| Submit 1 Copy To Appropriate District State of New Mexico   | Form C-103   |
|---|--|
| Office<br>District I – (575) 393-6161 Energy, Minerals and Natural Resources  | Revised July 18, 2013  |
| 1625 N. French Dr., Hobbs, NM 88240   | WELL API NO.   |
| District II – (575) 748-1283<br>811 S. First St. Attesia NM 88210 OIL CONSERVATION DIVISION   | 30-015-43371   |
| 811 S. First St., Artesia, NM 88210OIL CONSERVATION DIVISIONDistrict III - (505) 334-61781220 South St. Francis Dr.   | 5. Indicate Type of Lease                                    |
| 1000 Rio Brazos Rd. Aztec. NM 87410   | STATE FEE  |
| District IV – (505) 476-3460 Santa Fe, NM 87505   | 6. State Oil & Gas Lease No.                                 |
| 1220 S. St. Francis Dr., Santa Fe, NM<br>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   | Emerald PWU 20   |
| PROPOSALS.)   | 8. Well Number   |
| 1. Type of Well: Oil Well 🛛 Gas Well 🗌 Other  |  |
|   | 11H  |
| 2. Name of Operator   | 9. OGRID Number  |
| Devon Energy Production Company, LP   | 6137   |
| 2 Address of Operator   | 10. Pool name or Wildcat                                     |
| 3. Address of Operator<br>333 West, Sheridan Avenue   | 10. Pool name or wildcat                                     |
| Oklahoma City, OK 73102-5015 405-552-6558   | Scanlon Draw; Bone Spring (55510)                            |
|   | Stanion Draw, Done Spring (55510)                            |
| 4. Well Location  |  |
| Unit Letter <u>L</u> <u>2434</u> feet from the <u>S</u> line and <u>284</u> feet from the <u>W</u> line   |  |
| Section 20 Township 19S Range 29E NMPM  | County Eddy  |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.   |  |
| 3331' GR  |  |
|   |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  |  |
|   |  |
|   | SEQUENT REPORT OF:   |
| PERFORM REMEDIAL WORK  PLUG AND ABANDON  REMEDIAL WOR   | K ALTERING CASING  |
| TEMPORARILY ABANDON 🔲 CHANGE PLANS 🔲 COMMENCE DR  | ILLING OPNS.   |
| PULL OR ALTER CASING 🔲 MULTIPLE COMPL 🔲 CASING/CEMEN  | Т ЈОВ 🔲  |
| DOWNHOLE COMMINGLE  |  |
|   | -  |
| OTHER: OTHER:   |  |
|   |  |
| 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 Co., L.P. respectfully requests approval to place this well in Drilling shut-in status for one year                                   |  |
| pending infrastructure and gas take-away, effective upon approval.  |  |
| penuing minusi usual and gas iano-away, encentre apon approval.   |  |
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| I hereby certify that the information above is true and complete to the best of my knowledg   | e and belief.  |
|   |  |
| L'AMD   |  |
| SIGNATURE ///// SIGNATURE ////////////////////////////////////  |  |
| SIGNATURE ///ndu Wood TITLE: Regulatory SI  | pecialist DATE 5/5/2016                                      |
|   | pecialist DATE 5/5/2016                                      |
| Type or print name: Linda Good E-mail address: linda.good@dvn.com   | <u>pecialist</u> DATE 5/5/2016<br>PHONE: <u>405-552-6558</u> |
| Type or print name: Linda Good E-mail address: linda.good@dvn.com<br>For State Use Only ACCOPIE: TO FOCOID  |  |
| Type or print name: Linda Good E-mail address: linda.good@dvn.com<br>For State Use Only ACCAPIST for FOCOID   | PHONE: <u>405-552-6558</u>                                   |
| Type or print name:       Linda Good       E-mail address:       linda.good@dvn.com         For State Use Only       ACCOPIST FOR FOCOTO         APPROVED BY: |  |
| Type or print name: Linda Good E-mail address: linda.good@dvn.com<br>For State Use Only ACCAPIST for FOCOID   | PHONE: <u>405-552-6558</u>                                   |
| Type or print name:       Linda Good       E-mail address:       linda.good@dvn.com         For State Use Only       ACCOPIST FOR FOCOTO         APPROVED BY: | PHONE: <u>405-552-6558</u>                                   |
| Type or print name:       Linda Good       E-mail address:       linda.good@dvn.com         For State Use Only       ACCOPIST FOR FOCOTO         APPROVED BY: | PHONE: <u>405-552-6558</u>                                   |