

Submit To Appropriate District Office  
Two Copies  
District I  
1625 N. French Dr., Hobbs, NM 88240  
District II  
811 S. First St., Artesia, NM 88210  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
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 April 3, 2017**

**1. WELL API NO.**  
**30-025-44069**

**2. Type of Lease**  
☒ STATE ☐ FEE ☐ FED/INDIAN

**3. State Oil & Gas Lease No.**

**5. Lease Name or Unit Agreement Name**  
**Thistle Unit**

**6. Well Number:**  
**133H**

**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

**4. Reason for filing:**

☒ **COMPLETION REPORT** (Fill in boxes #1 through #31 for State and Fee wells only)

☐ **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:**  
☒ NEW WELL ☐ WORKOVER ☐ DEEPENING ☐ PLUGBACK ☐ DIFFERENT RESERVOIR ☐ OTHER

**8. Name of Operator**  
**DEVON ENERGY PRODUCTION COMPANY L.P.**

**10. Address of Operator**  
**333 W. SHERIDAN AVE., OKLAHOMA CITY, OKLAHOMA 73102**

| 12. Location    | Unit Ltr | Section   | Township   | Range      | Lot | Feet from the |
|-----------------|----------|-----------|------------|------------|-----|---------------|
| <b>Surface:</b> | <b>B</b> | <b>22</b> | <b>23S</b> | <b>33E</b> |     | <b>335</b>    |
| <b>BH:</b>      | <b>I</b> | <b>27</b> | <b>23S</b> | <b>33E</b> |     | <b>2458</b>   |

| 13. Date Spudded | 14. Date T.D. Reached | 15. Date Rig Released | 16. Date Completed (Ready to Produce) | 17. Elevations (DF and RKB, RT, GR, etc.) |
|------------------|-----------------------|-----------------------|---------------------------------------|---|
| <b>12/26/17</b>  | <b>4/7/18</b>         | <b>4/9/18</b>         | <b>8/8/18</b>                         | <b>3713'</b>                              |

| 18. Total Measured Depth of Well | 19. Plug Back Measured Depth | 20. Was Directional Survey Made? | 21. Type Electric and Other Logs Run |
|----------------------------------|------------------------------|----------------------------------|--------------------------------------|
| <b>17,430 MD, 10,088' TVD</b>    | <b>17,336'</b>               | <b>YES</b>                       | <b>CBL</b>                           |

**22. Producing Interval(s), of this completion - Top, Bottom, Name**  
**10,167-17,292 Bone Spring**

**9. OGRID**  
**6137**

**11. Pool name or Wildcat**  
**TRIPLE X; BONE SPRING 59900**

**CASING RECORD (Report all strings set in well)**

| CASING SIZE | WEIGHT LB./FT. | DEPTH SET | HOLE SIZE       | CEMENTING RECORD        | AMOUNT PULLED |
|-------------|----------------|-----------|-----------------|-------------------------|---------------|
| 13 3/8"     | 54.5#          | 1430'     | 17 1/2"         | 1285sx ClC, Circ 356 sx |               |
| 9 5/8"      | 40#            | 5338'     | 12 1/4"         | 587sx ClC, circ 548 sx  |               |
| 5 1/2"      | 17#            | 17,253'   | 8 3/4" & 8-1/2" | 2090sx ClC, circ 0      | TOC @ Surf    |

**24. LINER RECORD**

| SIZE | TOP | BOTTOM | SACKS CEMENT | SCREEN |
|------|-----|--------|--------------|--------|
|      |     |        |              |        |

**25. TUBING RECORD**

| SIZE        | DEPTH SET | PACKER SET |
|-------------|-----------|------------|
| 2-7/8" L-80 | 9714'     |            |

**26. Perforation record (interval, size, and number)**  
**10,167-17,292' 882 holes**

**27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.**

| DEPTH INTERVAL | AMOUNT AND KIND MATERIAL USED                                |
|----------------|--|
| 10,167-17,292' | Acidize and frac in 30 stages. See detailed summary attached |

**PRODUCTION**

| Date First Production | Production Method (Flowing, gas lift, pumping - Size and type pump) | Well Status (Prod. or Shut-in) |
|-----------------------|---|--------------------------------|
| 8/12/18               | FLOWING   | PROD                           |

| Date of Test | Hours Tested | Choke Size | Prod'n For Test Period | Oil - Bbl | Gas - MCF | Water - Bbl. | Gas - Oil Ratio |
|--------------|--------------|------------|------------------------|-----------|-----------|--------------|-----------------|
| 9/8/18       | 24           |            |                        | 804       | 1214      | 799          | 1509.950        |

| Flow Tubing Press. | Casing Pressure | Calculated 24-Hour Rate | Oil - Bbl. | Gas - MCF | Water - Bbl. | Oil Gravity - API - (Corr.) |
|--------------------|-----------------|-------------------------|------------|-----------|--------------|-----------------------------|
| 485 psi            |                 |                         |            |           |              |                             |

**29. Disposition of Gas (Sold, used for fuel, vented, etc.)**  
**Sold**

**30. Test Witnessed By**

**31. List Attachments**

**32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.**

**34. If an on-site burial was used at the well, report the exact location of the on-site burial:**

**33. Rig Release Date: 5/3/18**

Latitude Longitude NAD83

*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 Rebecca Deal

Printed Name **Rebecca Deal**

E-mail Address **rebecca.deal@dmv.com**

Title **Regulatory Analyst**

Date **9/11/18**

# 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<br>In Feet | Lithology |
|------|----|----------------------|-----------|
|      |    |                      |           |

| From | To | Thickness<br>In Feet | Lithology |
|------|----|----------------------|-----------|
|      |    |                      |           |