Form C-103

State of New Mexico	March 4, 2004
Energy, Minerals and Natural Resources	Well API NO. 30-015-29345
OIL CONSERVATION DIVISION	5. Indicate Type of Lease
1220 South St. Francis Dr.	✓ State Fee
Santa Fe, NM 87505	6. State Oil & gas Lease No.
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.	7. Lease Name or Unit Agreement Name
USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS)	Cotton Draw Unit
1. Type of Weir	8. Well Number
✓ Oil Well Gas Well Other OCT 2.8 2004	81
2. Name of Operator	9. Ogrid Number
DEVON ENERGY PRODUCTION COMPANY, LP	6137
3. Address and Telephone No.	10. Pool Name or Wildcat
20 North Broadway, Ste 1500, Oklahoma City, OK 73102 405-228-8209	S Cotton Draw
4. Well Location	
Unit Letter L 1650 feet from the South line and 660 feet from the	West line
Section 2 Township 25S Range 31E NMPM	County Eddy
11. Elevation (Show whether DR, RKB, RT, GR, etc.)	
12. Check Appropriate Box to Indicate Nature of Notice, Report or C	ther Data
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF:	
☑ PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐ REMEDIAL WORK	☐ ALTERING CASING
TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRILLING OPN	PLUG AND ABANDONMENT
☐ PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐ CASING TEST AND CEMENT JOB	
	an injection
OtherOTHER	an injection
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimate	d date of stading any proposed work). SEE RULE 1103.
For Multiple Completions: Attach wellbore diagram or proposed completion or recompletion. If a pit or below-grade tank is invo	lived in the operation, complete the reverse side of this
form.	
Devon Energy Production Co., LP respectfully requests approval to recomplete as follows:	,
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1. Drill out CiBP @ 7550'.	
2. Set cmt retainer @ 7570' & squeeze Delaware perfs 7620'-7671' w/ 100 sx Class C cmt.	
3. Drill out squeeze & test to 500 psi.	
4. Perf Bone Spring 8752'-8768'.	
5. Acidize bone Spring perfs w/ 1500 gals 7.5% NEFE acid	
6 Frac w/ 72,000# sand. (7. Hang on pump.	
Committee of the commit	
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Thereby certify that the information above if true and complete to the best of my knowledge and belief	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
1 . I / ITI c	
Thereby certify that the information above is true and complete to the best of my knowledge and belief. SIGNATURE	DATE10/26/2004
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SIGNATURE LINE TITLE Regulatory Specialist	
SIGNATURE Linda Guthrie TITLE Regulatory Specialist Type or Print name Linda Guthrie E-mail Address: linda.guthria@dvn.coi	Telephone No. 405-228-8209
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