Submit To Appropr Two Copies District I	riate District	Office	ONSE	State of New Mexico ERVATION Minerals and Natural Resources						Form C-105 Revised August 1, 2011								
1625 N. French Dr. District II	, 110003, 141						F	1. WELL API NO.										
811 S First St , Art District III	301	© 2017 Oil Conservation Division						-	30-015-43371									
1000 Rio Brazos Rd., Aztec, NM 87410				1220 South St. Francis Dr.							2. Type of Lease ✓ STATE FEE FED/INDIAN							
District IV 1220 8 St. Francis Dr., Santa Fe, NM 87505 Santa Fe, NM 87505								3. State Oil &										
WELL COMPLETION OR RECOMPLETION REPORT AND LOG											an faire.							
4. Reason for filing:										5. Lease Name or Unit Agreement Name								
COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only)									Emerald PV 6. Well Numb									
C-144 CLOSURE ATTACHMENT (Fill in boxes #1 through #9, #15 Date Rig Released and #32 and/or #33; attach this and the plat to the C-144 closure report in accordance with 19.15.17.13.K NMAC)																		
7. Type of Completion:																		
8. Name of Opera		Enormy	Producti	ion Comj	n 2 n v	ID					9. OGRID 6137							
10. Address of O		LIIEI BY	FIGURE	ion com	pany	, L.F.					6137 11. Pool name or Wildcat							
						<u></u>												
12.Location	<u>333 W</u> Unit Ltr	est Sher Sectio		enue, Ok Townshij		ma City, OK 7 Range	3102 Lot		Feet from	the	N/S Line	Feet from				County		
Surface:						<u> </u>												
BH:	L		20	195		29E			2434		South	284			est	EDDY		
	 		20	195		29E		r	2240		South	272			ist (DD	EDDY		
13. Date Spudded 6/20/15		te T.D. Re 10/28/1			_	Released 10/29/15	4		-	1/	(Ready to Produce) /16/17		RT	. GR, et	c.)	and RKB, GL		
18. Total Measure	ed Depth of	t Well		19. Plug	g Bac	k Measured Dep	oth		20. Was Direc	tional	Survey Made?	21.	Туре	Type Electric and Other Logs Run				
13710 MD, 8965 TVD				13626				Yes			GF	R/CCL	/CBL					
22. Producing Interval(s), of this completion - Top, Bottom, Name 9150-13600, Bone Spring																		
23.						ING REC	ORD) (R	eport all st	ring	s set in we	all)						
CASING SIZ	ZE	WEIG	HT LB./F			DEPTH SET			HOLE SIZE	<u> </u>	CEMENTIN		D	AM	OUNT	PULLED		
S 13 3/8"																		
I 9 5/8" 40 3340 12 1/4" 1225 sxs ClH																		
7 5 1/2" 17 9199						8 3/4"												
? 5 1/2" 17 13710 8 1/2" 2165 sxs CIC TOC @ 193							193'											
24.				<u>l</u>	I INT	ER RECORD				25.	T	UBING R	FCC	נוסו	· . ·			
SIZE	TOP		BOT	ТОМ		SACKS CEMI	ENT	SCR	EEN	SIZI		DEPTH			PACKI	ER SET		
										1	2.875 L-80	8	3535					
26. Perforation record (interval, size, and number) 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.																		
		DEPTH INTERVAL					AMOUNT AND KIND MATERIAL USED											
	91	50 - 1360	00, total	552 hole	es				9150-13600		Acidize ar	nd frac in 23 s	tages.	See detaile	d summa	y attached.		
28. PRODUCTION																		
Date First Production Production Method (Flowing, gas lift, pumping - Size and type pump) Well Status (Prod. or Shut-in)																		
1/16/17				Flowing						Producing								
Date of Test	Hours T	Hours Tested Choke Size Prod'n For Test Period		I	Oil - Bbl Gas		Gas-	s - MCF Wa		Water - Bbl. Gas		Gas - O	Il Ratio					
1/24/17		24							297		335					1602		
Flow Tubing	Casing	Pressure		ulated 24-		Oil - Bbl.		- (Bas - MCF	W	/ater - Bbl.	Oil	Grav	ity - AP	I - (Cori	.)		
Press. 195 psi	9	37 psi	Hou	r Rate														
29. Disposition of Gas (Sold, used for fuel, vented, etc.) 30. Test Witnessed By																		
Sold II. List Attachments																		
Directional Survey, Logs																		
32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.																		
33. If an on-site burial was used at the well, report the exact location of the on-site burial: Latitude Longitude NAD 1927 1983																		
I hereby certify that the information shown on both sides of this form is true and complete to the best of my know ledge and belief																		
Signature Dubor Name Erin Workman Title Regulatory Analyst Date 1/27/2017																		
E-mail Address Erin.Workman@dvn.com																		

INSTRUCTIONS

This form is to be filed with the appropriate District Office of the Division not later than 20 days after the completion of any newly-drilled or deepened well and not later than 60 days after completion of closure. When submitted as a completion report, this shall be accompanied by one copy of all electrical and radio-activity logs run on the well and a summary of all special tests conducted, including drill stem tests. All depths reported shall be measured depths. In the case of directionally drilled wells, true vertical depths shall also be reported. For multiple completions, items 11, 12 and 26-31 shall be reported for each zone.

INDICATE FORMATION TOPS IN CONFORMANCE WITH GEOGRAPHICAL SECTION OF STATE

Southeastern New Mexico	Northwestern New Mexico
Surface Alluvium - 0	
Salado - 310	
base of Salt - 868	
Delaware - 3408	
Bone Spring - 4157	
	OIL OR GAS

SANDS OR ZONES

No. 1, from		
No. 1, from N/A to N/A No. 3, from No. 2, from N/A to N/A No. 4, from		

IMPORTANT WATER SANDS

Include data on rate of water inflow and elevation to which water rose in hole.

No. I	, from	.to	feet
		.to	

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	То	Thickness In Feet	Lithology	From	То	Thickness In Feet	Lithology