

Submit 3 Copies To Appropriate District Office
District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Ave., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103
May 27, 2004

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

WELL API NO. 30-015-34222
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 Spud 16 State
8. Well Number 5
9. OGRID Number 6137
10. Pool name or Wildcat Laguna Salado; Atoka (Gas)

SUNDRY 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 C-101) FOR SUCH PROPOSALS.)

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

2. Name of Operator
Devon Energy Production Company, LP

3. Address of Operator
20 North Broadway Oklahoma City, Oklahoma 73102-8260

4. Well Location
Unit Letter I : 2320 feet from the south line and 660 feet from the east line
Section 16 Township 23S Range 29E NMPM County Eddy

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
2962'

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

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"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input 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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Devon Energy Production Co., LP respectfully requests permission to change plans from our original APD on our cementing program:

On our 7" casing:

Stage 1: Lead w/ 376 sacks (35:65) Poz (Fly Ash): Class H Cement + 5% bwow Sodium Chloride + 0.25 lbs/sack Cello Flake + 3 lbs/sack LCM-1 + 0.35% bwoc FL-52 + 6% bwoc Bentonite + 108.6% Fresh Water. Tail with 772 sacks (60:40) Poz (Fly Ash): Class H Cement + 1% bwow Sodium Chloride + 0.75% bwoc BA-10 + 0.15% bwoc R-3 + 0.75% bwoc EC-1 + 0.25 lbs/sack Cello Flake + 3 lbs/sack Kol Seal + 4% bwoc MPA-1 + 63% Fresh Water.

Stage 2: DV tool @ 3500'.

Lead w/ 257 sacks (35:65) Poz (Fly Ash): Class C Cement + 6% bwow Bentonite + 5% bwow Sodium Chloride + 0.25 lbs/sack Cello Flake + 100.7% Fresh Water. Tail with 100 sacks Class C Cement + 2% bwoc Calcium Chloride + 56.4% Fresh Water.

Liner: Cement with 228 sacks (15:61:11) Poz (Fly Ash): Class C Cement: CSE-2 + 0.15% bwoc R-3 + 3% bwow Potassium Chloride + 1% bwoc EC-1 + 0.25 lbs/sack Cello Flake + 0.4% bwoc CD-32 + 5 lbs/sack LCM-1 + 0.6% bwoc FL-25 + 0.6% bwoc FL-52A + 71.6% Fresh Water.

I hereby certify that the information above is true and complete to the best of my knowledge 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 _____ TITLE Senior Engineering Technician DATE 10/18/05

Type or print name Stephanie Ysasaga E-mail address Stephanie.Ysasaga@dmv.com Telephone No. (405) 552-7802

For State Use Only

APPROVED BY: _____ TITLE _____ DATE OCT 19 2005

Conditions of Approval (if any):