

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., Artesia, NM 87410
District IV - (505) 476-3460
1220 S. St. Francis Dr., Santa Fe, NM 87505

HOBBS OGD

APR 25 2016

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

WELL API NO. 30-025-41524 ✓	
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 Cotton Draw 32 State SWD ✓	
8. Well Number 2 ✓	
9. OGRID Number 6137 ✓	
10. Pool name or Wildcat SWD; Devonian	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 3477.7'	

1. Type of Well: Oil Well ☒ Gas Well ☐ Other SWD

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 P : 1180 feet from the South line and 1000 feet from the East line
Section 32 Township 24S Range 32E NMPM County Lea

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 ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

Mechanical Integrity Test ☒

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.

Administrative Order SWD-1459

4/18/16 - Ran Injection Test - 6 bpm, 0 psi, 240 bbls injected. See attached MIT.

*Chart incorrect - 30000#
Should be Ran on 1000#*

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

SIGNATURE Rebecca Deal TITLE Regulatory Compliance Analyst DATE 4/21/2016

Type or print name Rebecca Deal E-mail address: rebecca.deal@dvn.com PHONE: 405.228.8429
For State Use Only

APPROVED BY: MSB TITLE 12/14/2016 DATE 12/14/2016

Conditions of Approval (if any):

