

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. 30-015-29407
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 Todd 36 P State
8. Well Number 19
9. OGRID Number 6137
10. Pool name or Wildcat Ingle Wells; Delaware

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 10-1) FOR PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other

2. Name of Operator
Devon Energy Production Company, LP

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

4. Well Location
 Unit Letter P : 773 feet from the South line and 571 feet from the East line
 Section 36 Township 23S Range 31E NMPM Eddy County, NM

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 3537' KB; 3525' GL; 12' KB to GL

AUG 07 2018

RECEIVED

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

NOTICE OF INTENTION TO: 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"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/>	
OTHER: <input type="checkbox"/>	OTHER: <input type="checkbox"/>	OTHER: <input 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.

- 7/21/18 Notify OCD 24 HRS Prior To MIRU To P&A intent
- 7/24/18 Set 5 1/2" CIBP @ 6659'. Verify w/ 2 3/8" tbg
- 7/25/18 Pressure test well 500 psi good, Circ 160 bbls mlf spot 25x class c cmt 6659'-6410' spot 25x class c cmt 5620' - 5370' Tag toc @ 5357' Spot 45x class c cmt @ 4625' - 4175' Tag toc @ 4169'
- 7/26/18 Perf / circ 280x class c cmt 1200' - surf, 5 1/2"x 8 5/8" Verify cmt @ surf
- 7/30/18 Cut off wellhead and anchors and cleaned location, set dry hole marker. P & A completed

Spud Date:

Rig Release Date:

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

SIGNATURE TITLE Agent DATE 07/30/18

Type or print name Jimmy Bagley E-mail address: sunsetwellservice@yahoo.com PHONE: 432-561-8600

For State Use Only

APPROVED BY: TITLE State Rep DATE 8-10-18

Conditions of Approval (if any):