

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

WELL API NO. 30-015-41241
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 Pooky 4 State
8. Well Number 1H
9. OGRID Number 6137
10. Pool name or Wildcat Willow Lake; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3008.2' GR

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, L.P.

3. Address of Operator
333 W. Sheridan, Oklahoma City, OK 73102

4. Well Location
 Unit Letter 1 (lot) : 207 feet from the North line and 660 feet from the East line
 Section 4 Township 25S Range 28E NMPM Eddy County

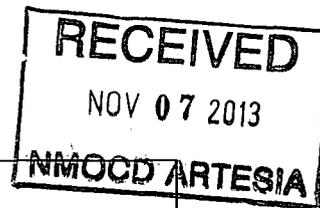
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

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: <input checked="" type="checkbox"/>	Completion Report

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.

07/10/2013 - 07/29/2013

MIRU. Run CBL from 700' to 7800'. TOC @ 900'. RD Wireline Unit. Tested Csg to 2500 psi for 60 min. OK. Perforated Bone Spring from 8,345 - 12,562'; 360 holes. Frac'd from 8,345 - 12,562' in 10 stages. Frac Totals: 31K gals 15% HCL acid, 55.5K # 100 Mesh sand, 2159K # 30/50 white sand, 384K # 20/40 Siber prop. PBTB @ 12580'. Turn well over to production.



Spud Date:

Rig Release Date:

Handwritten signature/initials

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

SIGNATURE: Patti Riechers TITLE: Regulatory Specialist DATE: 11/05/2013

Type or print name: Patti Riechers E-mail address: patti.riechers@dvn.com PHONE: 405-228-4248

For State Use Only

APPROVED BY: [Signature] TITLE: [Signature] DATE: 11/12/2013

Conditions of Approval (if any):