

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 August 1, 2011

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

WELL API NO.	30-025-41487
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	HOBBS OGD Thistle Unit
8. Well Number	61H
9. OGRID Number	6137
10. Pool name or Wildcat	Triple X; 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 West Sheridan, Oklahoma City, OK 73102

4. Well Location
 Unit Letter M : 200 feet from the South line and 660 feet from the West line
 Section 22 Township 23S Range 33E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)
 GL: 3701.8'

MAY 16 2014
 RECEIVED

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
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 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"/>			
OTHER: <input type="checkbox"/>		OTHER: Completion <input checked="" 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.

3/26/14-4/17/14: MIRU WL & PT. TIH w/ CCL tool and gamma ray tool. TIH & ran CBL, found estimated TOC @ 4340'. Perf 2nd Bone Spring, 11348'-15539', total 720 holes. Frac'd 11348'-15539' in 15 stages. Frac totals 45,000 gals 15% HCl Acid, 784,922# 100 Mesh, 1,631,891# Premium White 40/70, 493,989# 40/70 CRC. ND frac, MIRU PU, DO plugs. CHC, FWB, ND BOP. RIH w/338 jts 2-7/8" L-80 tbg, set @ 10754.1'. TOTP.

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

SIGNATURE Megan Moravec TITLE Regulatory Compliance Analyst DATE 5/14/2014

Type or print name Megan Moravec E-mail address: megan.moravec@dmn.com PHONE: _____

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 05/24/14

Conditions of Approval (if any): _____

MAY 27 2014