| Submit 1 Copy To Appropriate District | State of New Mexico | | Form C-103 | |
|---|--|-----------------------|--|-------------|
| Office <u>District I</u> – (575) 393-6161 | Energy, Minerals and Natural Resources | | Revised July 18, 2013 | |
| 1625 N. French Dr., Hobbs, NM 88240 | | | WELL API NO. | |
| <u>District II</u> (575) 748-1283 811 S. First St., Artesia, NM 88210 | OIL CONSERVATION DIVISION | | 30-015-43923 | |
| District III - (505) 334-6178 | 1220 South St. Francis Dr. | | 5. Indicate Type of Lease STATE FEE | 7 4,10 |
| 1000 Rio Brazos Rd., Aztec, NM 87410 | Santa Fe, NM 87505 | | 6. State Oil & Gas Lease No. | _ Juan |
| <u>District IV</u> – (505) 476-3460 1220 S. St. Francis Dr., Santa Fe, NM 87505 | | | 6. State Off & Gas Lease No. | ļ |
| | CES AND REPORTS ON WELLS | <u> </u> | 7. Lease Name or Unit Agreeme | nt Name |
| (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.) | | | Cotton Draw Unit | |
| 1. Type of Well: Oil Well Gas Well Other | | | 8. Well Number | |
| | | | 2701 | 1 |
| 2. Name of Operator | **** | | 9. OGRID Number | |
| Devon Energy Production Company, LP | | | 6137 | |
| | | | | |
| 3. Address of Operator | | | 10. Pool name or Wildcat | |
| 333 West. Sheridan Avenue Oklahoma City, OK 73102-5015 405-552-6558 | | | Cotton Draw; Delaware, South | |
| - | | | Conon Diaw, Delaware, South | |
| 4. Well Location | | | | |
| | 200 feet from the <u>N</u> line an | | | |
| Section 13 | 4 | | MPM County Eddy | |
| 11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3411.8' GR | | | | |
| | | | | |
| 12. Check A | ppropriate Box to Indicate N | ature of Notice, | Report or Other Data | |
| NOTICE OF INT | CENTION TO: | CHE | SEQUENT REPORT OF: | |
| NOTICE OF INTENTION TO: SUBS | | | | SING [] |
| TEMPORARILY ABANDON CHANGE PLANS COMMENCE DRI | | | | |
| PULL OR ALTER CASING | MULTIPLE COMPL | CASING/CEMENT | <u> </u> | لسا |
| DOWNHOLE COMMINGLE | MOETH LE COMM L | ONONIO/OLIMEITI | | |
| CLOSED-LOOP SYSTEM | | | | |
| _ | _ | OTHER: Change | e Well Name | \boxtimes |
| OTHER: | | | | |
| | k). SEE RULE 19.15.7.14 NMAC | | l give pertinent dates, including est appletions: Attach wellbore diagram | |
| Devon respectfully requests to change | the well name from the Cotton D | row I Init 278V to th | e Cotton Draw Unit 278H | |
| Devon respectionly requests to change | the well hame from the Cotton Di | 14w Omt 2701 to th | c Cotton Draw Omt 27611. | |
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| I hereby certify that the information al | ove is true and complete to the be | st of my knowledge | and belief. | |
| <i>[</i>]: | 2 | | | |
| SIGNATURE Junda | Sooc TITL | E: Regulatory Spe | ecialist DATE 10/18/16 | |
| Type or print name:Linda Good | E-mail address: linda.good | d@dsm.com | PHONE: 405-552-6558 | |
| For State Use Only | D-man address: mida.good | I(@GVII.COIII | 1110NE. <u>403-332-0338</u> | |
| 1 State Ost Only | $\mathcal{A} O$ | (O. A | Ω . | |
| APPROVED BY Conditions of Approval (If any): | THE DUS | Yper Spec. | _Udu DATE /0-/8 | 16 |
| Commission of the brother (it mily). | • | u U | | |