

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
123 South St. Francis Dr.
Santa Fe, NM 87505

Form C-105
Revised April 3, 2017

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

Location	Unit Ltr	Section	Township	Range	Lot	Feet from the
Surface:	P	34	23S	33E		185
BH:	O	27	23S	33E		2640

13. Date Spudded **3/3/17** 14. Date T.D. Reached **3/22/17** 15. Date Rig Released **3/25/17** 16. Date Completed (Ready to Produce) **9/14/17** 17. Elevations (DF and RKB, RT, GR, etc.) **3638'**

18. Total Measured Depth of Well **17,329' MD, 9726' TVD** 19. Plug Back Measured Depth 20. Was Directional Survey Made? **YES** 21. Type Electric and Other Logs Run **CBL**

22. Producing Interval(s), of this completion - Top, Bottom, Name
10,202'-24,098' Bone Spring

1. WELL API NO. **30-025-43548**

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:
117H

9. OGRID **6137**

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

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"	54.5#	1339'	17 1/2"	1808sx ClC, Circ 247 bbls	
9 5/8"	40#	5190'	12 1/4"	1493 sx ClC, circ 140 bbls	
5 1/2"	17#	17,324'	8 3/4" & 8-1/2"	2528 sx ClC, circ 0	TOC ~ 3200'

24. LINER RECORD **25. TUBING RECORD**

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2-7/8" L-80	9409	

26. Perforation record (interval, size, and number)
9800' - 17200', 958 holes

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

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
9800' - 17,200'	Acidize and frac in 40 stages. See detailed summary attached

28. PRODUCTION

Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)		Well Status (Prod. or Shut-in)	
10/6/2017		FLOWING		PROD	

Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
10/31/17	24			1043	1723	858	1651.965

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)
555	40					

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.

33. Rig Release Date: **3/25/17**

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

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** Title **Regulatory Analyst** Date **01/19/2018**

E-mail Address **rebecca.deal@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