2012:				·	
				DECENTER	
MIRU Butches rat hole services. Drill additional 2' on the above well, for a total of 98'.			Drill time 1 hour.	RECEIVED	
				APR 1 3 2012	
				NMOCD ARTESIA	
•				120;/{	
} -					
Spud Date:	Rig Release I	Date:			
	/ ,				
I hereby certify that the information a	boye is true and complete to the	best of my knowled	ge and belief.		
	//				
SIGNATURE /	//TITLESr. S	taff Engineering Te	chnicianDATE	04/02/2012	
Time on maint was Standard A M	D	tanhania Var	1 PMONT	(405) 550 5000	
Type or print name _Stephanie A. Vs. For State Use Oaly	isaga E-maii address: S	tepnanie. Y sasaga@	dvn.com PHONE	z:(405)-552-7802	
RO State Ost Only	λ	TIES .		1.1	
APPROVED BY:	TITLE DIS	TM XA	ewist DA	TEO 4/16/2012	
Conditions of Approval (if any):					