Submit One Copy To Appropriate District State of Ne	w Mexico	Form C-103
Office		Revised November 3, 2011
State of New Mexico   Office <u>District 1</u> 1625 N. French Dr., Hobbs, NM 88240		WELL API NO. 30-005-62255
811 S. First St., Artesia, NM 88210 OIL CONSERVATION DIVISION		5. Indicate Type of Lease STATE 🕅 FEE [];
District IV 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 South St. Francis Dr., Santa Fe, NM 87505 1220 S. St. Francis Dr., Santa Fe, NM 87505 87505		6. State Oil & Gas Lease No.
87505		
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A		7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		MESA STATE COM
1. Type of Well: Oil Well Gas Well Other		8. Well Number 3
2. Name of Operator DEVON ENERGY PRODUCTION CO LP		9. OGRID Number 6137
3. Address of Operator PO BOX 250, ARTESIA, NM 88211		10. Pool name or Wildcat Diamond Mound; Morrow (Gas)
4. Well Location		Diamond Would, Worrow (Gas)
Unit Letter <u>L</u> : <u>1980</u> feet from the SOUTH line and <u>660</u> feet from the <u>WEST</u> line		
Section <u>31</u> Township <u>15S</u> Range <u>28E</u> NMPM County <u>CHAVEZ</u>		
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3621' GL		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data		
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS PAND PULL OR ALTER CASING CHANGE MULTIPLE COMPL CASING/CEMENT JOB		<u> </u>
OTHER:   Image: Location is ready for OCD inspection after P&A     Image: All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.		
$\square$ An pits have been felled and leveled. Cathodic protection holes have been properly abandoned.		
A steel below ground identification marker plate is welded to the top of the plugged wellhead, buried at least 3' below surface with GPS coordinates as follows:32.9706497; -104.1779175		
It shows the OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR		
UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY		
STAMPED ON THE MARKER'S SURFACE.		
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and		
other production equipment. The riser must stay in place. <u>Risers</u> Not Removed Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.		
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with		
OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location $\sqrt{1 + 1}$		
from lease and well location. Trash Aroad Location		
to be removed.) $p _{Ast} \in L_{rer}$ Not Removed All other environmental concerns have been addressed as per OCD rules.		
Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-		
retrieved flow lines and pipelines. Concrete Not removed - N Sile of loc If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well		
[X] If this is a one-well lease or last remaining well on lease: all electrical service poles and lines have been removed from lease and well location, except for utility's distribution infrastructure.		
When all work has been completed, return this form to the appropriate District office to schedule an inspection.		
SIGNATURE . Marsur		
TYPE OR PRINT NAMEDenise Menoud E-MAIL: <u>denise.menoud@dvn.com</u> PHONE:575-746-5544		
APPROVED BY: DENIED DETER DENIED GC DATE 5/21/19		
APPROVED BY: UENIED TITLE DEVOI - Internal DATE 5/21/19		

٢

Conditions of Approval (if any):

A 1 4 1

4