

State of New Mexico
Energy, Minerals and Natural Resources

Form C-103

October 13, 2009

RECEIVED
CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505
MAR 18 2011
HOBBS

WELL API NO.

30-015-38433

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

Cotton Draw Unit

8. Well Number

161H

9. OGRID Number

6137

10. Pool name or Wildcat

Delaware; Brushy Canyon

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 L. P.

3. Address of Operator:

20 N. Broadway, Oklahoma City, OK 73102-8260

4. Well Location

Unit Letter D : 200' feet from the North line and 440' feet from the West lineSection 2Township 25SRange 31E

NMPM

Eddy County

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

3457' GR

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 ☐DOWNHOLE COMMINGLE ☐OTHER: ☐

SUBSEQUENT REPORT OF:

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

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 request to change the 8 3/4" hole size to 8 1/2" once the curve is landed and maintain until TD. Once the well is horizontal (deviation in wellbore is between ~89-91*inc) bit size will be decreased to 8 1/2" until TD to utilize lateral rotary steerable assembly. ~ 8500' MD

Thank you for your understanding on this matter.

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

SIGNATURE Spence Laird TITLE Regulatory Analyst DATE 3/17/11

Type or print name Spence Laird E-mail address: Spence.Laird@dmr.com PHONE: 405.228.8973

For State Use Only

APPROVED BY: David Gray TITLE Field Supervisor DATE 4-5-11

Conditions of Approval (if any):

