

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

HOBBSCOCD OCT 12 2012 CONSERVATION DIVISION 2012

1220 South St. Francis Dr.

Santa Fe, NM 87505

Form C-103

Revised August 1, 2011

WELL API NO. 30-025-40611	
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 Ironhouse 20 State Com	
8. Well Number #001H	
9. OGRID Number 6137	
10. Pool name or Wildcat WC-025 G-06 S183518A; Bone Spring	
4. Well Location Unit Letter <u>P</u> feet <u>660</u> from the <u>South</u> line and <u>50</u> feet from the <u>East</u> line Section <u>20</u> Township <u>18S</u> Range <u>35E</u> NMPM <u>Lea</u> County <u></u>	
11. Elevation (Show whether DR, RKB, RT, GR, etc.) n/a	

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: Withdrawal APD Permit ☒

SUBSEQUENT REPORT OF:

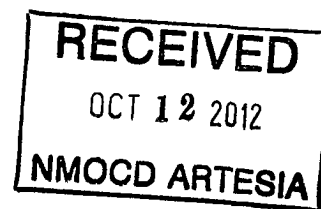
REMEDIAL WORK ☐ ALTERING CASING ☐  
COMMENCE DRILLING OPNS. ☐ P AND A ☐  
CASING/CEMENT JOB ☐

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 respectfully requests the withdrawal of the approved APD for the Ironhouse 20 State Com 1H in Section 20-18S-35E.

Thank you!



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 Associate DATE: 10/11/12

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

For State Use Only

APPROVED BY: [Signature] TITLE: Dist. Mgr DATE: 10/25/2012  
Conditions of Approval (if any):

OCT 25 2012

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

HOBBS OCD

State of New Mexico  
Energy, Minerals and Natural Resources

Form C-103

Revised August 1, 2011

OCT 4 2012

RECEIVED

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

WELL API NO. 30-025-40611
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 Ironhouse 20 State Com
8. Well Number #001H
9. OGRID Number 6137
10. Pool name or Wildcat WC-025 G-06 S183518A; Bone Spring

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  
333 W. Sheridan, Oklahoma City, OK 73102

4. Well Location

Unit Letter P feet 660 from the South line and 50 feet from the East line

Section 20 Township 18S Range 35E NMPM Lea, County

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

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 ☐

SUBSEQUENT REPORT OF:

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

OTHER: Withdrawal APD Permit ☒

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 respectfully requests the withdrawal of the approved APD for the Ironhouse 20 State Com 1H in Section 20-18S-35E.

Thank you!

Accepted for Record Only

ELL 10-25-201

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 Associate DATE: 10/11/12

Type or print name:

E-mail address: Erin.workman@devon.com

PHONE: (405) 552-7970

For State Use Only

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

Conditions of Approval (if any):

Em