## State of New Mexico Energy, Minerals and Natural Resources Department

Form C-103 Revised 1-1-89

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 Santa Fe, New Mexico 87504-2088  DISTRICT III 1000 rio Brazos Rd, Aztec, NM 87410  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.)	30-015-32960  5. Indicate Type of Lease  STATE ☑ FEE ☐  6. State Oil & Gas Lease No.  7. Lease Name or Unit Agreement Name Penlon 22 State
SARITA FE, NEW MEXICO 87304-2068  DISTRICT III 1000 rio Brazos Rd, Aztec, NM 87410  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"	State Oil & Gas Lease No.      Lease Name or Unit Agreement Name
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(FURING-101) FUR SUCH PROPUSALS.)	
Type of Well Gas Control	
Well Well Corner FFB 1 9 7004  2. Name of Operator	8. Well No.
DEVON ENERGY PRODUCTION COMPANY, LP OCD-ARTESIA	2
3. Address of Operator	9. Pool name or Wildcat
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 228-8209	Avalon Morrow
Well Location	
Unit Letter G:1980 Feet From The North Line and 1980 Feet I	From The <u>East</u> Line
Section 22 Township 20S Range 27E NMPM	Eddy County
10. Elevation (Show whether DF, RKB, RT, GR, etc.)	
//////////////////////////////////////	
Check Appropriate Box To Indicate Nature Of Notice, Report, Or Otl	
NOTICE OF INTENTION TO: SUBSEQUE	INT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	☐ ALTERING CASING ☐
EMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING CASING TEST AND CEMENT JOB	
OTHER: Add perfs OTHER:	
Devon Energy Production Company, LP plans to add additional pay in the existing Mo.0,724' – 10,736' with 6 spf.	orrow formation by perforating
hereby certify that the information above is true and complete to the best of my knowledge and belief.	
hereby certify that the information above is true and complete to the best of my knowledge and belief.  SIGNATURE  TITLE OPERATIONS ASSOCIATE	DATE <u>02/17/04</u>
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	DATE 02/17/04 TELEPHONE NO. (405) 235-3611

TITLE SUPERVISOR,

DATE\_\_\_\_\_

Approved by Conditions of approval, if any: