

Submit One Copy To Appropriate District
Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., 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

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

Form C-103
Revised November 3, 2011

<p>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.)</p> <p>1. Type of Well: <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other</p> <p>2. Name of Operator DEVON ENERGY PRODUCTION CO LP</p> <p>3. Address of Operator PO BOX 250, ARTESIA, NM 88211</p> <p>4. Well Location Unit Letter <u>E</u> : 1980 feet from the <u>NORTH</u> line and 660 feet from the <u>WEST</u> line Section <u>2</u> Township <u>24S</u> Range <u>29E</u> NMPM County <u>EDDY</u></p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3067' GL</p>		<p>WELL API NO. 30-015-25653</p> <p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/></p> <p>6. State Oil & Gas Lease No.</p> <p>7. Lease Name or Unit Agreement Name H B 2 STATE</p> <p>8. Well Number 1</p> <p>9. OGRID Number 6137</p> <p>10. Pool name or Wildcat</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p>NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p>SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/></p> <p><input checked="" type="checkbox"/> Location is ready for OCD inspection after P&A</p>
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☒ All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan.

☒ Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned.

☒ A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. 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 cleared of all junk, trash, flow lines and other production equipment.

☒ Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.

☒ All flow lines, production equipment (pertaining to this well) and junk have been removed from lease and well location.

☒ All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.) **TB sign shows to be for this well**

☒ 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. **Meter run not removed**

☒ All electrical service poles and lines (pertaining to this well) have been removed from lease and well location, except for utility's distribution infrastructure.

THERE IS AN ACTIVE BATTERY REMAINING ON LOCATION.

When all work has been completed, return this form to the appropriate District office to schedule an inspection.

SIGNATURE Denise Menoud TITLE ADMIN FIELD SUPPORT DATE 10/22/2020

TYPE OR PRINT NAME Denise Menoud E-MAIL: denise.menoud@dmn.com PHONE: 575-746-5544
For State Use Only

APPROVED BY: E **DENIED** DATE gc 11/10/2020
Conditions of Approval (if any):