

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. 30-015-32663
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 Parkway BS
8. Well Number 19
9. OGRID Number 6137
10. Pool name or Wildcat Parkway; Bone Springs
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3317' GL

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, LP

3. Address of Operator
333 W. Sheridan Avenue, Oklahoma City, OK 73102

4. Well Location
 Unit Letter K : 1980 feet from the South line and 1980 feet from the West line
 Section 21 Township 191S Range 29E NMPM County Eddy

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 checked="" 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: <input 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.

- 12/21/19 Notified OCD of intent.
- 01/02/20 OCD ok'd to leave pkr in hole.
- 01/03/20 Set 5 1/2" CIBP @ 6743'. Verify w/2 3/8" tbg. Circ 60 bbl MLF. Spot 25 sx class "c" cmt @ 6743'-6650'. Tag TOC @ 6460'.
- 01/04/20 Spot 25 sx class "c" cmt @ 4900'-4800'. Notify OCD of more perms.
- 01/06/20 Set 5 1/2" CIBP @ 4300'. Verify w/2 3/8" tbg. Spot 25 sx class "c" cmt @ 4300'-4200'. Tag TOC @ 4120'. Set 5 1/2" CIBP @ 4050'.
- 01/07/20 Verify CIBP @ 4050' w/2 3/8" tbg. Circ 100 bbl MLF. Spot 25 sx class "c" cmt @ 4050'-3950'. Tag TOC @ 3735'. Spot 25 sx class "c" cmt @ 3250'-3100'. Tag TOC @ 3000'.
- 01/08/20 Perf/circ 100 sx class "c" cmt @ 400'-surf 8 5/8" x 5 1/2". Verify cmt @ surf.
- 01/09/20 RD P&A equipment, cut off WH, anchors, set dry hole marker, clean location. P&A complete.

RECEIVED

JAN 27 2020

EMNRD-OCD ARTESIA

Spud Date:

[Empty box for Spud Date]

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt of Release Date Subsequent Report of Well Plugging
 which may be found at OCD Web Page under Forms, www.emnrd.state.nm.us/oed.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE [Signature] TITLE Agent DATE 1/10/20

Type or print name Jimmy Bagley E-mail address: sunsetwellservice@yahoo.com PHONE: 432-561-8600

For State Use Only

APPROVED BY: [Signature] TITLE Staff MS DATE 1/28/20
 Conditions of Approval (if any):

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