Submit 1 Copy To Appropriate District	State of New Mexico	Form C-103		
Office	Energy, Minerals and Natural Resources	Revised July 18, 2013		
District I (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240	Energy, winter and a canal and a constant	WELL API NO.		
District II – (575) 748-1283	OUL CONCERNATION DIVISION	30-015-41537		
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DIVISION	5. Indicate Type of Lease STATE STATE FEE		
<u>District III</u> – (505) 334-6178	1220 South St. Francis Dr.			
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> – (505) 476-3460	Santa Fe, NM 87505	6. State Oil & Gas Lease No.		
1220 S. St. Francis Dr., Santa Fe, NM				
87505				
SUNDRY NOTICE	7. Lease Name or Unit Agreement Name			
(DO NOT USE THIS FORM FOR PROPOSAL	LS TO DRILL OR TO DEEPEN OR PLUG BACK TO A			
	TION FOR PERMIT" (FORM C-101) FOR SUCH	Cotton Draw Unit		
PROPOSALS.) 1. Type of Well: Oil Well 🛛 Ga	8. Well Number			
	as Well Other NM OIL CONSERVATION			
	214H			
2. Name of Operator	ARTESIA DISTRICT	9. OGRID Number		
Devon Energy Production Compa	6137			
3. Address of Operator	10. Pool name or Wildcat			
333 West. Sheridan Avenue	405-552-6558 RECEIVED			
Oklahoma City, OK 73102-5015	Paduca; Bone Spring (96641)			
4. Well Location				
	_ feet from the <u>N</u> line and <u>1710</u> feet from th	e <u>W</u> line		
Section 36		1PM County Eddy		
	11. Elevation (Show whether DR, RKB, RT, GR, etc.)		
	3508' GR			

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

	PLUG AND ABANDON	SUBSEQUENT REPORT OF: REMEDIAL WORK	
DOWNHOLE COMMINGLE		OTHER: Change Production Method	

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., LP respectfully request permission to change the production method from EST to Rod Pump.

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

SIGNATURE	Konda Good	TITLE:	Regulatory Compliance S	Specialist	DATE	<u>1/17/2019</u>
Type or print name:			nda.good@dvn.com	PHONE: <u>4(</u>		
APPROVED BY: K	(if any)	TITLE,	Business Of	N JOLA	_DATE	1-11-19