## Form C-103 State of New Mexico Submit 3 Copies Revised 1-1-89 to Appropriate lergy, Minerals and Natural Resources Department District Office WELL API NO. DISTRICT I OIL CONSERVATION DIVISION P.O. Box 1980, Hobbs, NM 88240 30-015-28729 P.O. Box 2088 5. Indicate Type of Lease DISTRICT II P.O. Drawer DD, Artesia, NM 88210 FEE STATE 🛛 Santa Fe, New Mexico 87504-2088 6. State Oil & Gas Lease No. DISTRICT III 1000 no Brazos Rd, Aztec, NM 87410 7. Lease Name or Unit Agreement Name SUNDRY NOTICES AND REPORTS ON WELLS **CACTUS STATE** (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 Gas Wel Oil Other Proposed oil well 8. Well No. 2. Name of Operator **DÉVON ENERGY CORPORATION (NEVADA)** 12 9. Pool name or Wildcat 3. Address of Operator Catclaw Draw, East (Delaware) 20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (485) 235-3611 4 Well Location Unit Letter A: 990 Feet From The NORTH Line and 1190 Feet From The EAST **EDDY NMPM 21S** Range 26E County Section 10. Elevation (Show whether DF, RKB, RT, GR, etc.) GL 3233' Check Appropriate Box To Indicate Nature Of Notice, Report, Or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: ALTERING CASING PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK $\boxtimes$ COMMENCE DRILLING OPNS. PLUG AND ABANDONMENT **CHANGE PLANS TEMPORARILY ABANDON** CASING TEST AND CEMENT JOB **PULL OR ALTER CASING** $\boxtimes$ OTHER: Changed proposed total depth OTHER: 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 1103. Please be advised Devon Energy Corporation (Nevada) is changing drilling operations plan from total depth of 3500' to total depth of 3600'.

I hereby certify that the information above is true and complete to the best of m SIGNATURE Candi Hraham	y knowledge and belief.  TITLE ENGINEERING TECHNICIAN	DATE March 4, 1996
TYPE OR PRINT NAME Candi Graham		TELEPHONE NO. (405) 235-3611
(This space for State use)  ORIGINAL SIGNED BY TIM W. GUM  Approved by  DISTRICT II SUPERVISOR  Conditions of approval, if any:	TITLE	DATE MAR 1 1 1996