

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

WELL API NO. 30-015-27365
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 Todd 36D State
8. Well Number 2
9. OGRID Number 6137
10. Pool name or Wildcat Ingle Wells; Delaware
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3479' 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 D : 330 feet from the North line and 330 feet from the West line  
 Section 36 Township 23S Range 31E NMPM County Eddy

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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.

- 11/12/19 Notified OCD of intent.
- 11/18/19 Set 5 1/2" CIBP @ 6500'. Verify w/2 3/8" tbg.
- 11/19/19 Circ 50 bbl MLF @ 6500'-4500'. Spot 25 sx class "c" cmt @ 6500'-6400'. Tag TOC @ 6200'. Spot 25 sx class "c" cmt @ 5575'-5475'. Tag TOC @ 5404'.
- 11/20/19 Spot 315 sx class "c" cmt @ 4560'-1420'. Tag TOC @ 1438'.
- 11/21/19 Perf/circ 350 sx class "c" cmt @ 1400'-surf, 5 1/2" x 8 5/8". Verify cmt @ surf.
- 11/22/19 RD P&A equipment, cutoff WH, set dry hole marker, clean location. P&A complete.

Approved for plugging of well bore only.  
 Liability under bond is retained pending receipt  
 of C-103 (Subsequent Report of Well Plug.)  
 which may be found at OCD Web Page under  
 For [www.emnrd.state.nm.us/oed](http://www.emnrd.state.nm.us/oed).

RECEIVED

JAN 02 2020

DISTRICT 7 - ARTESIA O.C.D.

Spud Date:

[Empty box for Spud Date]

Rig Release Date:

[Empty box for Rig Release Date]

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

SIGNATURE [Signature] TITLE \_\_\_\_\_ Agent DATE 11/22/2019

Type or print name Jimmy Bagley E-mail address: sunsetwellservice@yahoo.com PHONE: 432-561-8600

**For State Use Only**

APPROVED BY: [Signature] TITLE Staff mg. DATE 1/8/20  
 Conditions of Approval (if any):

[Handwritten mark]