Submit 1 Copy To Appropriate District Office	State of New Mexic		Form C-103
<u>District I</u> – (575) 393-6161	Energy, Minerals and Natural l	Resources	Revised July 18, 2013 WELL API NO.
1625 N. French Dr., Hobbs, NM 88240 District II – (575) 748-1283			30-015-36078
811 S. First St., Artesia, NM 88210	OIL CONSERVATION DI	1	5. Indicate Type of Lease
<u>District III</u> – (505) 334-6178 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. Francis	1 .	STATE FEE
District IV - (505) 476-3460	Santa Fe, NM 87503	>	6. State Oil & Gas Lease No.
1220 S. St. Francis Dr., Santa Fe, NM 87505			x
	S AND REPORTS ON WELLS	2	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG B. DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SU			Spud 16 State
PROPOSALS.)			8. Well Number
1. Type of Well: Oil Well Gas Well <u>Other</u>			7H
2. Name of Operator			9. OGRID Number
Devon Energy Production Company, LP 3. Address of Operator			6137 10. Pool name or Wildcat
333 W. Sheridan Avenue, Oklahoma City, OK 73102		ļ	Harroun Ranch, Delaware, NE
4. Well Location			· · · · · · · · · · · · · · · · · · ·
Unit Letter_D_:910 feet fro	om the North line and 810	feet from	the West line
Section 16		nge 29E	NMPM Eddy County, NM
	1. Elevation (Show whether DR, RK		
	970' GL		
12. Check Apr	propriate Box to Indicate Natur	e of Notice.	Report or Other Data
	-		•
NOTICE OF INTE			SEQUENT REPORT OF:
	_		
—		SING/CEMEN	
PULL OR ALTER CASING M DOWNHOLE COMMINGLE		SING/CEMEN	I JOB
CLOSED-LOOP SYSTEM			
OTHER:	TO 🗌	HER:	
			l give pertinent dates, including estimated date
		r Multiple Cor	npletions: Attach wellbore diagram of
roposed completion or recomp Run CBL & D			
			4
		Perfs at @ 5417	1 - WOLLT - JASE-WOLTT
		@ 2935'; B. Salt	@ 2700') - P., F@ 2985'-woc+T~
 Perf at 415'. Sqz 35 sx Cl C from 41 Perf @ 140'. Squeeze Cl C from 14 			
6. Cut wellhead off 3' BGL, set dry ho	ble marker.	otho	r w RECEIVED
		24 ths	
Spud Date:	0' to surface. ole marker. Notify QTY	NOIK GOING	FEB 0 5 2020
L			AIPTESIA
<u> </u>			
I hereby certify that the information abo	ve is true and complete to the best o	my knowledge	e and belief.
SIGNATURE	TITLE Producti	on Engineer	DATE 2-3-2020
		· · ·	
Type or print name Armon Radfar	E-mail address:armon.radfar@dv	<u>/n.com</u> PHC	DNE: 405-552-5014
For State Use Only			
	TITLE STAT		DATE 2/12/20
APPROVED BY: Conditions of Approval (if any):		- Nig-	DATE 2/12/20
			P. VISE &
-)	· · · · · ·	TACHED CO	A'S - 100-
•	*** SEE /	11ACITE	A'S-Revised
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