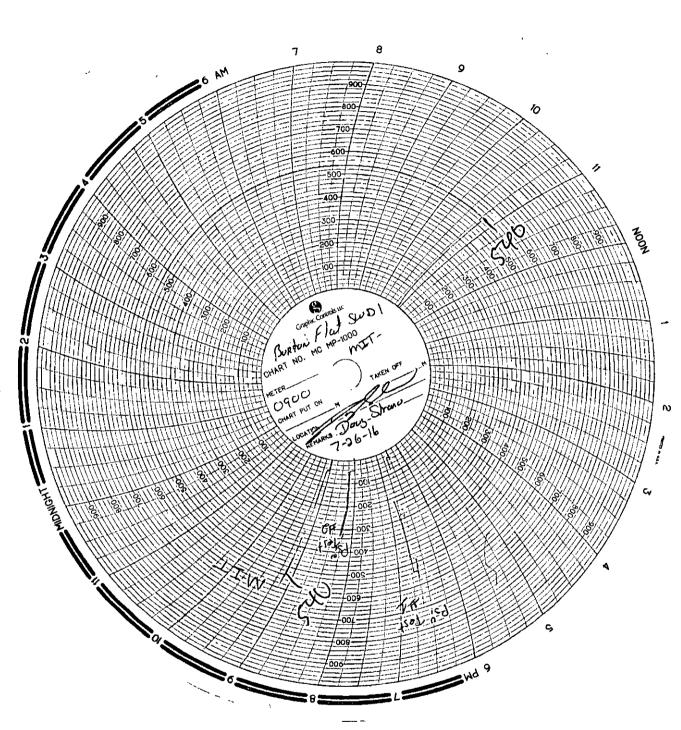
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Submit 1 Copy To Appropriate District State of New Mexico	Form C-103
Office District 1 – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Revised July 18, 2013 WELL API NO.
District II - (575) 748-1283 OIL CONSERVATION DIVISION	30-015-40987
District III – (505) 334-6178 1220 South St. Francis Dr.	5. Indicate Type of Lease STATE X FEE
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460 Santa Fe, NM 87505	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505	
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCI PROPOSALS.)	Burton Flat Deep Unit SWD
1. Type of Well: Oil Well Gas Well X Other SWD	8. Well Number 1
2. Name of Operator Devon Energy Production Company, L.P.	9. OGRID Number 6137
3. Address of Operator 333 W. Sheridan Avenue, Oklahoma City, OK 73102	10. Pool name or Wildcat SWD; Delaware
4. Well Location	
	.550 feet from the <u>West</u> line
Section2Township21SRange27E11. Elevation (Show whether DR, RKB, RT, GR, etc.)	NMPM Eddy County, NM
3230.2' (GL)	
12. Charle American Device Indiana Network (Netice, Device an Other Dete	
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data	
	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK	
PULL OR ALTER CASING MULTIPLE COMPL CASING/CEMENT	
CLOSED-LOOP SYSTEM	Return to Injection
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.	
7/26/16: PT to 550 psi for 30 min, MIT good. Pmpd out Pkr plug @ 3500 psi. Returned to	
injection. Injection volume on 7/26/16 was 5,299 bbls water.	
	NM OIL CONSERVATION ARTESIA DISTRICT
	AUG 08 2016
	RECEIVED
Spud Date: 6/8/2013 Rig Release Date: 7/21/2013	
Spud Date: 6/8/2013 Rig Release Date: 7/21/2013	l
I hereby certify that the information above is true and complete to the best of my knowledge	and belief.
SIGNATURE Megan Moravec TITLE Regulatory Specialist DATE 8/5/2016	
Type or print name <u>Megan Moravec</u> E-mail address: <u>Megan.Moravec@dvn.com</u> PHONE: <u>405-552-3622</u> For State Use Only	
APPROVED BY: Perturno NGE TITLE COMPLANCE OFFICED DATE 8/10/16 Conditions of Approval (if any):	

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