

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

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
Revised July 18, 2013

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

|   |
|---|
| WELL API NO.<br>30-025-42263  |
| 5. Indicate Type of Lease<br>STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> |
| 6. State Oil & Gas Lease No.  |
| 7. Lease Name or Unit Agreement Name<br>Chincoteague 32 State Com                                   |
| 8. Well Number<br>2H  |
| 9. OGRID Number<br>6137   |
| 10. Pool name or Wildcat<br>WC-025 G-06 S253206M; Bone Spring                                       |

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 ☒ Gas Well ☐ Other

2. Name of Operator  
Devon Energy Production Company, LP

3. Address of Operator  
333 West. Sheridan Avenue  
Oklahoma City, OK 73102-5015 405-552-6558

4. Well Location

Unit Letter L 200 feet from the S line and 880 feet from the W line  
Section 32 Township 24S Range 32E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3476.8' GR

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 ☐  
CLOSED-LOOP SYSTEM ☐  
OTHER ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐  
OTHER: Change Production Method ☒

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.

Devon Energy Production Co., L.P. respectfully requests to change the production method from Flowing to Gas Lift.

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

SIGNATURE

Linda Good

TITLE: Regulatory Specialist

DATE 6/15/2017

Type or print name: Linda Good

E-mail address: linda.good@dvn.com

PHONE: 405-552-6558

For State Use Only

APPROVED BY:

[Signature]

TITLE

Petroleum Engineer

DATE

06/15/17

Conditions of Approval (if any):