

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

HOBBS OCB
SEP 17 2018
RECEIVED

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 August 1, 2011

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|--------------------------------------|--|
| WELL API NO. | 30-025-44416 |
| 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 | Thistle Unit |
| 8. Well Number | 99H |
| 9. OGRID Number | 6137 |
| 10. Pool name or Wildcat | Triple X; Bone Spring |

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|---|--|
| 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 | |
| 2. Name of Operator | Devon Energy Production Company, L.P. |
| 3. Address of Operator | 333 West Sheridan, Oklahoma City, OK 73102 |
| 4. Well Location | Unit Letter C : 335 feet from the North line and 1760 feet from the West line Section 22 Township 23S Range 33E NMPM County LEA |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 3711.5' | |

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 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"/> | |
| DOWNHOLE COMMINGLE <input type="checkbox"/> | | | |
| OTHER: <input type="checkbox"/> | | OTHER: Completion <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

5/28/18-8/8/18: MIRU WL & PT to 10Kpsi for 15 mins, OK. TIH & ran CBL, found TOC @ 5600'. TOC Varinace NOI filed 6/19.
TIH w/pump through frac plug and guns. Perf Bone Spring, 10,842'-18,006'. Frac totals 12,505,992# prop, 22,470 gal acid. ND frac,
MIRU PU, NU BOP, DO plugs & CO to PBTD 17,336'. CHC, FWB, ND BOP. RIH w/308 jts 2-7/8" L-80 tbg, set @ 10,262'. TOP.

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

SIGNATURE Rebecca Deal TITLE Regulatory Analyst DATE 9/13/2018

Type or print name Rebecca Deal E-mail address: Rebecca.Deal@dmn.com PHONE: 405-228-8429

For State Use Only

APPROVED BY: Karen Sharp TITLE Staff Mgr DATE 9-18-18
Conditions of Approval (if any):