International Designe   Company	Submit 1 Copy To Appropriate District Office	State of New Me		Form C-103		
Debetal (1975) 748-1283   30-015-44372   118. First 3., raiss 1., raiss 1.						
Debatis III - (209) 334-6178   Santa Fe, NM 87305	<u>District II</u> – (575) 748-1283	strict II - (575) 748-1283 OIL CONCEDIVATION DIVISION		30-015-44372		
Santa Fe, NM 87505   6. State Oil & Gis Lease No.   1220 S. N. Fruncis Dr. Santa Fe, NM 87505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 87505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. N. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. R. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. R. Fruncis Dr. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. R. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. R. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. R. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. R. Santa Fe, NM 97505   7. Lease Name or Unit Agreement Name   1220 S. R. Santa Fe, NM 97505   7. Lease Name or	District III - (505) 334-6178	011 5. 1 H31 51., 7 M C314, 14.11 60210				
120 SS.   Francis Dr. Sentia Re, NM   27955.   200 STINDRY NOTICES AND REPORTS ON WELLS   200 STINDRY NOTICES		ztec, NM 87410				
SUNDRY NOTICES AND REPORTS ON WELLS   7. Lease Name or Unit Agreement Name ODRY PROPOSALS TO BRILL OR TO DEEPRO PLANS   7. Lease Name or Unit Agreement Name ODRY PROPOSALS   7. Lease Name or Unit Agreement Na						
DIFFERENT RESERVOR, USE - APPLICATION FOR PERMITT (FORM C-101) FOR SUCH   Proposals.]	SUNDRY NOTICES AND REPORTS ON WELLS			7. Lease Name or Unit Agreement Name		
Tithe				Only PW/H 20 28		
2. Name of Operator    Devon Energy Production Company, L.P.   Devon Energy Production				9 Wall Number		
3. Address of Operator  3. Operator  3. Address of Operator  3. Address of Operator  3. West Sheridan, Oklahoma City, Ok 73102  10. Pool name or Wildcat  PARKWAY, BONE SPRING; WEST  11. Elevation (Show whether DR, RKB, RT, GR, etc.)  GC, 3310  12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data  NOTICE OF INTENTION TO:  PERFORM REMEDIAL WORK   PLUG AND ABANDON   REMEDIAL WORK   ALTERING CASING   COMMENCE DRILLING OPNS   PAND A   CASING/CEMENT JOB    DOWNHOLE COMMINGLE   OPHICA COMPL   COMPLICATION OF SILLING OPNS   PAND A   CASING/CEMENT JOB    OTHER: Completion   OPHICA COMPL   COMPLICATION OF SILLING OPNS   PAND A   CASING/CEMENT JOB    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.  3. Optication of the Completion of Received Described to the Dest of Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  3. Optication of the Completion of Received Described	2 Name of Operator					
4. Well Location Unit Letter U	Devon Energy Production Company, c.P.					
Well Location	3. Address of Operator 333 West Sheridan, Oklahoma City, OK 73102					
Unit Letter L 2295 feet from the South line and 380 feet from the West line Section 29 Township 195 Range 296 NMPM County EDOY    11. Elevation (Show whether DR, RKB, RT, GR, etc.)	4. Well Location			PARKWAY, BONE SPRING	o; WES1	
II. Elevation (Show whether DR, RKB, RT. GR, etc.)   GL: 3310"   12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:		2295 feet from the South	line and	380 feet from the West	line	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   NOTICE OF INTENTION TO:	Section 29			•	EDDY	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data    NOTICE OF INTENTION TO:   SUBSEQUENT REPORT OF:		1	·			
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   ALTERING CASING   ALTERING CASING   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   DUMBRICE COMMINGLE   DOWNHOLE COMMINGLE   OTHER: Completion   CASING/CEMENT JOB   PAND A   DOWNHOLE COMMINGLE   DOWNHOLE COMMINGLE   OTHER: COMPLETION   CASING/CEMENT JOB   PAND A   DOWNHOLE COMMINGLE   PAND A   DOWNHOLE COMMINGLE   PAND A   DOWNHOLE COMPLETION   PAND A   DOWNHOLE CASING/CEMENT JOB   PAND A   DOWNHOLE COMPLETION   PAND A   DOWNHOLE CASING/CEMENT JOB   PAND A   DOWNHOLE COMPLETION   PAND A   DOWNHOLE CASING/CEMENT JOB   PAND A   DOWNHOLE COMPLETION   PAND A   DOWNHOLE CASING/CEMENT JOB   PAND A		_j GL: 3	3310.	<u> </u>		
NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   ALTERING CASING   ALTERING CASING   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   DUMBRICE COMMINGLE   DOWNHOLE COMMINGLE   OTHER: Completion   CASING/CEMENT JOB   PAND A   DOWNHOLE COMMINGLE   DOWNHOLE COMMINGLE   OTHER: COMPLETION   CASING/CEMENT JOB   PAND A   DOWNHOLE COMMINGLE   PAND A   DOWNHOLE COMMINGLE   PAND A   DOWNHOLE COMPLETION   PAND A   DOWNHOLE CASING/CEMENT JOB   PAND A   DOWNHOLE COMPLETION   PAND A   DOWNHOLE CASING/CEMENT JOB   PAND A   DOWNHOLE COMPLETION   PAND A   DOWNHOLE CASING/CEMENT JOB   PAND A   DOWNHOLE COMPLETION   PAND A   DOWNHOLE CASING/CEMENT JOB   PAND A	12. Check	Appropriate Box to Indicate N	ature of Notice,	Report or Other Data		
PERFORM REMEDIAL WORK   PLUG AND ABANDON   CHANGE PLANS   COMMENCE DIALLING OPNS   ALTERING CASING   PULL OR ALTER CASING   MULTIPLE COMPL   CASING/CEMENT JOB   PAND A   PAND A   DUMNHOLE COMMINGLE   OTHER: Completion   OTHER: Completion   OTHER: Completion of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.  13/06/2018-06/3/2018: MIRU WL & PT Good to 5000 PSI in 1000 PSI increments 15 mins. Till & ran CBL, found TOC @ 3150'. Till w/pump through frac plug and guns. Perf Bone Spring, 9,224'-16591', total 916 holes. Frac'd 9,224'-16591', in 38 stages. Frac totals 11,265,990#prop. iD frac, MIRU PU, NU BOP, DO plugs & CO to PBTD 16,636'. CHC, FWB, ND BOP. RIH w/ 247 jts 2-7/8" L-80 tbg, set @ 8690.5'. TOP.  RECEIVED  AUG 1 3 2018  DISTRICT II-ARTESIA O.C.D.  TITLE Regulatory Analyst DATE 8/10/2018  Type or print name Etis Workman E-mail address: Erin.Workman@dvn.com PHONE: 405-552-7970  For State Use Only  APPROVED BY WALLAN TITLE MANUAL AND DATE 9-C3-2014						
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS PAND A DULT OR ALTER CASING MULTIPLE COMPL CASING/CEMENT JOB CASING/CEMENT JOB CASING/CEMENT JOB DOWNHOLE COMMINGLE MULTIPLE COMPL CASING/CEMENT JOB CASIN						
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AUG 1 3 2018  DISTRICT II-ARTESIA O.C.D.  Title Regulatory Analyst  Title Regulatory Analyst  DATE 8/10/2018  DATE 8-13-2018  DATE 8-13-2018  DATE 8-13-2018  DATE 8-13-2018						
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I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  TITLE Regulatory Analyst  Type or print name Erin Workman  E-mail address: Erin.Workman@dvn.com  PHONE: 405-552-7970  For State Use Only  APPROVED BY: Match Hum TITLE Duswill Analyst  DATE 8-13-2018		HEOEIVED			<b>→</b> ;	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  TITLE Regulatory Analyst  Type or print name Erin Workman  E-mail address: Erin.Workman@dvn.com  PHONE: 405-552-7970  For State Use Only  APPROVED BY: Match Hum TITLE Duswill Analyst  DATE 8-13-2018	AUD T O core					
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Type or print name _Eriq Workman	SIGNATURE SIGNATURE	Men TITLE ROOM	latony Analyst	DATE 8/10/201	10	
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