

Submit a 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. 30-015-38105
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 Chimayo 16 State
8. Well Number 3
9. OGRID Number 6137
10. Pool name or Wildcat SWD; BELL CANYON-CHERRY CANYON

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 <input type="checkbox"/> Gas Well <input type="checkbox"/> Other SWD	
2. Name of Operator DEVON ENERGY PRODUCTION CO, L.P.	
3. Address of Operator PO BOX 250, ARTESIA, NM 88211	
4. Well Location Unit Letter <u>F</u> : <u>1610</u> feet from the <u>N</u> line and <u>1455</u> feet from the <u>W</u> line Section <u>16</u> Township <u>25S</u> Range <u>29E</u> NMPM County <u>EDDY</u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 2999' GL	

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/> CLOSED-LOOP SYSTEM <input type="checkbox"/> OTHER: <input type="checkbox"/>	SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/> OTHER: Bradenhead test <input type="checkbox"/>
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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.

Per annual request, submitting Bradenhead test completed 9/1/2020.

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 Denise Menoud TITLE Admin Field Support DATE 12/17/2020

Type or print name Denise Menoud E-mail address: denise.menoud@dmn.com PHONE: 575-746-5544

For State Use Only

APPROVED BY: _____ TITLE _____ DATE _____

Conditions of Approval (if any):

District II - Artesia811 S. 1st Street, Artesia, NM 88210

Phone: (575) 748-1283 - Fax: (575) 748-9720

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Division Artesia District Office

BRADENHEAD TEST REPORT

Operator Name Devon Energy		API Number 30-015-38105	
Property Name Chimayo 16 State		Well No. 3	

1. Surface Location

UL - Lot F	Section 16	Township 25S	Range 29E	Feet from 1610	N/S Line N	Feet From 1455	E/W Line W	County Eddy
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Well Status

TA'D Well YES	SHUT-IN NO	INJECTOR INJ	PRODUCER OIL	DATE 9-1-20
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OBSERVED DATA

	(A) Surf-Interm.	(B) Interm. (1)	(C) Interm. (2)	(D) Prod Casing	(E) Tubing
Pressure	0			99	497
Flow Characteristics					
Puff	Y/N	Y/N	Y/N	Y/N	CO2 _____
Steady Flow	Y/N	Y/N	Y/N	Y/N	WTR _____
Surges	Y/N	Y/N	Y/N	Y/N	GAS _____
Down to nothing	Y/N	Y/N	Y/N	Y/N	If applicable type
Gas or Oil	Y/N	Y/N	Y/N	Y/N	fluid injected for
Water	Y/N	Y/N	Y/N	Y/N	Waterflood

If Braden head flowed water, check all the descriptions that apply:

CLEAR N/A	FRESH N/A	SALTY N/A	SULFUR N/A	BLACK N/A
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Remarks: Please state for each string (A, B, C, D, E) pertinent information regarding bleed down or continuous build up if applies.

Signature: WALTER MARLER 575-513-8069		OIL CONSERVATION DIVISION
Printed name: Danny Smolik		Entered RBDMS
Title: Compliance Office O		Re-test
E-mail Address: danny.smolik@state.nm.us		
Date:	Phone: 575-526-0836	
Witness:		

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Energy, Minerals and Natural Resources
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Santa Fe, NM 87505

CONDITIONS

Action 12437

CONDITIONS OF APPROVAL

Operator: DEVON ENERGY PRODUCTION COMPAN			333 West Sheridan Ave.	Oklahoma City, OK73102	OGRID: 6137	Action Number: 12437	Action Type: C-103Z
OCD Reviewer					Condition		
ksimmons					None		