Submit I Copy To Appropriate District Office	State of New Mexico		Form C-103
District I - (575) 393-6161	Energy, Minerals and Natural Resources OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505		Revised July 18, 2013
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			WELL API NO. 30-015-27365
811 S. First St., Artesia, NM 88210			5. Indicate Type of Lease
District III – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410			STATE SFEE
District IV - (505) 476-3460			6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			
SUNDRY NOTICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name	
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH		TODD 36D STATE	
PROPOSALS.)		8. Well Number	
1. Type of Well: Oil Well Gas Well Other		· 2	
2. Name of Operator		9. OGRID Number	
DEVON ENERGY PRODUCTION COMPANY, LP. 3. Address of Operator		6137 10. Pool name or Wildcat	
333 WEST SHERIDAN AVENUE, OKC, OK 73102		INGLE WELLS; DELAWARE	
4. Well Location			
Unit Letter <u>D</u> : <u>330</u> feet from the <u>NORTH</u> line and <u>330</u> feet from the WEST line			
Section 36	Township 23S Range		NMPM EDDY , County New Mexico
11. Elevation (Show whether DR, RKB, RT, GR, etc.)			
3479' GL			
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data			
NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: PERFORM REMEDIAL WORK PLUG AND ABANDON REMEDIAL WORK ALTERING CASING			
	CHANGE PLANS	COMMENCE DRI	
PULL OR ALTER CASING		CASING/CEMEN	
CLOSED-LOOP SYSTEM	_		_
OTHER: <b>P&amp;A EXTENSION</b>		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.			
Devon Energy Production Company, LP respectfully requests a 3-month extension for the subject wells P&A procedure approved on 10-18-18. The well			
is scheduled to be plugged and abandoned by the end of the year.			
	c . 2 2	•	
Approved Until 1-15-20			
	V-T.		
Hpprover			
I hereby certify that the information above is true and complete to the best of my knowledge and belief.			
Erie Workman			
SIGNATURE	TITLE Regule	tory Compliance A	Analyst DATE 10/10/19

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

TITLE STATI Mg DATE 10/15/19 APPROVED BY: Conditions of Approval (if any):