

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

Form C-103
 Revised August 1, 2011

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

WELL API NO. 30-015-26172
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 Harroun Trust
8. Well Number 1
9. OGRID Number 6137
10. Pool name or Wildcat Culebra Bluff Atoka, South (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 NMPM-10) FOR PROPOSALS.)

1. Type of Well: Oil Well Gas Well Other **ARTESIA DISTRICT**

2. Name of Operator
Devon Energy Production Company, LP **JAN 17 2019**

3. Address of Operator
333 W. Sheridan Avenue, Oklahoma City, OK 73102 **RECEIVED**

4. Well Location
 Unit Letter O : 660 feet from the South line and 2310 feet from the East line
 Section 30 Township 23S Range 29E NMPM Eddy County NM

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
2959.8' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO: PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/>		SUBSEQUENT REPORT OF: REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input checked="" 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 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

- 12/10/18 Notify OCD of intent. Cut off pkr @ 11,954'.
- 12/11/18 Set 4 1/2" CIBP @ 11,954'.
- 12/12/18 Verify 4 1/2" CIBP @ 11,952'. Test well 500 psi. 200 bbl MLF. Spot 25 sx's class "H" cmt @ 11,952'. Tag @ 11,625'. Perf @ 10,800'. Attempt to EIR. Press up. Notify Gilbert w/OCD.
- 12/17/18 Spot 25 sx's class "H" cmt @ 10,850'-10,700'. Tag TOC @ 10,560'. Spot 35 sx's class "H" cmt @ 9980'-9780'. Tag TOC @ 9770'.
- 12/18/18 Set 7" CIBP @ 9765'. Verify CIBP @ 9765' w/2 3/8" tbg.
- 12/19/18 Spot 25 sx's class "H" cmt @ 9765'-9665'. Circ 200 bbl MLF @ 6500'. Spot 25 sx's class "H" cmt @ 6500'-6400'. Perf/sqz 50 sx's class "C" cmt @ 2860'-2750'. Tag TOC @ 2689'.
- 12/20/18 Perf/sqz 605 sx's class "C" cmt @ 550'-surf. Verify cmt @ surf.
- 12/21/18 Cut off WH, anchors and clear location. P&A completed.

Spud Date: Rig Release Date: **ENTERED**
 1-22-19

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

SIGNATURE TITLE Agent DATE 12/21/18
 Type or print name Jimmy Bagley E-mail address: sunsetwellservice@yahoo.com PHONE: 432-561-8600
For State Use Only

APPROVED BY: TITLE Staff DATE 1-23-19
 Conditions of Approval (if any):