Submit 1 Copy To Appropriate District OfficeState of New MexicoDistrict II - (575) 393-6161Energy, Minerals and Natural Resources1625 N. French Dr., Hobbs, NM 88240OIL CONSERVATION DIVISIONDistrict II - (575) 748-1283OIL CONSERVATION DIVISIONStritet III - (505) 334-6178OIL CONSERVATION DIVISION1000 Rio Brazos Rd., Aztec, NM 87410OCD - HQB20 South St. Francis Dr.1000 Rio Brazos Rd., Aztec, NM 8741004/03/2017 Santa Fe, NM 875051220 S. St. Francis Dr., Santa Fe, NMRECEIVED	Form C-103 Revised July 18, 2013 WELL API NO. 30-025-42264 5. Indicate Type of Lease STATE SFEE 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 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	7. Lease Name or Unit Agreement Name Chincoteague 32 State Com
1. Type of Well: Oil Well 🔀 Gas Well 🔲 Other	8. Well Number 5H
2. Name of Operator Devon Energy Production Co., L.P. Linda Good	9. OGRID Number 6137
3. Address of Operator	10. Pool name or Wildcat
333 West Sheridan Ave, Oklahoma City, OK 73102 405-552-6558	WC-025 G-06 S253206M; Bone Spring
4. Well Location Unit Letter P : 200 feet from the South line and	880 Contraction Tract
	880 feet from the East line
Section 32 Township 24S Range 32E 11. Elevation (Show whether DR, RKB, RT, GR, etc.,	NMPM County Lea
3470' GR	
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM COTHER: OTHER: Change Original APD OTHER: 13. Describe proposed or completed operations. (Clearly state all pertinent details, and of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Cort	SEQUENT REPORT OF: A ALTERING CASING LLING OPNS. P AND A JOB I give pertinent dates, including estimated date
proposed completion or recompletion.	
Devon Energy Prod. Co., L.P. respectfully requests to change the BHL from 330 FNL & 1960' FEL, of 32-24S-32E. Please see attachments for revised d	

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 Sinda Good	TITLE Regulatory Compliance Specialist DATE 4/3/2017	_	
Type or print name Linda Good For State Use Only	E-mail address: linda.good@dvn.com PHONE: 405-552-6558		
APPROVED BY: June Conditions of Approval (if any):	TITLE Petroleum Engineer DATE 04/03/2017	-	