| Office Submit I Copy To Appropriate District  | State of New Mexico                           |                            | Form C-103                         |  |
|---|---|----------------------------|------------------------------------|--|
| District I - (575) 393-6161   | Energy, Minerals and Natural Resources        |                            | Revised July 18, 2013 WELL API NO. |  |
| 1625 N. French Dr., Hobbs, NM 88240<br><u>District II</u> – (575) 748-1283  |   |                            | 30-015-42082                       |  |
| 811 S. First St., Artesia, NM 88210   | OIL CONSERVATION DIVISION                     |                            | 5. Indicate Type of Lease          |  |
| District III - (505) 334-6178<br>1000 Rio Brazos Rd., Aztec, NM 87410   | 1220 South St. Francis Dr.                    |                            | STATE T FEE                        |  |
| <u>District IV</u> (505) 476-3460<br>1220 S. St. Francis Dr., Santa Fe, NM  | Santa Fe, NM 87505                            |                            | te Oil & Gas Lease No.             |  |
| 87505   |   |                            |                                    |  |
|   | ICES AND REPORTS ON WELLS                     |                            | ase Name or Unit Agreement N       | √ame   |
| (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 |   |                            | Ark 36 State                       |  |
| PROPOSALS.)   |   |                            | ell Number 1H                      |  |
| 1. Type of Well: Oil Well Gas Well Other  2. Name of Operator   |   |                            | 9. OGRID Number                    |  |
| Devon Energy Production Co., L.P. Linda Good  |   |                            | 6137                               |  |
| 3. Address of Operator  |   |                            | 10. Pool name or Wildcat           |  |
| 333 West Sheridan Ave, Oklahoma City, OK 73102 405-552-6558   |   |                            | gston Ridge; Bone Spring           | <u>,                                      </u> |
| 4. Well Location  | 200   | 205                        | *47                                |  |
| Unit Letter M :   | 200 feet from the S                           | line and . 795             | feet from theW                     | _line  |
| Section 36  | Township 22S Rang                             |                            | M County Eddy                      |  |
|   | 11. Elevation (Show whether DR, R<br>3450' GR | KB, R1, GR, etc.)          |                                    |  |
| · · · · · · · · · · · · · · · · · · ·   | . \   |                            | advance of travers                 |  |
| 12. Check   | Appropriate Box to Indicate Nat               | ure of Notice, Report      | or Other Data                      |  |
| NOTICE OF IN  | ITENTION TO:                                  | SUBSEOU                    | ENT REPORT OF:                     |  |
| PERFORM REMEDIAL WORK   |   |                            |                                    |  |
| TEMPORARILY ABANDON   | CHANGE PLANS COMMENCE DRILLING OPNS. P AND A  |                            |                                    |  |
| PULL OR ALTER CASING  | MULTIPLE COMPL                                | CASING/CEMENT JOB          |                                    |  |
| DOWNHOLE COMMINGLE  |   |                            |                                    |  |
| CLOSED-LOOP SYSTEM  OTHER:  | Shut-In pg                                    | OTHER:                     |                                    |  |
| 13. Describe proposed or comp   | leted operations. (Clearly state all per      | tinent details, and give p | ertinent dates, including estima   | ated date                                      |
| of starting any proposed we<br>proposed completion or rec   | ork). SEE RULE 19.15.7.14 NMAC.               | For Multiple Completion    | s: Attach wellbore diagram of      | Ĩ  |
|   |   |                            |                                    |  |
| Devon Energy Production   | on Co., LP respectfully requests a            | approval to shut-in th     | is well, effective January         | 1, 2016,                                       |
|   | l capacity constraints. Our inter             |                            | roduction once facilities h        | iave been                                      |
| constructed and third-pa  | arty capacity has been completed              | d.                         |                                    |  |
|   |   |                            | NM OIL CONSE                       | FRVATIO  |
|   |   |                            | ARTESIA DIS                        | TRICT  |
|   |   |                            | DEC 17                             | 2015   |
|   |   |                            |                                    | 2010   |
|   |   |                            | RECEIV                             | EΩ   |
|   |   |                            |                                    | -L   |
| Spud Date:  | Rig Release Date                              | :                          |                                    |  |
|   |   |                            | <del></del>                        |  |
| I haraby gartify that the information   | above is true and complete to the best        | of my knowledge and he     | lief                               |  |
| Thereby certify that the information  | above is true and complete to the best        | Of my knowledge and to     | aici.                              |  |
| D n   | Hand  |                            | 12/16/2015                         | <b>-</b>                                       |
| SIGNATURE Sincla  | XJOOOK TITLE Regula                           | tory Compliance Spe        | cialist DATE 12/16/2015            | ·····  |
| Type or print name Linda Good   | F-mail address:                               | linda.good@dvn.coi         | n PHONE: 405-552-                  | -6558  |
| For State Use Only  |   | ₹                          |                                    |  |
| T/// kg   | de Desi                                       | A Sepense                  | num 1)/10/                         |  |
| APPROVED BY: VIVO   | TITLETITLE                                    | <u> </u>                   | DATE 12/18/13                      | )  |
| Conditions of Approval (if any):  |   |                            |                                    |  |