

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

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

WELL API NO. 30-015-40777
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 Peridot 13 State
8. Well Number 2H
9. OGRID Number 6137
10. Pool name or Wildcat Turkey Track; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3387.9

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.)

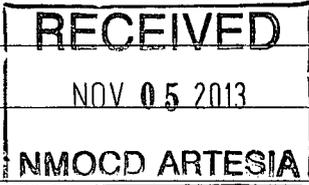
1. Type of Well: Oil Well  Gas Well  Other

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 K : 2260 feet from the south line and 1520 feet from the west line  
Section 12 Township 19S Range 29E NMPM Eddy County

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3387.9



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

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

08/12/13: MIRU. Spud well @ 22:00 hrs.  
 08/13/13 - 08/14/13: TD 17-1/2" hole @ 320'. RIH w/8 jts 13-3/8" 48# H-40 STC csg & set @ 320'. Lead w/350 sx CI "C" cmt, yld: 1.33 cf/sx. Disp w/44 bbls 8.4# water. No cement returns. Top off in 4 jobs - 284 sx CI C NEAT. Circ 17 sx to surf. Test BOP to 250 psi /3000 psi & annular preventer to 250 psi/3000 psi for 10mins, good tests. Test casing to 1210 psi for 30 min. Good Test.

08/20/13 - 07/21/13: TD 12-1/4" hole @ 3,730'. RIH w/83 jts 9-5/8" 40# J-55 LTC csg & set @ 3730'. 1st Stage: Lead w/950 sx CI C, yld 1.85 sf/sx. Tail w/520 sx CI C, yld: 1.33 cf/sx; displ w/279 bbls FW. Circ 30 sx of cement to surface. Test BOP to 250 psi/5000 psi, & annular preventer to 250 psi/3500 psi; held 10 min. Test casing to 2765 psi, hold for 30 min. OK

07/22/13 - 07/27/13: Drill 8-3/4" production vertical hole to 7397'. Drill production curve to 8746'.

09/05/13 - 09/08/13: TD 8-3/4" lateral production hole @ 15,208'. RIH w/326 jts 5-1/2" 17# HCP-110 BTC csg, set @ 15,208'; lead w/965 sx CI H, Yld 2.57 cf/sx, Tail w/2285 sx CI H', Yld 1.22 cf/sx. Disp w/ 318 bbls 2% KCL wtr. Release Rig @ 06:00 hrs on 09/08/2013.

Spud Date: 08/12/2013

Rig Release Date: 09/08/2013

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: 10/30/2013

Type or print name \_\_\_\_\_ E-mail address: patti.riechers@dvn.com PHONE: \_\_\_\_\_

**For State Use Only**

APPROVED BY: [Signature] TITLE: Dist. Supervisor DATE: 11/6/2013

Conditions of Approval (if any):