

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  
**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Form C-103  
Revised August 1, 2011

WELL API NO. 30-015-28496
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 Cactus State
8. Well Number 9
9. OGRID Number 6137
10. Pool name or Wildcat Belclaw Draw, Dehane East

SWS Inv# 13695

**SUNDY 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 400) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☒ Gas Well ☐ Other SWD

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 O : 830 feet from the South line and 2260 feet from the East line  
Section 16 Township 21S Range 26E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3275' GL

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 checked="" type="checkbox"/>
	CASING/CEMENT JOB <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.

- 01/14/19 Notify OCD of intent.
- 01/15/19 Set 5 1/2" CIBP @ 3100'.
- 01/16/19 Verify CIBP @ 3100' w/2 3/8" tbg. Test well 500 psi. Good. Circ 75 bbl MLF. Spot 25 sx's class "c" cmt @ 3100'-2910'. WOC tag TOC @ 2797'. Spot 50 sx's class "c" cmt @ 2514'-2120'. WOC tag TOC @ 1917'.
- 01/17/19 Spot 50 sx's class "c" cmt @ 500'-surf. Verify cmt @ surf. Cut off WH, anchors and clear location, set 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 [Signature] TITLE Agent DATE 01/18/19  
Type or print name Jimmy Bagley E-mail address: sunsetwellservice@yahoo.com PHONE: 432-561-8600

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff mg. DATE 2/6/19  
Conditions of Approval (if any):

ENTERED  
2-6-19