Submit 1 Copy To Appropriate District Office	State of New Mexico	40405 Form C-103
District I	Energy, Minerals and Natural Resource	WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II	###AII CONICEDI/ATION DIVICION	
1301 W. Grand Ave., Artesia, NM1882105 O District III	©DOIL CONSERVATION DIVISION 1220 South St. Francis Dr.	5. Indicate Type of Lease
1000 Die Desere Dd. Astes NM 97410	1220 Douth St. 1 failers Di.	STATE 🗵 FEE 📙 '
District IV 1220 S. St. Francis Dr., Santa Fe, NMR 18 87505	Z013 Santa 1 C, 1414 0 7 3 0 3	6. State Oil & Gas Lease No.
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.)		PLAYA 2 STATE
1. Type of Well: Oil Well 🔲 Gas Well 🔲 Other		8. Well Number 1H
2. Name of Operator DEVON ENERGY PRODUCTION CO. LP		9. OGRID Number 6137
3. Address of Operator PO POY 250, APTESIA, NM, 88211		10. Pool name or Wildcat
PO BOX 250, ARTESIA, NM 882	11	SCHARB; BONE SPRING
4. Well Location Unit Letter: N; 330 feet	from the SOUTH line and 2190 feet from the V	WEST line
Section 2 Towns		NMPM LEA County
	11. Elevation (Show whether DR, RKB, RT, GR	
	3979' GL	management of the first state of the state o
10 (1 1 4	· · · · · · · · · · · · · · · · · · ·	·
12. Check Ap	propriate Box to Indicate Nature of Not	ace, Report or Other Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:		
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS. P AND A		
	MULTIPLE COMPL CASING/CEI	
DOWNHOLE COMMINGLE		
OTUED. \square	OTUED (had lact land 4
OTHER: 13. Describe proposed or complet	OTHER: O	s, 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 recon	pletion.	
DEVON ENERGY PRODUCTION CO	O., LP RESPECTFULLY REQUESTS PERMI	SSION TO INSTALL A 3" TRUCK LACT AT
	Y. THIS BATTERY IS LOCATED IN SECTION	
ATTACHED IS THE NEW FACILITY	Y DIAGRAM THE LACT UNIT SERIAL NIL	MBER WILL BE SUBMITTED ONCE IT HAS 7
BEEN PUT INTO OPERATION.	DINGIGHT. THE ENGL GIVIT SERVICE	WIDER WILL BE SODWITTED ONCE IT HAS T
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		ž.
Spud Date:	Rig Release Date:	
I hereby certify that the information about	ove is true and complete to the best of my know	eledge and belief.
I Samuel In 1 1	Rect Than A A	
SIGNATURE / C) (1) (1) (1)	W)UMMTERLE FIELD ADMI	<u>N SUPPORT</u>
DATE: 12-15-13		
Type or print name: GRACIELA C. B	SUSTAMANTE E-mail address: Gracie Bu	stamante@dvn.com PHONE: 575-746-5561
For State Use Only	1	<u> </u>
ADDDOVED DO	Some TITLE DIST. NO	DATE 3-20-2013
APPROVED BY Conditions of Approval (if any):	IIILE JISS. //	DATE DATE
		MAR 20 2013
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