Submit 1 Copy To Appropriate District OfficeState of New MexicoDistrict I - (575) 393-6161Energy, Minerals and Natural Resources1625 N. French Dr., Hobbs, NM 88240District II - (575) 748-1283Bill S. First St., Artesia, NM 88210OIL CONSERVATION DIVISIONDistrict III - (505) 334-61781220 South St. Francis Dr.1000 Rio Brazos Rd., Aztec, NM 874101220 South St. Francis Dr.District IV - (505) 476-3460Santa Fe, NM 87505220 S. St. Francis Dr., Santa Fe, NMSanta Fe, NM 87505SUNDRY 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	Form C-103 Revised July 18, 2013 WELL API NO. 30-015-29728 5. Indicate Type of Lease STATE FEE 6. State Oil & Gas Lease No. 891005247E 7. Lease Name or Unit Agreement Name Cotton Draw Unit
PROPOSALS.) 1. Type of Well: Oil Well Gas Well Other	8. Well Number 84
2. Name of Operator Devon Energy Production Company, LP405-228-7203	9. OGRID Number 6137
3. Address of Operator333 West. Sheridan AvenueOklahoma City, OK73102-5015405-228-7203	<ol> <li>Pool name or Wildcat</li> <li>Paduca; Devonian, NW</li> </ol>
4. Well Location         Unit Letter I : _2615feet from the _SOUTH line and _1160feet from the _EAST line         Section 2       Township 25S       Range 31E       NMPM       Eddy County         11. Elevation (Show whether DR, RKB, RT, GR, etc.)       3455' GL       GL	
12. Check Appropriate Box to Indicate Nature of Notice,	SEQUENT REPORT OF: ALTERING CASING LLING OPNS. P AND A
OTHER:	
<ul> <li>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.</li> <li>9/22/2017 Pulled the well due to communication between the tbg and csg through a failed on/off tool. The packer is @ 16,219'</li> <li>Chart attached.</li> </ul>	
I hereby certify that the information above is true and complete to the best of my knowledge and belief.	
SIGNATURE Sinda Hood TITLE: Regulatory Specialist DATE 10/2/2017	
Type or print name:       Linda Good       E-mail address:       linda.good@dvn.com       PHONE:       405-552-6558         For State Use Only       Image: Address of the second	
APPROVED BY: <u>Peutopo NGE</u> TITLE <u>Complements officer</u> DATE 10/3/17 Conditions of Approval (if any):	