

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. See Below
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 See Below
8. Well Number See Below
9. OGRID Number 6137
10. Pool name or Wildcat WC-025 G-06 S183518A; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 See Below feet from the _____ line and _____ feet from the _____ line
Section See Below Township Range NMPM Lea, County

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐
DOWNHOLE COMMINGLE ☐
CLOSED-LOOP SYSTEM ☐
OTHER: Central Tank Battery ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐
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 Company, LP respectfully requests approval for the Central Tank Battery & Commingling for the following wells:

	Sec- T- R	API	POOL	LEASE NUMBER
Shaqtus 26 State Com 1H	Sec. 35-T21S-R31E	30-015-39819	40299 Lost Tank; Delaware	NM VO 8747, NM VO 8760, NM VO 3604
Shaqtus 26 State Com 2H	Sec. 35-T21S-R31E	30-015-39896	40299 Lost Tank; Delaware	NM VO 8747, NM VO 8760, NM VO 3604
Shaqtus 26 State Com 3H	Sec. 35-T21S-R31E	30-015-39994	40299 Lost Tank; Delaware	NM VO 8747, NM VO 8760, NM VO 3604
Shaqtus 26 State Com 4H	Sec. 35-T21S-R31E	30-015-40012	40299 Lost Tank; Delaware	NM VO 8747, NM VO 8760, NM VO 3604

There is a central tank battery located at the Shaqtus 26 State Com 1H that is utilized by the Shaqtus 26 State Com 1H & 2H. The production from the two wells will come to a common production header with isolation lines to route each wells production. The header is located on the south side of the facility at the Shaqtus 26 State Com 1H location. There is a central tank battery located at the Shaqtus 26 State Com 3H that is utilized by the Shaqtus 26 State Com 3H & 4H. The production from the two wells will come to a common production header with isolation lines to route each wells production. The header is located on the north side of the facility at the Shaqtus 26 State Com 3H location. The produced gas from the Shaqtus 26 State Com 1H & 2H will flow first through a separator, then to a check meter #390-49164 on location before flowing to the DCP sales meter #131-35405 located in the SW corner of Section 35-T21S-R31E in Eddy County, NM. The produced gas from the Shaqtus 26 State Com 3H & 4H will flow first through a separator, then to a check meter #390-33-176 on location at the Shaqtus 26 State Com 3H before flowing to the DCP sales meter #131-35405 located at the Shaqtus 26 State Com 1H location in SW corner of Section 35-T21S-R31E in Eddy County, NM. The well test method will be conducted at least once per month, for a minimum of 24 hours each well. The working, royalty, and overriding interest owners are identical, so no additional notification is necessary.

Spud Date:

Rig Release Date:

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: Erin Workman TITLE: Regulatory Compliance Associate DATE: 12/19/13

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

For State Use Only

APPROVED BY: Erin Workman TITLE: Director DATE: 1/21/14
Conditions of Approval (if any):