

**CONFIDENTIAL**

Submit To: Appropriate District Office Two Copies <b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 <b>District II</b> 811 S. First St., Artesia, NM 88210 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 <b>District IV</b> 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b>  <b>Oil Conservation Division</b> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>		<b>Form C-105</b> Revised August 1, 2011						
		1. WELL API NO. 30-015-44097 <b>44098</b>								
		2. Type of Lease <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> FED INDIAN								
		3. State Oil & Gas Lease No.								
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>										
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (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)			5. Lease Name or Unit Agreement Name Onyx PWU 29-28  <b>NM OIL CONSERVATION</b> <b>ARTESIA DISTRICT</b>  <b>JUN 07 2018</b>							
7. Type of Completion: <input checked="" type="checkbox"/> <b>NEW WELL</b> <input type="checkbox"/> WORKOVER <input type="checkbox"/> DEEPENING <input type="checkbox"/> PLUGBACK <input type="checkbox"/> DIFFERENT RESERVOIR <input type="checkbox"/> OTHER			6. Well Number:  9H							
8. Name of Operator <b>Devon Energy Production Company, L.P.</b>			9. OGRID 6137 <b>RECEIVED</b>							
10. Address of Operator  <b>333 West Sheridan Avenue, Oklahoma City, OK 73102</b>			11. Pool name or Wildcat  <b>PARKWAY; ; BONE SPRING, WEST</b>							
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N S Line	Feet from the	E W Line	County
Surface:	D	29	19S	29E		15	South	265	West	EDDY
Blk:	A	28	19S	29E		387	North	196	East	EDDY
13. Date Spudded 7/8/17	14. Date T.D. Reached 9/19/17	15. Date Rig Released 9/22/17		16. Date Completed (Ready to Produce) 4/21/18		17. Elevations (DF and RKB, RT, GR, etc.) 3437.2' GL				
18. Total Measured Depth of Well  18909 MD, 8980 TVD		19. Plug Back Measured Depth  18805		20. Was Directional Survey Made?  Yes		21. Type Electric and Other Logs Run  CBL				
22. Producing Interval(s) of this completion - Top, Bottom, Name 9200-18759, BONE SPRING, WEST						<b>CONFIDENTIAL</b>				
<b>23. CASING RECORD (Report all strings set in well)</b>										
CASING SIZE	WEIGHT L.B. FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED					
13-3/8"	54.5# <b>J55</b>	190	24	<b>C</b> 890 sx CIC; circ 26						
9-5/8"	36# <b>J55</b>	3459	12-1/4"	<b>C</b> 1490 sx CIC; circ 60						
5 1/2"	17# <b>P1003</b>	18894	8.5" OH	<b>C</b> 2785 sx CIC; circ						
<b>24. LINER RECORD</b>										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	<b>25. TUBING RECORD</b>					
					SIZE	DEPTH SET	PACKER SET			
					2-7/8" L-80	8554.7'				
26. Perforation record (interval, size, and number)  9200 - 18759, total 1180 holes					* 27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED 9200-18759      Acidize and frac in 49 stages. See detailed summary attached. *					
<b>28. PRODUCTION</b>										
Date First Production 4/21/18		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing				Well Status (Prod. or Shut-in) Producing				
Date of Test 5/4/18	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 1008	Gas - MCF 2088	Water - Bbl 1320	Gas - Oil Ratio 1503			
Flow Tubing Press. 319 psi	Casing Pressure 1197 psi	Calculated 24-Hour Rate	Oil - Bbl	Gas - MCF	Water - Bbl	Oil Gravity - API - (Corr.)				
29. Disposition of Gas (Sold, used for fuel, vented, etc.)  Sold						30. Test Witnessed By  				
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 Erin Workman		Title Regulatory Analyst		Date 6/6/2018				
E-mail Address Erin.Workman@dvn.com										

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## 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