

Submit 3 Copies 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  
May 27, 2004

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

WELL API NO. 30-045-34205
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. E-505-6
7. Lease Name or Unit Agreement Name Northeast Blanco Unit
8. Well Number 348
9. OGRID Number 6137
10. Pool name or Wildcat Basin Dakota

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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 <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator Devon Energy Production Company, L.P.	
3. Address of Operator 20 N. Broadway, Oklahoma City, OK 73102	
4. Well Location Unit Letter <u>A</u> : <u>560</u> feet from the <u>North</u> line and <u>1,245</u> feet from the <u>East</u> line Section <u>35</u> Township <u>31N</u> Range <u>7W</u> NMPM San Juan County	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GR 6,337'	
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>	
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____	
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____	

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 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"/>	
OTHER: <input type="checkbox"/>		OTHER: Fracture Treat <input checked="" 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

On 6/2/07 the above well was perforated in the Dakota zone from 8,446' to 8,545' with 4 SPF, 0.34" EHD, 120 degree phasing, for a total of 20 holes. On 6/3/07 the well was fracture treated with 71,763 gal Delta 200 with 55,460# 20/40 Ottawa sand. The average rate was 17 bpm, average pressure 4154 psi, and the final frac gradient was 0.78 psi/ft.

RCVD JUN18'07  
OIL CONS. DIV.  
DIST. 3

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☒, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE Senior Staff Operations Technician DATE 6-14-07

Type or print name: Melisa Castro E-mail address: melisa.castro@dvn.com Telephone No.: (405) 552-7917

For State Use Only

APPROVED BY: H. Villanueva TITLE Deputy Oil & Gas Inspector, District #3 DATE JUN 20 2007  
Conditions of Approval (if any):

6/20