

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  1. WELL API NO. 20025-41696 2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No.
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**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

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 <b>Ironhouse 24 State Com</b> 6. Well Number: <b>4H</b>
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 <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>WC-025 G-06 S183518A; 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:	M	24	18S	34E		200	South	660	West	Lea
BH:	D	7	26S	34E		315 324	North	597 683	West	Lea

13. Date Spudded 7/13/14	14. Date T.D. Reached 8/11/14	15. Date Rig Released 8/14/14	16. Date Completed (Ready to Produce) 10/3/14	17. Elevations (DF and RKB, RT, GR, etc.) 3980.7 GL
18. Total Measured Depth of Well  14245 MD, 9634.12 TVD		19. Plug Back Measured Depth  14188.8		20. Was Directional Survey Made?  Yes
				21. Type Electric and Other Logs Run  Gamma Ray

22. Producing Interval(s), of this completion - Top, Bottom, Name 10036-14121, Bone Spring	
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**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#	1885	17-1/2"	1552 sx CIG; circ 21 sx	
9-5/8"	36#	3487	12-1/4"	880 sx HLC, 380 sx CH; circ 408 sx	
5-1/2"	17#	14235	8-3/4"	2665 sx CH; circ 0	TOC @ 1210

**24. LINER RECORD**

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

**25. TUBING RECORD**

SIZE	DEPTH SET	PACKER SET
2-7/8" L-80	9372.8	

26. Perforation record (interval, size, and number) <b>10036 - 14121, total 888 holes</b>	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL    AMOUNT AND KIND MATERIAL USED <b>10036-14121    Acidize and frac in 16 stages. See detailed summary attached.</b>
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**28. PRODUCTION**

Date First Production 10/3/14	Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing	Well Status (Prod. or Shut-in) Producing
Date of Test 11/4/14	Hours Tested 24	Choke Size
Prod'n For Test Period	Oil - Bbl 380	Gas - MCF 169
Water - Bbl 670	Gas - Oil Ratio 444.737	
Flow Tubing Press. 82 psi	Casing Pressure 81 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
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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 <i>Megan Moravec</i>	Printed Name Megan Moravec	Title Regulatory Compliance Analyst	Date 11/14/2014
E-mail Address megan.moravec@dmn.com			

NOV 24 2014

# 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