

Submit 1 Copy To Appropriate District Office
 District I - (575) 393-6161
 1625 N. French Dr., Hobbs, NM 88240
 District II - (575) 748-1283
 811 S. First St., Artesia, NM 88210
 District III - (505) 334-6178
 1000 Rio Brazos Rd., Aztec, NM 87410
 District IV - (505) 476-3460
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
 Energy, Minerals and Natural Resources
NM OIL CONSERVATION
 ARTESIA DISTRICT
OIL CONSERVATION DIVISION
 SEP 14 2017
 1220 South St. Francis Dr.
 Santa Fe, NM 87505
RECEIVED

Form C-103
 Revised July 18, 2013

WELL API NO. 30-015-36197
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 COTTON DRAW
8. Well Number 111
9. OGRID Number 6137
10. Pool name or Wildcat COTTON DRAW; BRUSHY CANYON
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3517' KB; 3503' GL; 14' KB to GL

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
333 W. Sheridan Avenue, Oklahoma City, OK 73102

4. Well Location
 Unit Letter C : 660 feet from the North line and 1980 feet from the West line
 Section 36 Township 24S Range 31E NMPM Eddy County, NM

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 type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input checked="" type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
CLOSED-LOOP SYSTEM <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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 9/5/17-MIRU for P&A.
- 9/5/17-Retrieved 2-7/8" production tubing and rod pump assembly from 8,345'.
- 9/6/17-Set 5-1/2" CIBP @ 6,600'. Tagged plug.
- 9/7/17-Circulate w/10# mud. Spot 25 sx Cl C @ 6,600'. Tagged TOC @ 6,320'. Perfed @ 4,480'. Unable to pump in. Spot 40 sx Cl C @ 4,530'. WOC.
- 9/8/17-Tagged TOC @ 4,132'. Perfed 5-1/2" casing @ 1,180'. Pumped 120 sx Cl C in/out @ 1,180'. WOC.
- 9/11/17-Tagged TOC @ 606'. Perfed 5-1/2" casing @ 140'. Pumped 35 sx Cl C in/out to surface.
- 9/11/17-Cut wellhead off 3' BGL. Set BGL dry hole marker. Wellbore plugged & abandoned.

Spud Date:

Rig Release Date:

Approved for plugging of well bore only.
 Liability under bond is retained pending receipt
 of C-103 (Subsequent Report of Well Plugging)
 which may be found at OCD Web Page under
 Forms, www.emnrd.state.nm.us/oecd.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Ronnie Slack TITLE Production Technologist DATE 9-12-17

Type or print name Ronnie Slack E-mail address: Ronnie.Slack@dvn.com PHONE: 405-552-4615

For State Use Only

APPROVED BY: Robert 2 Byrd TITLE COMPLIANCE OFFICER DATE 9/14/17
 Conditions of Approval (if any):