

Submit 1 Copy To Appropriate District  
Office  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
1301 W. Grand Ave., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103  
October 13, 2009

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

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR TO BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)		WELL API NO 30-005-64129
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 L. P		6. State Oil & Gas Lease No.
3 Address of Operator 20 North Broadway, Oklahoma City, OK 73105 405.228.8699		7 Lease Name or Unit Agreement Name Loving 7 Fee
4 Well Location Unit Letter <u>G</u> <u>2500</u> feet from the <u>North</u> line and <u>1400</u> feet from the <u>East</u> line Section <u>7</u> Township <u>10S</u> Range <u>29E</u> NMPM Chaves County		8. Well Number 1H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3879' GL		9 OGRID Number 6137
		10. Pool name or Wildcat Wildcat, Mississippian (Gas)

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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 checked="" 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 checked="" type="checkbox"/>		OTHER: <input type="checkbox"/>	

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 L. P requests to attach for your information the additional directional program for the upper hole section for this wellbore.

The drilling plans do not change from the data submitted for the permit.

(Attachment)

Spud Date:

Rig Release Date:

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

SIGNATURE Judy A. Barnett TITLE Regulatory Analyst DATE 8/24/10

Type or print name Judy A. Barnett E-mail address: Judith.Barnett@dmn.com PHONE: 405.228.899

**For State Use Only**

APPROVED BY David Gray TITLE Compliance Officer A DATE 8-25-10  
Conditions of Approval (if any):

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