

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

Form C-103  
 Revised August 1, 2011

**HOBBS OGD**  
**SEP 29 2017**  
**RECEIVED**

WELL API NO. 30-025-43563
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 Thistle Unit
8. Well Number 102H
9. OGRID Number 6137
10. Pool name or Wildcat Triple X; Bone Spring
11. Elevation (Show whether DR, RKB, RT, GR, etc.) GL: 3640

**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 FA : 215 feet from the South line and 400 feet from the East line  
 Section 34 Township 235 Range 33E NMPM County Lea

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

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
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.

5/11/17-9/8/17: MIRU WL & PT. TIH & ran CBL, found ETOC @ 4350'. TIH w/pump through frac plug and guns.  
 Perf Bone Spring, 10,202'-24,098'. Frac totals 48,552 gal acid, 21,180,606# prop. ND frac, MIRU PU, NU BOP, DO plugs & CO to PBTD 24149'.  
 CHC, FWB, ND BOP. 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 9/27/2017

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 10-3-17  
 Conditions of Approval (if any):