

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 July 18, 2013

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

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.)		WELL API NO. 30-015-27860
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP.		6. State Oil & Gas Lease No.
3. Address of Operator 333 WEST SHERIDAN AVENUE, OKC, OK 73102		7. Lease Name or Unit Agreement Name TODD 13N FED
4. Well Location <u>D5</u> Unit Letter <u>N</u> : <u>330</u> feet from the <u>SOUTH</u> line and <u>2500</u> feet from the <u>WEST</u> line Section <u>13</u> Township <u>23S</u> Range <u>31E</u> NMPM <u>EDDY COUNTY, NM</u>		8. Well Number 14
		9. OGRID Number 6137
		10. Pool name or (33745) INGLE WELLS; DELAWARE
		11. Elevation (Show whether DR, RKB, RT, GR, etc.)

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 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: BRADENHEAD TEST - ACOI <input checked="" 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.

Devon Energy Production Company, LP respectfully submits results of Bradenhead test for compliance to the ACOI agreement approved on December 19, 2016.

ATTACHMENT: Bradenhead Results (02/22/19)

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

SIGNATURE Erin Workman TITLE Regulatory Compliance Analyst DATE 03/04/19

Type or print name Erin Workman E-mail address: Erin.workman@dvn.com PHONE: (405) 552-7970

For State Use Only

APPROVED BY: [Signature] TITLE compliance officer DATE 3-13-19
 Conditions of Approval (if any):



NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION
AZTEC DISTRICT OFFICE
1000 RIO BRAZOS ROAD
AZTEC NM 87410
(505) 334-6178 FAX: (505) 334-6170
<http://emrmd.state.nm.us/ocd/District/R/3/district.htm>

BRADENHEAD TEST REPORT

(submit 1 copy to above address)

Date of Test 2-22-19 Operator Dexon API #30-0 1527860
Property Name Todd 13N Well No. 14 Location: Unit N Section 13 Township 23S Range 31E
Well Status (Shut-In or Producing) Initial PSI: Tubing 0 Intermediate NA Casing 60 Bradenhead 0

OPEN BRADENHEAD AND INTERMEDIATE TO ATMOSPHERE INDIVIDUALLY FOR 15 MINUTES EACH

Testing TIME	PRESSURE				
	BH	Bradenhead		INTERM	
		Int	Csg	Int	Csg
5 min	0		60	NA	60
10 min	0		60		60
15 min	0		60		60
20 min	0		60		60
25 min	0		60		60
30 min	0		60	W	60

	FLOW CHARACTERISTICS	
	BRADENHEAD	INTERMEDIATE
Steady Flow		NA
Surges		
Down to Nothing		
Nothing	X	
Gas		
Gas & Water		
Water		

If bradenhead flowed water, check all of the descriptions that apply below: NA

CLEAR _____ FRESH _____ SALTY _____ SULFUR _____ BLACK _____

5 MINUTE SHUT-IN PRESSURE BRADENHEAD 0 INTERMEDIATE NA

REMARKS: Opened Bradenhead and had no psi

By Christopher West Witness _____
Assistant Foreman Production
(Position)

E-mail address christopher.west@dvn.com