Submit I Copy To Appropriate District	State of New Mexico	Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resource	rces Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283		WELL API NO. 30-015-43265
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISIO	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 87505	6. State Oil & Gas Lease No.
87505		
	ICES AND REPORTS ON WELLS DSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO	7. Lease Name or Unit Agreement Name
DIFFERENT RESERVOIR. USE "APPL	ICATION FOR PERMIT" (FORM C-101) FOR SUCH	Cotton Draw Unit
PROPOSALS.)	Gas Well 🔲 Other	8. Well Number 290H
2. Name of Operator		9. OGRID Number
Devon Energy Production	Co., L.P. Linda Good	6137
3. Address of Operator	lahoma City, OK 73102 405-552-65	10. Pool name or Wildcat 558 Paduca; Bone Spring
333 West Sheridan Ave, Ok 4. Well Location	Tanoma City, OK 75102 405-552-6.	558 Tadaca, Done Spring
Unit Letter A	200 feet from the North line	and 890 feet from the East line
Section 36	Township 24S Range 31	Edder
11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
3514' GR		
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK PLUG AND ABANDON TEMPORARILY ABANDON CHANGE PLANS PULL OR ALTER CASING MULTIPLE COMPL DOWNHOLE COMMINGLE CASING/CEMENT JOB CLOSED-LOOP SYSTEM OTHER: 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. Production method changed from ESP to Gas Lift. NM OIL CONSERVATION ARTESIA DISTRICT OCT 0.5 2018 RECEIVED		
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 Jood TITLE Regulatory Compliance Specialist DATE 10/5/2018		
Type or print name Linda Good E-mail address: linda.good@dvn.com PHONE: 405-552-6558		
For State Use Only		
APPROVED BY: ALL TITLE Business applied DATE 10.5.2018 Conditions of Approval (if any):		

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