

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 August 1, 2011

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

HOBBS OGD
JUN 14 2019

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PERFORATE A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO. 30-025-45071
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Devon Energy Production Company, L.P.		6. State Oil & Gas Lease No.
3. Address of Operator 333 West Sheridan, Oklahoma City, OK 73102		7. Lease Name or Unit Agreement Name North Thistle 3 34 State Com
4. Well Location Unit Letter <u>N</u> : <u>231</u> feet from the <u>South</u> line and <u>1489</u> feet from the <u>West</u> line Section <u>3</u> Township <u>23S</u> Range <u>33E</u> NMPM County <u>LEA</u>		8. Well Number 2H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 3596'		9. OGRID Number 6137
		10. Pool name or Wildcat Brinninstool; Bone Spring

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.

1/16/19-5/9/19: MIRU WL & PT Good to 5000 PSI in 1000 PSI increments 15 mins. TIH & ran CBL, found TOC @ 2250'. TIH w/pump through frac plug and guns. Perf Bone Spring, 9,785'-19,789'. Frac totals: 18,830,456# proppant, 21,420 gal acid. ND frac, MIRU PU, NU BOP, DO plugs & CO to PBTD 19,731'. CHC, FWB, ND BOP. RIH w/ 278 jts 2-7/8" L-80 tbg, set @ 9165'. 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 6/12/2019

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 6-19-19
Conditions of Approval (if any):