

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

WELL API NO.	30-025-44079
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	86H
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 C : 335 feet from the North line and 1400 feet from the West line  
Section 22 Township 23S Range 33E NMPM County LEA

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
GL: 3710'

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.

4/30/18-7/20/18: MIRU WL & PT to 10Kpsi for 15 mins, OK. TIH & ran CBL, found TOC @ 5025'. TIH w/pump through frac plug and guns. Perf Bone Spring, 10,771'-17,056'. Frac totals 12,368,480# prop, 21,840 gal acid. ND frac, MIRU PU, NU BOP, DO plugs & CO to PBDT 17,966'. CHC, FWB, ND BOP. RIH w/306jts 2-7/8" L-80 tbg, set @ 10,151'. TOP.

**HOBBS OCD**  
**SEP 19 2018**  
**RECEIVED**

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 8/17/2018

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

**For State Use Only**

APPROVED BY Saren Sharp TITLE Staff Mgr DATE 9-19-18  
Conditions of Approval (if any):