Submit 1 Copy To Appropriate District	Form C-103
Office Energy, Minerals and Natural Res	Sources October 13, 2009
District I 1625 N. French Dr., Hobbs, NM380 BBS OCD District II	20.025.20808
District II	ISION 5 Indicate Type of Lease
District II 1301 W. Grand Ave., Artesia, NM 88210 2 2011 District III District IIII	r. STATE STATE -
Santa Fe, NM 87505	6. State Oil & Gas Lease No.
District IV 1220 S. St. Empris Dr. Santa Fa. NM and St. St. Formation 1	
1220 S. St Francis Dr., Santa Fe, NECENED 87505	
SUNDRY NOTICES AND REPORTS ON WELLS	7. Lease Name or Unit Agreement Name
(DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BAC DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH	
PROPOSALS.)	
1. Type of Well: Oil Well 🗌 Gas Well 🛛 Other 🦯	8. Well Number
2. Name of Operator Devon Energy Production Company L. P.	9. OGRID Number
2 Address of Operator	10. Pool name or Wildcat
 Address of Operator N. Broadway, Oklahoma City, OK 73102-8260 	Wildcat; Wolfcamp Gas
4. Well Location	-1 1940 foot from the East line
Unit Letter J : 1700 feet from the South line an	
	ge 33E NMPM Lea County
11. Elevation (Show whether DR, RKB, 3716' GL	к1, GK, elc.)
	IMENCE DRILLING OPNS. P AND A
OTHER: Drilling Operations	EB·
 13. Describe proposed or completed operations. (Clearly state all pertinent of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For proposed completion or recompletion. Devon Energy Production Company L. P., on July 1, 2011, drilled an ad a total depth of 40'. 	Multiple Completions: Attach wellbore diagram of
Send Date: 7/26/10 @ 12:00 hrs. Pig Palance Date:	
Spud Date: //26/10 @ 12:00 hrs. Rig Release Date:	
	ny knowledge and belief.
	ny knowledge and belief.
Thereby certify that the information above is true and complete to the best of n SIGNATURE	
Spid Date: Rig Release Date. Inhereby certify that the information above is true and complete to the best of n SIGNATURE TITLE_Regulatory Analyst Signe or print name Spence Laird E-mail address: Spencel.Laird@dvn.cor	tDATE <u>7/8/11</u>
hereby certify that the information above is true and complete to the best of n SIGNATURE	tDATE <u>7/8/11</u>

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