

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 July 18, 2013

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505  
JUN 27 2018

WELL API NO. <b>30-015-44960</b>
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 Coral PWU 28-27
8. Well Number 11 H
9. OGRID Number 6137
10. Pool name or Wildcat98199 PARKWAY; BONE SPRING, WEST
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3299.9'

SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG A WELL IN A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)	
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other	
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP.	
3. Address of Operator 333 WEST SHERIDAN AVENUE, OKC, OK 73102	
4. Well Location Unit Letter <u>O</u> : <u>1220</u> feet from the <u>South</u> line and <u>2571</u> feet from the <u>East</u> line Section <u>28</u> Township <u>19S</u> Range <u>29E</u> NMPM Eddy, County New Mexico	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3299.9'	

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: Change to original APD <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 Company, LP Respectfully requests approval of a location change for the subject well:

From: SHL Section 28, T19S, R29E 1220 FSL/2541 FEL,  
BHL Section 27, T19S, R29E 2090 FSL/230 FEL

TO: SHL Section 28, T19S, R29E 1220 FSL//2571 FEL  
BHL Section 27, T19S, R29E 2090 FSL/230 FEL

Attachments: C-102  
Directional Survey  
Drilling Plan  
Plot plan

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

SIGNATURE Erin Workman TITLE Regulatory Compliance Analyst DATE 06.27.18

Type or print name Erin Workman E-mail address: Erin.workman@dmn.com PHONE: (405)552-7970  
For State Use Only

APPROVED BY: Raymond A. Godang TITLE Geologist DATE 6-28-18  
Conditions of Approval (if any):