

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 August 1, 2011

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

WELL API NO. 30-015-40025
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 Longboard PWU 20
8. Well Number 1H
9. OGRID Number 6137
10. Pool name or Wildcat Parkway; Wolfcamp
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3340' GR

**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, L.P.

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

4. Well Location  
 Unit Letter E : 1500 feet from the north line and 355 feet from the west line  
 Section 20 19S Township 29E Range NMPM Eddy County

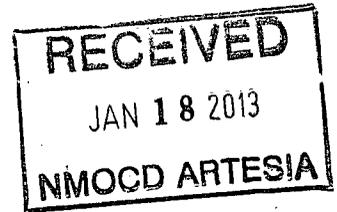
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b> PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>	<b>SUBSEQUENT REPORT OF:</b> REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>
OTHER: <input type="checkbox"/>	OTHER: Completion Report <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.

10/12/2012 - 12/01/2012

MIRU. NU BOP. TIH w/bit & ran to below liner top. Circ hole clean. Tested csg to 1000 psi. OK. Ran CBL & started in hole with TCP guns. Found TOC @ 2640'. Perforated Wolfcamp, 9960 - 13,762', 468 holes. Frac'd 9,960 - 13,08762' in 13 Stages. Frac Totals: 3,994,069# 30/50 sd, 271,569 100 mesh sd, 38,995 gals 15% HCL, 195,063 gals 5% HCL. RIH w/2-7/8" tbg. EOT @ 9340'. Turn well over to production.



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

SIGNATURE: Patti Riechers TITLE: Regulatory Specialist DATE: 01/16/2012

Type or print name: Patti Riechers E-mail address: patti.riechers@dvn.com PHONE: 405-228-4248

**For State Use Only**

APPROVED BY: [Signature] TITLE: Dist. Reg. Specialist DATE: 1/23/2013

Conditions of Approval (if any):