| Submit 3 Copies To Appropriate District Office   | State of New Mexico                    |                         | Form C-103   |
|--|--|-------------------------|--|
| District I   | Energy, Minerals and Natural Resources |                         | May 27, 2004   |
| 1625 N. French Dr., Hobbs, NM 88240<br>District II   | ·2 <sup>1</sup> ,                      |                         | WELL API NO. 30-015-00197                              |
| 1301 W. Grand Ave, Artesia, NM 88210   | OIL CONSERVATION DIVISION              |                         | 5. Indicate Type of Lease                              |
| <u>District III</u><br>1000 Rio Brazos Rd., Aztec, NM 87410  | 1220 South St. Francis Dr.             |                         | STATE  FEE   |
| District IV  | Santa Fe, NM 87505                     |                         | 6. State Oil & Gas Lease No.                           |
| 1220 S. St Francis Dr., Santa Fe, NM<br>87505  |  | i                       |  |
| 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 OR TO |  |                         |  |
| PROPOSALS.)  1. Type of Well: Oil Well   | Gas Well  Other                        | JAN 14 2010             | 8. Well Number   |
| 2. Name of Operator NMOCD ARTES A. OGRID Number  |  |                         |  |
| DEVON ENERGY PRODUCTION COMPANY, EP 6137  3. Address of Operator 10. Pool name or Wildcat  |  |                         |  |
| 1  |  | 405-552-4615            | San Andres   |
| 4. Well Location   |  |                         |  |
| Unit Letter J : 1650' feet from the South line and 1650' feet from the East line   |  |                         |  |
| Section 14   | Township 18S                           | Range 26E               | NMPM County Eddy                                       |
|  | 11. Elevation (Show whether            |                         |  |
| 3319' GL  Pit or Below-grade Tank Application □ or Closure □   |  |                         |  |
| Pit typeDepth to GroundwaterDistance from nearest fresh water wellDistance from nearest surface water  |  |                         |  |
| Pit Liner Thickness: mil   | Below-Grade Tank: Volume               | bbls; Co                | nstruction Material                                    |
| 12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data   |  |                         |  |
| NOTICE OF IN   | NTENTION TO:                           | SUBS                    | SEQU <b>LAM</b> REPORT OF:                             |
| PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☒ REMEDIAL WORK ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐   |  |                         |  |
| TEMPORARILY ABANDON  |  |                         |  |
| PULL OR ALTER CASING   | MULTIPLE COMPL                         | CASING/CEMENT           | I JOB D NOTE GODE                                      |
| OTHER:   |  | 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion  |  |                         |  |
| or recompletion.   |  |                         |  |
|  |  |                         |  |
| 1. MIRU. Tag CIBP @ 1,574'. Circulate wellbore w/10 ppg mud.   |  |                         |  |
| 2. Spot 25 sx cement on CIBP @ 1,574'. (Calc. TOC @ 1334')   |  |                         |  |
| 3. Spot 25 sx cement @ 811'. <i>(Calc TOC</i> @ <i>571') (8-5/8" csg shoe</i> @ <i>761').</i> <b>765</b><br>4. Circulate 25 sx surface plug from 240' to surface.  |  |                         |  |
| Cut wellhead off. Install dry hole marker.   |  |                         |  |
|  |  |                         |  |
|  |  |                         |  |
|  |  |                         |  |
| I hereby certify that the information  | above is true and complete to the      | he best of my knowledge | e and belief. I further certify that any pit or below- |
| grade tank has been/will be constructed or closed according to NMOCD guidelines , a general permit or an (attached) alternative OCD-approved plan.   |  |                         |  |
| SIGNATURE KIMUL X  | Jack TITL                              | E Operations Tech       | nicianDATE1/12/10                                      |
| <del></del>  |  |                         |  |
| Type or print name Ronnie Slac For State Use Only  | k E-mail address:                      | Ronnie.Slack@dvn.       | Telephone No. 405-552-4615                             |
| 101 State Ost Only   | $L\mathcal{L}$                         |                         | 1/12/0-12  |
| APPROVED BY:   | TITLI                                  | E                       |  |
| Conditions of Approval (It any).   |  |                         |  |
| Approval Granted providing work is complete by   |  |                         |  |
| 16 Complete by 2/17/20/0   |  |                         |  |
|  |  | •                       | •  |



