

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

WELL API NO. 30-015-41649
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Cotton Draw Unit SWD
8. Well Number 181
9. OGRID Number 6137
10. Pool name or Wildcat SWD; Devonian
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3,511

**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.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
DEVON ENERGY PRODUCTION COMPANY, L.P.

3. Address of Operator  
333 WEST SHERIDAN AVE., OKLAHOMA CITY, OKLAHOMA 73102-5010

4. Well Location  
 Unit Letter H :1568' feet from the FNL line and 1189 feet from the FEL line  
 Section 36 Township 24S Range 31E NM County Eddy

**DENIED**

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"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: SWD MIT test <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

1/31/14: Pressure up on casing to 500 psi for 30 minutes. Good MIT test witnessed by Basic Energy. Please see attachment.

*VIOLATION OF SWD ORDER 1448 - ORD NOT NOTIFIED OF WORK TO BE PERFORMED, NO NOTIFICATION OF MIT, MIT NOT WITNESSED.*

I hereby certify that the information above is true and complete to the best of my knowledge and belief. *TEST NOT ACCEPTABLE*

SIGNATURE *Gwyn Smith* TITLE Regulatory Analyst DATE 2/17/2013  
 Type or print name Gwyn Smith E-mail address: gwyn.smith@dvn.com PHONE: (405) 552-3364  
**For State Use Only**

APPROVED BY: *[Signature]* TITLE *[Signature]*  
 Conditions of Approval (if any):

*500 PSI TEST ON 500 PSI RECORDER NOT ACCEPTABLE.  
 INSPECTION ON 2/11 SHOWED WELL WAS UNDERMINING.  
 WELL MUST BE SHUT-IN.*

**RECEIVED**  
 FEB 20 2014  
 NMOCD ARTESIA

TEST NOT  
ACCEPTED

