| | Submit 1 Copy To Appropriate District Office | State of New N | Mexico | | Form C-1 | | |
|---|--|--|--|--|-----------------------|------|--|
| | District I – (575) 393-6161 | Energy, Minerals and Na | Revised July 18, 2013 | | | | |
| | 1625 N. French Dr., Hobbs, NM 88240 | 0.00 | | WELL API NO. | | | |
| š | <u>District II</u> – (575) 748-1283 811 S. First St., Artesia, NM 88210 | OIL CONSERVATION | ON DIVISION | 30-025-42420 5. Indicate Type of Lease | | | |
| | District III - (505) 334-6178 | 1220 South St. Fr | rancis Dr. | | FEE | | |
| | 1000 Rio Brazos Rd., Aztec, NM 87410 District IV – (505) 476-3460 | Santa Fe, NM | 87505 | 6. State Oil & Gas Lease No. | | | |
| | 1220 S. St. Francis Dr., Santa Fe, NM | | | 0. 5 | | | |
| ١ | 87505 | PICES AND DEPONTS ON WEI | T.C. | 7 1 N | | | |
| | SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEP TO PUBLICATION OF THE PROPOSALS TO DRILL OR TO DEEP TO PUBLICATION OF THE PROPOSALS TO DRILL OR TO DEEP TO PUBLICATION OF THE PROPOSALS TO DRILL OR TO DEEP TO PUBLICATION OF THE PROPOSALS TO DRILL OR TO DEEP TO PUBLICATION OF THE PUBLICATION O | | | /. Lease Name of | r Unit Agreement Name | 9 | |
| | DIFFERENT RESERVOIR. USE "APPL | ICATION FOR PERMIT" (FORM C-101) | FOR SUCH | THISTLE | | / | |
| | PROPOSALS.) | Cas Wall Cother Fi | ZB 2 0 2018 | 8. Well Number | | | |
| | 1. Type of Well: Oil Well | Gas well <u>Other</u> | TD 2 0 2010 | 23H | | 1 | |
| | 2. Name of Operator | | | 9. OGRID Number | | | |
| - | Devo Energy Production Company, LP | | | 6137 | | | |
| | Address of Operator W. Sheridan Avenue, Oklahoma City, OK 73102 | | | 10. Pool name or Wildcat Brinninstool;Delaware | | | |
| - | | ma City, OK 73102 | | Brinninstool;Dela | ware | | |
| | 4. Well Location | | | | | | |
| | | :89_feet from theSouth | | feet from the _ | | | |
| ļ | Section 34 | Township 23S | Range 33E | NMPM | Lea County, NM | - | |
| ı | | 11. Elevation (Show whether I | |) | | | |
| ı | | 3655' KB; 3632' GL; 23' KB | to GL | F 2450 | HERMAN DRESSALLS | 1 | |
| | 10 01 1 | | NI (CNI () | D (0.1 | D / | | |
| | 12. Check | Appropriate Box to Indicate | Nature of Notice, | Report or Other | Data | | |
| | NOTICE OF I | NOTICE OF INT | | | PORT OF: | | |
| | PERFORM REMEDIAL WORK | REMEDIAL WOR | SUBSEQUENT REPORT OF: REMEDIAL WORK ALTERING CASING | | | | |
| | TEMPORARILY ABANDON | | COMMENCE DRILLING OPNS. P AND A | | | | |
| | PULL OR ALTER CASING | P&A NR PM | CASING/CEMEN | | | | |
| | DOWNHOLE COMMINGLE | P&A R | | | | | |
| | CLOSED-LOOP SYSTEM |] | * | | | | |
| _ | OTHER: | | OTHER: | | | | |
| | | pleted operations. (Clearly state a | | | | date | |
| | of starting any proposed w | vork). SEE RULE 19.15.7.14 NM | AC. For Multiple Con | mpletions: Attach v | vellbore diagram of | | |
| | proposed completion of re | completion. | | | | | |
| | 1. 2/6/18-MIRU for P&A. | | | | | | |
| | | 2. 2/7/18-Retrieve 2-7/8", 6.5# production tubing and ESP pump assembly from 8,356'. | | | | | |
| | | 2/8/18-Set 5-1/2" CIBP @ 8,440'. Tagged plug. Circulated wellbore w/10# mud. Tested casing to 500 psi. Spot 60 sx Cl H @ | | | | | |
| | 8,440'. | | | | | | |
| | | 4. 2/9/18-Tagged TOC @ 8,171'. Spot 90 sx Cl C @ 5,460'. Tagged TOC @ 4,866'. | | | | | |
| | | 2/12/18-Perfed 7" casing @ 1,860'. Pumped 40 sx Cl C in/out @ 1,860'. Tagged TOC @ 1,705'. Perfed 7" casing @ 1,440'. Pumped 40 sx Cl C in/out @ 1,440'. | | | | | |
| | 6. /2/13/18-Tagged TOC @ 1 | wellhead off 3' RGI | | | | | |
| | Cement circulated on all c | weiliead off 5 Bol. | | | | | |
| | | usings. Set Bell ury nere manner. | , viologie pragged ee | | | | |
| | | | Approved for Plug | ging of wellbore o | nly. Liability | | |
| | | | under bond is retain | | | | |
| | Spud Date: | Rig Relea | completion of the | | | | |
| | | | Report of Well Plug | | be found on | | |
| | | | the OCD web page | under forms. | 116 | | |
| | I hereby certify that the information | a above is true and complete to | Restoration Due B | 02 13-20 | | | |
| | 2 . | 11 | | | | | |
| | SIGNATURE ROMME | Slack - | | - | TE 2-14-18 | | |
| | SIGNATURE KOMWO 🗴 | TITLE_P | roduction Technologi | stDA | TE 0 -17-10 | | |
| , | Type or print name Ronnie Slaci | k E mail address. Dannis Cla | ok@dyn oom DI | JONE: 405 552 44 | (15 | | |
| | Type or print name Ronnie Stac. For State Use Only | kE-man address: _Konnie.Sia | ck@uvii.com Pi | 10NE403-332-40 |)13 | | |
| | or Deate Ost Only | | | | | | |
| - | \ \ . | | | | 1 / | | |
| | APPROVED BY: Mark | Shala TITLE P | E.S. | DA | TE 02/26/201 | 8 | |

