Sante Fe Main Office Phone: (505) 476-3441 General Information Phone: (505) 629-6116 Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us	**State of New Mexico** **Energy, Minerals and Natural Resources** **Oil Conservation Division** **1220 S. St Francis Dr.** **Santa Fe, NM 87505**	Form C-103 August 1, 2011 Permit 381510 WELL API NUMBER 30-015-55721 5. Indicate Type of Lease State 6. State Oil & Gas Lease No.

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.)

7. Lease Name or Unit Agreement Name
BENT TREE 9 11 STATE COM

1. Type of Well:
Oil

8. Well Number
337H

2. Name of Operator
DEVON ENERGY PRODUCTION COMPANY, LP

9. OGRID Number
6137

3. Address of Operator
333 West Sheridan Ave., Oklahoma City, OK 73102

10. Pool name or Wildcat

4. Well Location
Unit Letter P : 904 feet from the S line and feet 238 from the E line
Section 8 Township 21S Range 27E NMPM County Eddy

11. Elevation (Show whether DR, KB, BT, GR, etc.)
3248 GR

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit Type _____ Depth to Groundwater_____ Distance from nearest fresh water well_____ Distance from nearest surface water_____

Pit Liner Thickness:_____ mil   Below-Grade Tank: Volume_____ bbls; Construction Material_____

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

NOTICE OF INTENTION TO:			SUBSEQUENT REPORT OF:	
PERFORM REMEDIAL WORK ☐	PLUG AND ABANDON ☐	REMEDIAL WORK ☐	ALTER CASING	☐
TEMPORARILY ABANDON ☐	CHANGE OF PLANS ☐	COMMENCE DRILLING OPNS. ☐	PLUG AND ABANDON	☐
PULL OR ALTER CASING ☐	MULTIPLE COMPL ☐	CASING/CEMENT JOB ☐		
Other:		Other: **Spud**		☒

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. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

12/30/2024 Spudded well.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE	Electronically Signed	TITLE	Supervisor Land	DATE	1/15/2025
Type or print name	Jeff Walla	E-mail address	Jeff.Walla@dvn.com	Telephone No.	575-748-9925

For State Use Only:

APPROVED BY:	Sarah K McGrath	TITLE	Petroleum Specialist - A	DATE	1/17/2025