

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

HOBBBSOCD
 AUG 16 2017
 RECEIVED

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

<p style="text-align: center;">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.)</p> <p>1. Type of Well: Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other <input type="checkbox"/></p> <p>2. Name of Operator: Devon Energy Production Company, L.P. /</p> <p>3. Address of Operator: 333 West Sheridan, Oklahoma City, OK 73102</p> <p>4. Well Location Unit Letter <u>O</u> : <u>248</u> feet from the <u>South</u> line and <u>2022</u> feet from the <u>East</u> line Section <u>34</u> Township <u>23S</u> Range <u>33E</u> NMPM County <u>Lea</u></p> <p>11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 3644</p>	<p>WELL API NO. 30-025-43486</p> <p>5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/> /</p> <p>6. State Oil & Gas Lease No.</p> <p>7. Lease Name or Unit Agreement Name Thistle Unit /</p> <p>8. Well Number 132H /</p> <p>9. OGRID Number 6137 /</p> <p>10. Pool name or Wildcat Triple X; Bone Spring</p>
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12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<p style="text-align: center;">NOTICE OF INTENTION TO:</p> <p>PERFORM REMEDIAL WORK <input type="checkbox"/> PLUG AND ABANDON <input type="checkbox"/> TEMPORARILY ABANDON <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> PULL OR ALTER CASING <input type="checkbox"/> MULTIPLE COMPL <input type="checkbox"/> DOWNHOLE COMMINGLE <input type="checkbox"/></p> <p>OTHER: <input type="checkbox"/></p>	<p style="text-align: center;">SUBSEQUENT REPORT OF:</p> <p>REMEDIAL WORK <input type="checkbox"/> ALTERING CASING <input type="checkbox"/> COMMENCE DRILLING OPNS. <input type="checkbox"/> P AND A <input type="checkbox"/> CASING/CEMENT JOB <input type="checkbox"/></p> <p>OTHER: Completion <input checked="" type="checkbox"/></p>
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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.

5/4/17-7/31/17: MIRU WL & PT. TIH & ran CBL, found ETOC @ 3800'. TIH w/pump through frac plug and guns.
 Perf Bone Spring, 10,300'-16,913'. Frac totals 34,398g acid, 10,650,000# prop.
 ND frac, MIRU PU, NU BOP, DO plugs & CO to FC 16,949'. CHC, FWB, ND BOP. RIH w/285 jts 2-7/8" L-80 tbg, set @ 9513'. TOP.

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

SIGNATURE Rebecca Deal TITLE Regulatory Analyst DATE 8/15/2017

Type or print name Rebecca Deal E-mail address: Rebecca.Deal@dvn.com PHONE: 405-228-8429

For State Use Only

APPROVED BY: [Signature] TITLE Petroleum Engineer DATE 09/19/17
 Conditions of Approval (if any):