

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources

Form C-103
 Revised July 18, 2013

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

WELL API NO. 30-015-31725
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Campana 2M State
8. Well Number 1
9. OGRID Number 6137
10. Pool name or Wildcat 97782 Black River; Upper Penn Gas

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

2. Name of Operator
DEVON ENERGY PRODUCTION COMPANY, LP.

3. Address of Operator
333 WEST SHERIDAN AVENUE, OKC, OK 73102

4. Well Location
 Unit Letter M : 660 feet from the South line and 660 feet from the West line
 Section 2 Township 24S Range 26E NMPM Eddy, County New Mexico

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
3298'

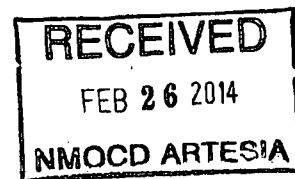
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Devon Energy Production Company, LP Respectfully requests to run an MIT on the referenced well as follows:

- Test anchors
- MIRU WSU
- ND wellhead. NU BOPE and test per company guidelines
- Release packer and TOH with 2-3/8" tubing
- Make gauge ring/junk basket run to 10,020' KBM
- Wireline set 5-1/2" CIBP for 5-1/2", 17#, L-80 casing @ 10,000'
- Dump bail 35' of cement on top of CIBP (PBSD should now be @ 9,965' KBM)
- RD WL
- TIH with seating nipple and 2-3/8" tubing to ≈9,915'
- Load and circulate hole with 2% KCL containing corrosion inhibitor
- Test 5-1/2" casing and CIBP (w/ cement top) to 500 psi at surface for 30 minutes, chart test and have NMOCD witness
- Bleed off pressure. ND BOPE. NU wellhead.
- Close and secure wellhead valves
- RDMO WSU
- Shut-in well



TA status may be granted after a successful MIT test is performed. Contact the OCD to schedule the test so it may be witnessed.

TA'ing well to bring well into OCD compliance, until well can be evaluated.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. *LAST PRCD 12/1/2012*

SIGNATURE Erin Workman TITLE Regulatory Compliance Associate DATE 02.24.14

Type or print name Erin Workman E-mail address: Erin.workman@dvn.com PHONE: (405)552-7970

For State Use Only

APPROVED BY: Rebecca Ince TITLE COMPLIANCE OFFICER DATE 3/26/14

Conditions of Approval (if any):