

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

WELL API NO. 30-015-41294
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 Tranquil 13 State Com
8. Well Number 2H
9. OGRID Number 6137
10. Pool name or Wildcat Hay Hollow; Bone Spring, North
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3082.0"

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, LP	405-228-7203
3. Address of Operator 333 West. Sheridan Avenue Oklahoma City, OK 73102-5015	405-228-7203
4. Well Location Unit Letter <u>O</u> : <u>330</u> feet from the <u>SOUTH</u> line and <u>1795</u> feet from the <u>EAST</u> line Section <u>13</u> Township <u>25S</u> Range <u>27E</u> NMPM Eddy County	

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"/>	REMEDIAL WORK <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>
DOWNHOLE COMMINGLE <input type="checkbox"/>	P AND A <input type="checkbox"/>
CLOSED-LOOP SYSTEM <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>
OTHER: APD Extension <input checked="" type="checkbox"/>	OTHER: <input 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 Co. L.P. respectfully requests a two year extension for the Tranquil 13 State Com 2H well which was submitted on 4/25/2013, approved on 4/30/2013 and expires on 4/30/2015. Thank you.

One year Extension Granted
APD Expires 4/30/2016

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

SIGNATURE <u>Trina C. Couch</u>	TITLE: <u>Regulatory Analyst</u>	DATE <u>1/26/2015</u>
Type or print name: <u>Trina C. Couch</u>	E-mail address: <u>trina.couch@devn.com</u>	PHONE: <u>405-228-7203</u>
APPROVED BY: <u>JDade</u>	TITLE <u>Dist. H. Supervisor</u>	DATE <u>2/3/2015</u>
Conditions of Approval (if any):		

Original COA's Still Apply