

Submit To Appropriate District Office Two Copies <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 <u>District II</u> 811 S. First St., Artesia, NM 88210 <u>District III</u> 1000 Rio Brazos Rd., Aztec, NM 87410 <u>District IV</u> 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 August 1, 2011	
		1. WELL API NO. 30-025-42420		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN	
		3. State Oil & Gas Lease No.			
WELL COMPLETION OR RECOMPLETION REPORT AND LOG					
4. Reason for filing: <input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> 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)		5. Lease Name or Unit Agreement Name Thistle Unit			
		6. Well Number: HOBBS OCD 23H			
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		SEP 20 2015			
8. Name of Operator Devon Energy Production Company, L.P.		9. OGRID 6137 RECEIVED			
10. Address of Operator 333 West Sheridan Avenue, Oklahoma City, OK 73102		11. Pool name or Wildcat Brinninstool; Delaware			
12. Location	Unit Ltr	Section	Township	Range	Lot
Surface:	M	34	23S	33E	
BL:	D	34	23S	33E	
13. Date Spudded 5/3/15	14. Date T.D. Reached 5/22/15	15. Date Rig Released 5/26/15		16. Date Completed (Ready to Produce) 8/24/15	
17. Elevations (DF and RKB, RT, GR, etc.) 3632 GL					
18. Total Measured Depth of Well 13630 MD, 8989 TVD		19. Plug Back Measured Depth 12630		20. Was Directional Survey Made? Yes	
21. Type Electric and Other Logs Run Gamma Ray, CCL / Isolation Scanner, SLG Print, GR-CCL					
22. Producing Interval(s), of this completion - Top, Bottom, Name 9206-13572, Delaware					
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"	48#	1389	17-1/2"	1150 sx Cement; circ 90 bbls	
9-5/8"	40#	5200	12-1/4"	1625 sx C/C; circ 90 bbls	
5-1/2" + 7"	17# + 29#	13630	8-3/4"	1630 sx Cement; circ 0	TOC @ 4100
24. LINER RECORD					
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	
25. TUBING RECORD					
SIZE	DEPTH SET	PACKER SET			
2-7/8" N-80	8380				
26. Perforation record (interval, size, and number) 9206 - 13572, total 576 holes			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 9206-13572 Acidize and frac in 16 stages. See detailed summary attached.		
28. PRODUCTION					
Date First Production 8/24/15		Production Method (<i>Flowing, gas lift, pumping - Size and type pump</i>) Pumping		Well Status (<i>Prod. or Shut-in</i>) Producing	
Date of Test 9/15/15	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 334	Gas - MCF 259
Flow Tubing Press. 260 psi	Casing Pressure 72 psi	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.
					Oil Gravity - API - (<i>Corr.</i>) 775.45
29. Disposition of Gas (<i>Sold, used for fuel, vented, etc.</i>) 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 <i>Lucretia Morris</i>		Printed Name Lucretia Morris		Title Regulatory Compliance Analyst Date 9/22/2015	
E-mail Address lucretia.morris@dvn.com					

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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