

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

OCD – REC'D 9/15/2020

Form C-103
Revised July 18, 2013

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

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.)		WELL API NO. 30-015-44116
1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/>		5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator Devon Energy Production Company, L.P.		6. State Oil & Gas Lease No.
3. Address of Operator 333 W. Sheridan Ave Oklahoma City, OK 73102		7. Lease Name or Unit Agreement Name AGATE PWU 21-22
4. Well Location Unit Letter <u>A</u> : <u>585</u> feet from the <u>N</u> line and <u>235</u> feet from the <u>E</u> line Section <u>20</u> Township <u>19S</u> Range <u>29E</u> NMPM County <u>EDDY</u>		8. Well Number 9H
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3334 GR		9. OGRID Number 6137
		10. Pool name or Wildcat 98199 - parkway;bs,west

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"/>			
CLOSED-LOOP SYSTEM <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: RETURN TO PRODUCTION <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.

Devon Energy Production Company (Devon) is respectfully informing the subject well has returned to production.

Return to Production: 08/27/2020
Test Date: 08/27/2020
Oil- 409 BBL
Gas- 1365 MCF
Water- 73 BBL

Spud Date:

05/19/2017

Rig Release Date:

06/28/2017

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

SIGNATURE Chelsey Green TITLE REGULATORY PROFESSIONAL DATE 09/15/2020

Type or print name CHELSEY GREEN E-mail address: CHELSEY.GREEN@DVN.COM PHONE: 405-228-8595

For State Use Only

APPROVED BY: _____ DATE _____

Conditions of Approval (if any):

Accepted for record – NMOCD gc 9/23/2020

10/23/2020 ab