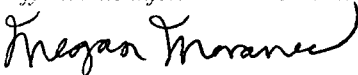


Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505		<b>State of New Mexico</b> <b>Energy, Minerals and 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						
<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)				1. WELL API NO. <b>30-025-42425</b>  2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN  3. State Oil & Gas Lease No.						
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				5. Lease Name or Unit Agreement Name <b>Thistle Unit</b>  6. Well Number: <b>HOBBS OGD</b>  <b>AUG 05 2015</b>						
8. Name of Operator <b>Devon Energy Production Company, L.P.</b>				9. OGRID <b>6137</b>						
10. Address of Operator  <b>333 West Sheridan Avenue, Oklahoma City, OK 73102</b>				11. Pool name or Wildcat  <b>Triple X; Bone Spring</b>						
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	A	27	23S	33E		200	North	632	East	Lea
BH:	P	27	23S	33E		330	South	586	East	Lea
13. Date Spudded 4/7/15	14. Date T.D. Reached 4/25/15	15. Date Rig Released 4/29/15		16. Date Completed (Ready to Produce) 7/3/15		17. Elevations (DF and RKB, RT, GR, etc.) 3681 GL				
18. Total Measured Depth of Well  14979 MD, 10508.9 TVD		19. Plug Back Measured Depth  14932		20. Was Directional Survey Made?  Yes		21. Type Electric and Other Logs Run  CBL / Gamma Ray / CCL				
22. Producing Interval(s), of this completion - Top, Bottom, Name 10742-14923, Bone Spring										
<b>23. CASING RECORD (Report all strings set in well)</b>										
CASING SIZE	WEIGHT LB./FT.	DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED		
13-3/8"	48#	1443		17-1/2"		1160 sx Econocem, 325 sx Halcem; circ 179 bbls				
9-5/8"	40#	5210		12-1/4"		522 sx CIG; circ 0		TOC @ 450		
7" & 5-1/2"	29# & 17#	14979		8-3/4"		490 sx Tuned Light, 1060 sx Versacem; circ 0		TOC @ 2400		
<b>24. LINER RECORD</b>										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN		25. TUBING RECORD				
						SIZE		DEPTH SET		PACKER SET
						2-7/8" L-80		9852.5		
26. Perforation record (interval, size, and number)  10742 - 14923, total 490 holes						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED 10742-14923      Acidize and frac in 14 stages. See detailed summary attached.				
<b>28. PRODUCTION</b>										
Date First Production 7/3/15		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing				Well Status (Prod. or Shut-in) Producing				
Date of Test 7/23/15	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 315.9	Gas - MCF 468	Water - Bbl. 1412.8	Gas - Oil Ratio 1482.4			
Flow Tubing Press. 400 psi	Casing Pressure 0 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	Megan Moravec	Title	Regulatory Compliance Analyst	Date	8/4/2015		
E-mail Address	megan.moravec@dv.com									

SEP 24 2015

# 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