

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

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.)		WELL API NO. 30-015-39729
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 type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Devon Energy Production Company, L P.		6. State Oil & Gas Lease No. NMNM-042626
3. Address of Operator 333 W. Sheridan Ave., Oklahoma City, Oklahoma 73102 (405) 552-7848		7. Lease Name or Unit Agreement Name COTTON DRAW 11 FED COM
4. Well Location Unit Letter <u>P</u> : <u>330</u> feet from the <u>S</u> line and <u>660</u> feet from the <u>E</u> line Section <u>11</u> Township <u>25S</u> Range <u>31E</u> NMPM Eddy County New Mexico		8. Well Number <u>1H</u>
11. Elevation (Show whether DR, RKB, RT, GR, etc) 3418'		9. OGRID Number 6137
		10. Pool name or Wildcat Cotton Draw; Delaware South

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 ☐

SUBSEQUENT REPORT OF:

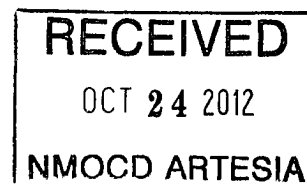
REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ P AND A ☐
CASING/CEMENT JOB ☐

OTHER: ☐

OTHER: Surface Casing Test Pressure ☒

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.

Surface casing tested 2/29/12, @ 1210psi.



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

SIGNATURE [Signature] TITLE Regulatory Specialist DATE 10/24/2012

Type or print name David H Cook E-mail address: david.cook@dvn.com PHONE: (405) 552-7848

For State Use Only

APPROVED BY [Signature] TITLE Asst. Supervisor DATE 10/30/12
Conditions of Approval (if any):