

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 & Natural Resources  
Oil Conservation Division  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

HOBBS OCD

Form C-104  
Revised August 1, 2011

AUG 24 2015

Submit one copy to appropriate District Office

RECEIVED

☐ AMENDED REPORT

### I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address Devon Energy Production Company, L.P. 333 West Sheridan, Oklahoma City, OK 73102		<sup>2</sup> OGRID Number 6137
		<sup>3</sup> Reason for Filing Code/ Effective Date NW / 7/25/15
<sup>4</sup> API Number 30-025-42311	<sup>5</sup> Pool Name WC-025 G-06 S263407P; UPR Bone Spring	<sup>6</sup> Pool Code 97892
<sup>7</sup> Property Code 313933	<sup>8</sup> Property Name Cobber 21 Fed	<sup>9</sup> Well Number 1H

### II. <sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
P	21	26S	34E		65	South	660	East	Lea

### <sup>11</sup> Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	21	26S	34E		333	North	382	East	Lea
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date 7/25/15	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date				

### III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
174238	Enterprise 201 Park Avenue, Ste 1600 Oklahoma City, OK 73102	Oil
020809	Regency Field Services, LLC 500 West Texas Ave, Ste 920 Midland, TX 79701	Gas

### IV. Well Completion Data

<sup>21</sup> Spud Date 4/23/15	<sup>22</sup> Ready Date 7/25/15	<sup>23</sup> TD 14402	<sup>24</sup> PBSD 14352	<sup>25</sup> Perforations 9944 - 14252	<sup>26</sup> DHC, MC
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17-1/2"	13-3/8"	1004	865 sx CIC; Circ 294 sx		
12-1/4"	9-5/8"	5337	1605 sx CIC; Circ 437 sx		
Cmt Squeeze			685 sx CIH; Circ 88 sx		
8-3/4"	5-1/2" + 7"	14400	1525 sx Cement; Circ 0		

### V. Well Test Data

Tubing: 2-7/8"

<sup>31</sup> Date New Oil 8/15/15	<sup>32</sup> Gas Delivery Date 8/15/15	<sup>33</sup> Test Date 8/15/15	<sup>34</sup> Test Length 24 hrs	<sup>35</sup> Tbg. Pressure 450 psi	<sup>36</sup> Csg. Pressure 190 psi
<sup>37</sup> Choke Size	<sup>38</sup> Oil 217 bbl	<sup>39</sup> Water 2167 bbl	<sup>40</sup> Gas 510 mcf		<sup>41</sup> Test Method

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:

Lucretia Morris

Title:

Regulatory Compliance Analyst

E-mail Address:

lucretia.morris@dvn.com

Date:

8/21/2015

Phone:

405-552-3303

OIL CONSERVATION DIVISION

Approved by:

Title:

Petroleum Engineer

Approval Date:

09/05/15

Recomp \_\_\_\_\_ Add New Well \_\_\_\_\_  
Cancel Well \_\_\_\_\_ Create Pool \_\_\_\_\_  
E-PERMITTING -- New Well \_\_\_\_\_  
Comp pm P&A \_\_\_\_\_ TA \_\_\_\_\_  
CSNG pm Loc Chng \_\_\_\_\_  
Recomp \_\_\_\_\_ Add New Well \_\_\_\_\_

SEP 09 2015

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010**SUNDRY NOTICES AND REPORTS ON WELLS** HOBBS OCD  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*

AUG 24 2015

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM112941
2. Name of Operator DEVON ENERGY PRODUCTION CO LP		6. If Indian, Allottee or Tribe Name
Contact: LUCRETIA MORRIS Email: Lucretia.Morris@dvn.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 333 WEST SHERIDAN OKLAHOMA CITY, OK 73102-5015	3b. Phone No. (include area code) Ph: 405-552-3303	8. Well Name and No. COBBER 21 FED 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 21 T26S R34E SESE 65FSL 660FEL		9. API Well No. 30-025-42311
		10. Field and Pool, or Exploratory WC025 G06 S263407P; UPR BS
		11. County or Parish, and State LEA COUNTY, NM

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

(4/23/15-4/26/15) Spud @ 22:00. TD 17-1/2? hole @ 1014?. RIH w/ 25 jts 13-3/8? 54.50# J-55 BT csg, set @ 1004?. Lead w/ 425 sx CIC, yld 1.87 cu ft/sk. Tail w/ 440 sx CIC, yld 1.34 cu ft/sk. Disp w/ 149 bbls FW. Circ 294 sx cmt to surf. PT mud pumps, standpipe & valves and kelly hose @ 250/4000 psi, held each test for 10 min, OK. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 min, OK.

(5/1/15-5/3/15) TD 12-1/4? hole @ 5337?. RIH w/ 120 jts 9-5/8? 40# HCK-55 BT csg, set @ 5337.1?. Lead w/ 1175 sx CIC, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 401.3 bbls FW. Circ 437 sx cmt to surf. ETOC @ 3934?. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 min, OK.

(5/12/15) RIH w/ whipstock, set top @9218? and btm @ 9230?. Tail w/ 685 sx CIH, yld 1.20 cu ft/sk.

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #310023 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION CO LP, sent to the Hobbs</b>	
Name (Printed/Typed) LUCRETIA MORRIS	Title REGULATORY COMPLIANCE ANALYST
Signature (Electronic Submission)	Date 07/23/2015

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By _____	Title _____	Date _____
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

SEP 09 2015

**Additional data for EC transaction #310023 that would not fit on the form**

**32. Additional remarks, continued**

Disp w/ 139.7 bbls 8.75 ppg system mud. Circ 88 sx cement to surf off top of whipstock. ETOC @ 8900?.

(5/22/15-5/26/15) TD 8-3/4? hole @ 14402?. RIH w/ 116 jts 5-1/2? 17# P110RY CDC-HTQ csg and 199 jts 7? 29# P-110 BT csg, set @ 14400?. Lead w/ 450 sx Tuned Light, yld 3.37 cu ft/sk. Tail w/ 1075 sx CIH, yld 1.23 cu ft/sk. Disp w/ 260 bbls 8.33 ppg water. ETOC @ 2737?. RR @ 06:00.

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBBS OCD

AUG 24 2015

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

**SUNDRY NOTICES AND REPORTS ON WELLS**  
**Do not use this form for proposals to drill or to re-enter an**  
**abandoned well. Use Form 3160-3 (APD) for such proposals.**

5. Lease Serial No. **BHL: NMNM112941**

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2.**

7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.  
**Cobber 21 Fed 1H**

2. Name of Operator

**Devon Energy Production Company, L.P.**

9. API Well No.  
**30-025-42311**

3a. Address

**333 West Sheridan, Oklahoma City, OK 73102**

3b. Phone No. (include area code)

**405-228-4248**

10. Field and Pool or Exploratory Area

**WC-025 G-06 S263407P; UPR Bone Spring**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**65' FSL & 660' FEL Unit P, Sec 21, T26S, R34E**

**333' FNL & 382' FEL Unit A, Sec 21, T26S, R34E**

**PP: 238' FSL & 472' FEL**

11. Country or Parish, State

**Lea, NM**

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION				
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off	
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <b>Completion Report</b>	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon		
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal		

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

6/16/15-8/7/15: MIRU WL & PT. TIH & ran CBL, found TOC @ 5620'. TIH w/ pump through frac plug and guns. Set plug @ 14315'. Perf Bone Spring, 9944'-14252', total 816 holes. Frac'd 9944'-14252' in 17 stages. Frac totals 28,507.5 gals 15% HCl Acid, 728,000# Ottawa Sand 40/70, 5,165,000# Ottawa Sand 30/50, 46,000# 100 Mesh Sand. ND frac. PU 5-1/2" Bridge Plug, set @ 9200'. Cmt squeeze, 300 sx CIC, disp w/ 50 bbls FW. ETOC @ 1760'. MIRU PU, NU BOP, DO plugs & CO to PBTB. CHC, FWB, ND BOP. RIH w/ 272 jts 2-7/8" L-80 tbg, set @ 9104.2'. RIH w/ ESP, cont flowing ESP. TOP.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)

**Lucretia Morris**

Title **Regulatory Compliance Analyst**

Signature

*Lucretia Morris*

Date **8/21/2015**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

SEP 09 2015

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

HOBBS OCIP

FORM APPROVED  
OMB NO. 1004-0137  
Expires: July 31, 2010

AUG 24 2015

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Dry <input type="checkbox"/> Other 1b. Type of Completion: <input checked="" type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr., Other: _____						5. Lease Serial No. BHL: NMNM112941  6. If Indian, Allottee or Tribe Name  7. Unit or CA Agreement Name and No.			
2. Name of Operator <div style="text-align: center;">Devon Energy Production Company, L.P.</div>						8. Lease Name and Well No. <div style="text-align: center;">Cobber 21 Fed 1H</div>			
3. Address <div style="text-align: center;">333 West Sheridan Ave, Oklahoma City, OK 73102</div>				3a. Phone No. (include area code) <div style="text-align: center;">405-228-4248</div>		9. AFI Well No. <div style="text-align: center;">30-025-42311</div>			
4. Location of Well (Report location clearly and in accordance with Federal requirements)*  At surface <div style="text-align: center;">65' FSL &amp; 660' FEL Unit P, Sec 21, T26S, R34E</div>  At top prod. interval reported below  At total depth <div style="text-align: center;">333' FNL &amp; 382' FEL Unit A, Sec 21, T26S, R34E</div>						10. Field and Pool or Exploratory <div style="text-align: center;">WC-025 G-06 S263407P; UPR Bone Spring</div> 11. Sec., T., R., M., on Block and Survey or Area <div style="text-align: center;">Sec 21, T26S, R34E</div> 12. County or Parish <div style="text-align: center;">Lea</div> 13. State <div style="text-align: center;">NM</div>			
14. Date Spudded <div style="text-align: center;">4/23/15</div>		15. Date T.D. Reached <div style="text-align: center;">5/22/15</div>		16. Date Completed <div style="text-align: center;">7/25/15</div>		17. Elevations (DF, RKB, RT, GL)* <div style="text-align: center;">GL: 3286</div>			
18. Total Depth: MD 14402 <div style="text-align: center;">TVD 9788</div>		19. Plug Back T.D.: MD <div style="text-align: center;">TVD</div>		20. Depth Bridge Plug Set: MD <div style="text-align: center;">TVD</div>		21. Type Electric & Other Mechanical Logs Run (Submit copy of each) <div style="text-align: center;">Iso Scnr/Cmt Prnt/GR/Comp Neut/Photo Den/Dual Lat/Delta-T/BH Prof/Dens Cal/Spect GR</div>			
22. Was well cored? <input type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes (Submit copy)									
23. Casing and Liner Record (Report all strings set in well)									
Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17-1/2"	13-3/8" J-55	54.5#	0	1004		865 sx CIC		0	294 sx
12-1/4"	9-5/8" HCK-55	40#	0	5337		1605 sx CIC		0	437 sx
mt Squeez						685 sx CIH		8901	88 sx
8-3/4"	5-1/2" x 7" P110RY-P-110	17# + 29#	0	14400		1525 sx Cement		2737	
mt Squeez						300 sx CIC		1760	
24. Tubing Record									
Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	
2-7/8"	9104								
25. Producing Intervals					26. Perforation Record				
Formation		Top	Bottom	Perforated Interval		Size	No. Holes	Perf. Status	
Bone Spring		9944	14252	9944 - 14252			816	open	
B)									
C)									
D)									
27. Acid, Fracture, Treatment, Cement Squeeze, etc.									
Depth Interval		Amount and Type of Material							
9944 - 14252		28,507.5 gals 15% HCl Acid, 728,000# Ottawa Sand 40/70, 5,165,000# Ottawa Sand 30/50, 46,000# 100 Mesh Sand							
28. Production - Interval A									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
7/25/15	8/15/15	24	→	217	510	2167			Pump
Choke Size	Tbg. Press. Flwg. SI	Csg. Press. SI	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
	450psi	190psi	→				2350.23		
28a. Production - Interval B									
Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press. SI	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

\*(See instructions and spaces for additional data on page 2)

SEP 09 2015

## 28b. Production - Interval C

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

## 28c. Production - Interval D

Date First Produced	Test Date	Hours Tested	Test Production	Oil BBL	Gas MCF	Water BBL	Oil Gravity Corr. API	Gas Gravity	Production Method
			→						
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
			→						

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

SOLD

## 30. Summary of Porous Zones (Include Aquifers):

Show all important zones of porosity and contents thereof: Cored intervals and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures and recoveries.

## 31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
Bone Spring	9617	12892		Delaware Bone Spring	5336 9617

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

- ☒ Electrical/Mechanical Logs (1 full set req'd.)
 ☐ Geologic Report
 ☐ DST Report
 ☒ Directional Survey
- ☐ Sundry Notice for plugging and cement verification
 ☐ Core Analysis
 ☐ Other:

34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)\*

Name (please print) Lucretia Morris Title Regulatory Compliance Analyst  
 Signature Lucretia Morris Date 8/21/2015

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Continued on page 3)

(Form 3160-4, page 2)