Submit 1 Copy To Appropriate District	State of New M	[evico		Form	C-103	
Office	Office District 1 - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240 District II - (575) 748-1283 811 S. First St., Artesia, NM 88210 District III - (575) 748-1283 811 S. First St., Artesia, NM 88210 District III - (575) 748-1283 1220 Sources		Revised August 1, 2011			
<u>District 1</u> - (575) 393-6161 1625 N. French Dr., Hobbs, NM 88240			WELL API NO.			
District II - (575) 748-1283				30-025-45073		
District III - (505) 334-6178			5. Indicate Type STATE			
1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> - (505) 476-3460	Santa Fe, NM 87505		STATE ✓ FEE 6. State Oil & Gas Lease No.			
1220 S. SI. Francis Dr., Santa Fe, NM 87505						
CUDDDV NOT	ICES AND REPORTS ON WELL SALS TO DRILL OR TO DEEPEN DR	GEIVED	7. Lease Name o	r Unit Agreement	Name	
DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM CINITOR SUCH PROPOSALS.)			North T 8. Well Number	histle 3 34 State C	om	
1. Type of Well: Oil Well Gas Well Other   2. Name of Operator Device Facers, Deduction Company, 1.0			9. OGRID Number			
Devon Energy Production Company, L.P.			6137			
3. Address of Operator 333 West Sheridan, Oklahoma City, OK 73102			10. Pool name or Wildcat Brinninstool; Bone Spring			
4. Well Location			<b>_</b>	<u>i</u>	o	
Unit Letter P :	326 feet from the Sou		916 feet fro		line	
Section 3		Range 33E	NMPM	County	LEA	
	11. Elevation (Show whether D GL	: 3571'	,			
	•					
12. Check	Appropriate Box to Indicate	Nature of Notice,	Report or Other	Data		
NOTICE OF IN	ITENTION TO:	SUB	SEQUENT RE	PORT OF:		
			_	ALTERING CAS	=	
ΞΞ.						
		CASING/CEMEN	Т ЈОВ			
OTHER:		OTHER:	Comple			
	leted operations. (Clearly state alork). SEE RULE 19.15.7.14 NML					
proposed completion or rec		AC. FOI Multiple CO	inpictions. Attach	wenoole diagram	01	
F - F	••••					
1/22/19-5/8/19: MIRU WL & PT Good t through frac plug and guns. Perf Bone 9				0°. TIH w/pump		
ND frac, MIRU PU, NU BOP, DO plugs &			-	9311'. TOP.		
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		h				
I hereby certify that the information	above is true and complete to the	best of my knowledg	se and belief.			
signature_ <u>Rebella</u>	Deal TITLE Re	gulatory Analyst	D	ATE6/12/2019		
Type or print name Rebecca Deal	E-mail addr	ss:Rebecca.Deal@	9dvn.com Pi	HONE: 405-22	8-8429	
APPROVED BY: A Men ()	Thank I TITLE	taff Man	D/	TE_6-19.	-19	
Conditions of Approval (if any):					<del>,</del>	
		, 0				

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Devon - Internal