Submit I Copy To Appropriate District Office	State of New Mexico Energy, Minerals and Natural Resources		Form C-103
<u>District I</u> – (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> – (575) 748-1283			Revised July 18, 2013 WELL API NO. 30-015-27559
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION		5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis Dr.		STATE ⊠' FEE □
<u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87	/303	6. State Oil & Gas Lease No.
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		7. Lease Name or Unit Agreement Name	
PROPOSALS.)		EV State Com  8. Well Number 2	
1. Type of Well: Oil Well Gas Well Other			
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP.		9. OGRID Number 6137	
3. Address of Operator		10. Pool name or Wildcat	
333 WEST SHERIDAN AVENUE, OKC, OK 73102		Atoka (Gas)	
4. Well Location			
Unit Letter : 2100 feet from the North line and 660 feet from the East line			
Section 32 Township 22S Range 26E NMPM Eddy, County New Mexico			
		, RKB, RT, GR, etc.,	
3334"			
NOTICE OF IN PERFORM REMEDIAL WORK TEMPORARILY ABANDON DULL OR ALTER CASING DOWNHOLE COMMINGLE CLOSED-LOOP SYSTEM OTHER:	MULTIPLE COMPL  Deleted operations. (Clearly state all p	SUB- REMEDIAL WORL COMMENCE DRI CASING/CEMENT OTHER:	SEQUENT REPORT OF:  K
of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Company of the starting any proposed completion or recompletion.			
Devon Energy Production Company, LP Respectfully requests a 5 year TA status for the captioned well: PROD 3/1/2012  Notified NMOCD received verbal from Richard Enge to complete MIT;			
10/29/14 - 10/30/14			_
Test Csg.	to 500 PSI, good, 30 min. RDMO. Noti		AKI ESIA DISTRIC
Attached: MIT	- CHANT DONE ON	اءلا معدا	NOV 1 7 2014
Thombroout	INSTEAD OF 10	10015I	1 7 2014
Thank you!	- CLOCK NOT SI	F 70 60	D MINUTES RECEIVED
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
SIGNATURE TITLE Regulatory Compliance Professional DATE 11.10.14			
Type or print name Frin Workman E-mail address: Erin.workman@dvn.com PHONE: (405)552-7970  For State Use Only			
APPROVED BY: Peutano Nace TITLE Completance OFFICER DATE 11/18/14  Conditions of Approval (if any):			

