

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
May 27, 2004

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

WELL API NO. 30-015-36197
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 COTTON DRAW UNIT
8. Well Number 111
9. OGRID Number 6137
10. Pool name or Wildcat DELAWARE; BRUSHY CANYON

APR 22 2008

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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>	
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, L.P.	
3. Address of Operator 20 NORTH BROADWAY, OKLAHOMA CITY, OK 73102-8260 (405) 228-8699	
4. Well Location C Unit Letter 660 : feet from the North line and 1982 feet from the West line Section 36 Township 24S Range 31E NMPM Eddy County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3503' GL	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type Depth to Groundwater Distance from nearest fresh water well Distance from nearest surface water	
Pit Liner Thickness: mil Below-Grade Tank: Volume bbls; Construction Material	

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 type="checkbox"/>	CHANGE PLANS <input checked="" 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"/>	
Cementing & Total Depth each casing string			
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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Devon Energy Production L. P. request to change the proposed cementing program and depth to the APD.

13 3/8" Surface - 735'

Lead w/ 450 sacks (35:65) Poz (Fly Ash): Premium Plus C Cement + 2% Calcium Chloride + 0.125 lbs/sx Cello Flake + 6% bwoc Bentonite + 93.6% Fresh Water

Tail w/ 250 sacks Premium Plus C Cement + 2% bwoc Calcium Chloride + 0.125 lbs/sack Cello Flake + 56.3% Fresh Water

8 5/8" Intermediate-4400'

Lead w/ 1025 sacks (35:65) Poz (Fly Ash): Premium Plus C Cement + 5% bwow Sodium Chloride + 0.125 lbs/sack Cello Flake + 6% bwoc Bentonite + 107.8% Fresh Water

Tail w/ 300 sacks (60:40) Poz (Fly Ash): Premium Plus C Cement + 5% bwow Sodium Chloride + 0.125 lbs/sack Cello Flake + 0.4% bwoc Sodium Metasilicate + 4% bwoc MPA-5 + 64.7% Fresh Water

5 1/2" Production-9700'

Lead w/ 330 sacks (35:65) Poz (Fly Ash) Class H Cement + 0.125 lbs/sx Cello Flake + 3 lbs/sx LCM-1 + 6% bwoc Bentonite + 0.4% bwoc FL-52A + 99.3% Fresh Water

Tail w/ 960 sacks (60:40) Poz (Fly Ash) Class H Cement + 1% bwow Sodium Chloride + 0.2% bwoc R-3 + 0.125 lbs/sack Cello Flake + 2 lbs/sx Kol Seal + .75% bwoc BA-10A + 4% bwoc MPA-5 + 0.2% BWOC fl-51a + 61.9% Fresh Water

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOC guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Judy A. Barnett TITLE Regulatory Analyst DATE 4/22/08

Type or print name Judy A. Barnett

E-mail address:

Telephone No. 405-228-8699

For State Use Only

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

Accepted for record - NMOC