

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 July 18, 2013

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. 30-015-28005
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP.		6. State Oil & Gas Lease No.
3. Address of Operator 333 WEST SHERIDAN AVENUE, OKC, OK 73102		7. Lease Name or Unit Agreement Name TODD 36E STATE
4. Well Location Unit Letter <u>E</u> : <u>1650</u> feet from the <u>NORTH</u> line and <u>330</u> feet from the <u>WEST</u> line Section <u>36</u> Township <u>23S</u> Range <u>31E</u> NMPM, County <u>New Mexico</u>		8. Well Number 3
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3495'		9. OGRID Number 6137
10. Pool name or Wildcat INGLE WELLS; DELAWARE		10. Pool name or Wildcat INGLE WELLS; DELAWARE

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 - ACOI COMPLIANCE <input checked="" 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.

Devon Energy Production Company, LP respectfully submits results of Bradenhead test for compliance to the ACOI agreement approved on December 19, 2016. Test completed on 05/01/2018

Attachment: Bradenhead Results

HOBBS OCD

JUL 11 2018

RECEIVED

RECEIVED

JUL 18 2018

**NM OIL CONSERVATION
 ARTESIA DISTRICT**

JUN 21 2018

RECEIVED

Last production 2/2015 DISTRICT II-ARTESIA O.C.D.

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

SIGNATURE Erin Workman TITLE Regulatory Compliance Analyst DATE 05/07/18

Type or print name Erin Workman E-mail address: Erin.workman@dvn.com PHONE: (405)552-7970
For State Use Only

APPROVED BY: [Signature] TITLE STA # 135 DATE 7-18-18
 Conditions of Approval (if any):

S



NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
AZTEC DISTRICT OFFICE
1000 RIO BRAZOS ROAD
AZTEC NM 87410
(505) 334-6178 FAX: (505) 334-6170
[http://emnr.d.state.nm.us/ood/District IU3/district.htm](http://emnr.d.state.nm.us/ood/District%20IU3/district.htm)

BRADENHEAD TEST REPORT

(submit 1 copy to above address)

Date of Test 5-1-18 Operator Deron API #30-0 15-28005
Property Name Todd 36E Well No. 3 Location: Unit 5 Section 36 Township 23S Range 31
Well Status (Shut-in or Producing) Initial PSI: Tubing 0 Intermediate NA Casing 100 Bradenhead 0

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

Testing	PRESSURE					FLOW CHARACTERISTICS	
	Bradenhead			INTERM		BRADENHEAD	INTERMEDIATE
	BH	Int	Csg	Int	Csg		
5 min	0	NA	100	NA		Steady Flow	
10 min	0		100			Surges	
15 min	0		100			Down to Nothing	
20 min	0		100			Nothing	X
25 min	0		100			Gas	
30 min	0		100			Gas & Water	
						Water	

If bradenhead flowed water, check all of the descriptions that apply below: NA

CLEAR _____ FRESH _____ SALTY _____ SULFUR _____ BLACK _____

5 MINUTE SHUT-IN PRESSURE BRADENHEAD 0 INTERMEDIATE NA

REMARKS: No pressure on Braden head.

By Chris West Witness _____
Assistant Foreman
(Position)

E-mail address christopher.west@deron.com