

Submit 3 Copies To Appropriate District  
Office  
District I  
1625 N French Dr , Hobbs, NM 88240  
District II  
1301 W Grand Ave , Artesia, NM 88210  
District III  
1000 Rio Brazos Rd , Aztec, NM 87410  
District IV  
1220 S St Francis Dr , Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources

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



Form C-103  
May 27, 2004

<b>SUNDRY NOTICES AND REPORTS ON WELLS</b> (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. 30-015-34255
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <input type="checkbox"/> <b>FEB 07 2008</b>		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/>
2. Name of Operator Devon Energy Production Company, LP <b>OCD-ARTESIA</b>		6. State Oil & Gas Lease No.
3. Address of Operator 20 North Broadway Oklahoma City, Oklahoma 73102-8260 (405) 552-7802		7. Lease Name or Unit Agreement Name Riverbend 24
4. Well Location Unit Letter <u>K</u> : <u>1500</u> feet from the <u>South</u> line and <u>1980</u> feet from the <u>West</u> line Section <u>24</u> Township <u>22S</u> Range <u>27E</u> NMPM County <u>Eddy</u>		8. Well Number 1Y
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3064'		9. OGRID Number 6137
Pit or Below-grade Tank Application <input type="checkbox"/> or Closure <input type="checkbox"/>		10. Pool name or Wildcat Otis; Atoka
Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____		
Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____		

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

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐  
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐  
PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐

OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

OTHER: ATOKA COMPLETION ☒

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 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion

11/20/07 – 11/30/07:

MIRU. Bld dn tbg – all gas- NU/DN/Tree – NU/BOP. Rls pkr – mv dn hole & rls RBP & TOH 356 jts of 2 3/8" N-80 tbg. RIH & Set 4.5" CIBP @ 11,700' & 11,650' & cap w/35' cmt. New PBTD @ 11,615'. RU W/L – RIH & perf Atoka @ 11,024 – 11,026', 11,100 – 11,106', 11,119 – 11,122; (4SPF) 48 holes. RIH & tbg set 4.5" arrow set pkr @ 10,990' w/346 jts in hole. NU/DN/BOP – NU/Tree – RIH w/swab. Swab. Bld dn well, swab. RU kill trk & pkl tbg w/15% acid. Ld tbg, swab. Acidize Atoka 11,024 – 11,122' w/1,500 gal of 15% HCL + 125 ball slrs. Open well, flw bck. Turn well over to production. Bring well on line, open to sales.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE [Signature] TITLE Sr. Staff Engineering Technician DATE 12/13/2007

Type or print name Stephanie A. Ysasaga E-mail address: Stephanie.Ysasaga@dvn.com Telephone No. (405) 552-7802

For State Use Only

APPROVED BY: \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

Conditions of Approval (if any):

Accepted for record - NMOCD