|   | State of New Mexico  |   | Form C-103                           |  |  |
|---|--|---|--------------------------------------|--|--|
| Office<br><u>District I</u> – (575) 393-6161  | Energy, Minerals and Natural Res   | ources  | Revised July 18, 2013                |  |  |
| 1625 N. French Dr., Hobbs, NM 88240   |  | WELL API  | NO. 30-025-44083                     |  |  |
| <u>District II</u> – (575) 748-1283<br>811 S. First St., Artesia, NM 88210  |  |   | Type of Lease                        |  |  |
| District III – (505) 334-6178 1220 South St. Francis Dr.  |  | STA   |                                      |  |  |
| 1000 Rio Brazos Rd., Aztec, NM 87410<br>District IV – (505) 476-3460  | Santa Fe, NM 87505   |   | & Gas Lease No.                      |  |  |
| 1220 S. St. Francis Dr., Santa Fe, NM   |  | 0. 5  | 2000 2000 1101                       |  |  |
| 87505   | ICES AND REPORTS ON WELLS  | 7 Loose N   | ame or Unit Agreement Name           |  |  |
|   | SALS TO DRILL OR TO DEEPEN OR PLUG BAC   |   | ame of Omit Agreement Name           |  |  |
| DIFFERENT RESERVOIR. USE "APPLI   | CATION FOR PERMIT" (FORM C-101) FOR SUCH   |   | Unit                                 |  |  |
| PROPOSALS.)   | Gas Well Other   |   | mber 162H                            |  |  |
| Type of Well: Oil Well      Name of Operator  | Gas Well  Other  |   | Number 6137                          |  |  |
| Devon Ene   | rgy Production Co. LP  | ). Odiab  | 6137                                 |  |  |
| 3. Address of Operator  |  | 10. Pool na   | 10. Pool name or Wildcat             |  |  |
| 333 W. Sheridan Ave OKC, OK 73102   |  | Triple  | X; Bone Spring (59900)               |  |  |
| 4. Well Location  |  |   |                                      |  |  |
| Unit Letter B : 335 feet from the North line and 1780 feet from the East line   |  |   |                                      |  |  |
| Section 22  | Township 23S Range 3   |   | Lea County                           |  |  |
|   | 11. Elevation (Show whether DR, RKB,   | RT, GR, etc.)   |                                      |  |  |
|   | 3713'  |   |                                      |  |  |
|   |  |   |                                      |  |  |
| 12. Check Appropriate Box to Indicate Nature of Notice, 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 DRIL  |  | MENCE DRILLING OPNS   | . P AND A                            |  |  |
| PULL OR ALTER CASING  | MULTIPLE COMPL CASI  | IG/CEMENT JOB   |                                      |  |  |
| DOWNHOLE COMMINGLE  |  |   |                                      |  |  |
| CLOSED-LOOP SYSTEM □  | _  |   | _                                    |  |  |
| OTHER:  | OTHE   |   |                                      |  |  |
| 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. |  |   |                                      |  |  |
|   |  | TT: (1 11 1   |                                      |  |  |
| Devon Energy respe  | ctfully requests the elimination of the  | Devon Energy respectfully requests the elimination of the H in the well number. Conductor is set,   |                                      |  |  |
|   |  |   |                                      |  |  |
| however Devon does not intent to continue drilling this location. The conductor will be plugged at the  |  |   |                                      |  |  |
|   | s not intent to continue drilling this   | location. The conduc  |                                      |  |  |
|   |  | location. The conduc  | ctor will be plugged at the          |  |  |
| completion of drillin   |  | location. The conduc<br><b>HO</b>   | Tax on the last                      |  |  |
|   |  | location. The conduc<br><b>HO</b>   |                                      |  |  |
|   |  | location. The conduc<br>HO  | N 3 1 2018                           |  |  |
|   |  | location. The conduc<br>HO  | Tax on the last                      |  |  |
|   |  | location. The conduc<br>HO  | N 3 1 2018                           |  |  |
|   |  | location. The conduc<br>HO  | N 3 1 2018                           |  |  |
| completion of drillin   | ng on this pad.  | location. The conduc<br>HO  | N 3 1 2018                           |  |  |
|   |  | location. The conduc<br>HO  | N 3 1 2018                           |  |  |
| completion of drillin   | ng on this pad.  | location. The conduc<br>HO  | N 3 1 2018                           |  |  |
| completion of drilling  | ng on this pad.  Rig Release Date:   | location. The conduc<br>HO<br>JA<br>RI  | N 3 1 2018                           |  |  |
| completion of drilling  | ng on this pad.  | location. The conduc<br>HO<br>JA<br>RI  | N 3 1 2018                           |  |  |
| Spud Date:  I hereby certify that the information   | Rig Release Date:  | location. The conduction HO  JA  RI   | N 3 1 2018<br>ECEIVED                |  |  |
| completion of drilling  | ng on this pad.  Rig Release Date:   | location. The conduction HO  JA  RI   | N 3 1 2018                           |  |  |
| Spud Date:  I hereby certify that the information  SIGNATURE Rebutal  | Rig Release Date:  above is true and complete to the best of m  TITLE Regulatory                       | November of the conduction of | DATE 01/31/2018                      |  |  |
| Spud Date:  I hereby certify that the information   | Rig Release Date:  above is true and complete to the best of m  TITLE Regulatory                       | location. The conduction HO  JA  RI   | DATE 01/31/2018  PHONE: 405-228-8429 |  |  |
| Spud Date:  I hereby certify that the information  SIGNATURE Rebecca Deal  Type or print name Rebecca Deal  For State Use Only                      | above is true and complete to the best of m  TITLE Regulatory  E-mail address: rebe                    | y knowledge and belief.  Analyst  cca.deal@dvn.com  | DATE 01/31/2018  PHONE: 405-228-8429 |  |  |
| Spud Date:  I hereby certify that the information  SIGNATURE Rebecca Deal   | Rig Release Date:  above is true and complete to the best of m  TITLE Regulatory  E-mail address: rebe | November of the conduction of | DATE 01/31/2018                      |  |  |