

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



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

WELL API NO. 30-025-30898
5. Indicate Type of Lease STATE [X] FEE []
6. State Oil & Gas Lease No.
7. Lease Name or Unit Agreement Name Sharp Shooter 2 State
8. Well Number 5
9. OGRID Number 6137
10. Pool name or Wildcat YOUNG; BONE SPRING, NORTH

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 [X] Other []
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP.
3. Address of Operator 333 WEST SHERIDAN AVENUE, OKC, OK 73102
4. Well Location Unit Letter P : 990 feet from the South line and 330 feet from the East line
Section 2 Township 18S Range 32E NMPM Eddy, County New Mexico
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3884'

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 []
CLOSED-LOOP SYSTEM []
OTHER: Shut-In Status [X]
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 respectfully requests approval to place this well in Drilling Shut-In status for one year pending evaluation of potential for a workover. Well has been shut-in since 07/30/2016. JBC

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 Professional DATE 10.31.16

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

For State Use Only APPROVED BY: Mary Brown TITLE Dist Supervisor DATE 10/31/2016
Conditions of Approval (if any):