

Submit To Appropriate District Office Two Copies <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 811 S. First St., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 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-105 Revised August 1, 2011	
		1. WELL API NO. 30-015-40207		2. Type of Lease <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> FED/INDIAN	
		3. State Oil & Gas Lease No.		5. Lease Name or Unit Agreement Name Coral PWU 28	
WELL COMPLETION OR RECOMPLETION REPORT AND LOG				6. Well Number: 3H	
4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> 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: <input checked="" type="checkbox"/> NEW WELL <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER					
8. Name of Operator Devon Energy Production Company, L.P.				9. OGRID 6137	
10. Address of Operator 333 West Sheridan Avenue, Oklahoma City, OK 73102				11. Pool name or Wildcat Parkway; Bone Spring	
12. Location	Unit Ltr	Section	Township	Range	Lot
Surface:	O	28	19S	29E	
BH:	B	28	19S	29E	
Feet from the	N/S Line	Feet from the	E/W Line	County	
330	South	1675	East	Eddy	
312	North	1653	East	Eddy	
13. Date Spudded 7/2/12		14. Date T.D. Reached 7/22/12		15. Date Rig Released 7/24/12	
16. Date Completed (Ready to Produce) 10/8/12		17. Elevations (DF and RKB, RT, GR, etc.) GL			
18. Total Measured Depth of Well 12302 MD, 7915 TVD		19. Plug Back Measured Depth 12292		20. Was Directional Survey Made? Yes	
				21. Type Electric and Other Logs Run CBL; CNL; IND; Caliper	
22. Producing Interval(s), of this completion - Top, Bottom, Name 8500-12262, Bone Spring					
23. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LB./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13 3/8"	48#	308'	17 1/2"	430 sx HalcemC; Circ 44sx to surf	
9 5/8"	40#	3,185'	12 1/4"	780sx HLC, 315sx Halcem C; Circ 72 sx to surf	
5 1/2"	17#	12,295'	8 3/4"	205sx H, 430 sx H, 1210xs H	TOC @ 3270'
24. LINER RECORD			25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	PACKER SET
26. Perforation record (interval, size, and number) 8500 - 12262, total 175 holes			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 8500-12262 Acidize and frac in 5 stages. See detailed summary attached.		
28. PRODUCTION					
Date First Production		Production Method (<i>Flowing, gas lift, pumping - Size and type pump</i>)		Well Status (<i>Prod. or Shut-in</i>)	
10/8/12		Flowing		Producing	
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF
10/8/12	24			180	240
Water - Bbl.	Gas - Oil Ratio				
850	1333.333				
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.
400# psi	500# psi				
29. Disposition of Gas (<i>Sold, used for fuel, vented, etc.</i>)					30. Test Witnessed By
Sold					
31. 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 knowledge and belief					
Signature		Printed Name		Title	Date
		Erin Workman		Regulatory Analyst	6/21/2017
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

[illegible]

OIL OR GAS SANDS OR ZONES

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

IMPORTANT WATER SANDS

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

No. 1, from..... to..... feet.....
 No. 2, from..... to..... feet.....
 No. 3, from..... to..... feet.....

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	To	Thickness In Feet	Lithology

From	To	Thickness In Feet	Lithology