

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

HOBBS OCD State of New Mexico
 Energy, Minerals and Natural Resources
DEC 15 2016
RECEIVED
 OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, NM 87505

Form C-103
 Revised August 1, 2014

WELL API NO. 30-025-42679	
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 Thistle Unit	
8. Well Number 94H	
9. OGRID Number 6137	
10. Pool name or Wildcat Triple X; Bone Spring	
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 <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/> 2. Name of Operator Devon Energy Production Company, L.P. 3. Address of Operator 333 West Sheridan, Oklahoma City, OK 73102 4. Well Location Unit Letter <u>D</u> : <u>250</u> feet from the <u>North</u> line and <u>300</u> feet from the <u>West</u> line Section <u>22</u> Township <u>23S</u> Range <u>33E</u> NMPM County <u>Lea</u> 11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 3713'	

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 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"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion <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.

11/7/2016-11/26/2016: MIRU WL & PT. TIH & ran GR/CBL, found ETOC @ 1240'. TIH w/pump through frac plug and guns. Perf Bone Spring, 10827'-17807'. Frac totals 25,830 gals acid, 7,948,000# prop. ND frac, MIRU PU, NU BOP, DO plugs & CO to FC @ 17,189'. CHC, FWB, ND BOP. RIH w/ 305 jts 2-7/8" L-80 tbg, set @ 10511'. TOP.

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

SIGNATURE Rebecca Deal TITLE Regulatory Analyst DATE 12/14/2016

Type or print name Rebecca Deal E-mail address: Rebecca.Deal@dvn.com PHONE: 405-228-8429
For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 12/30/16
 Conditions of Approval (if any):