

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. 30-025-42381 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 HOBBS OCD Thistle Unit 6. Well Number: 66H																														
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		9. OGRID 6137																														
8. Name of Operator Devon Energy Production Company, L.P.		11. Pool name or Wildcat Triple X; Bone Spring																														
10. Address of Operator 333 West Sheridan Avenue, Oklahoma City, OK 73102		17. Elevations (DF and RKB, RT, GR, etc.) 3633 GL																														
12. Location <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Unit Ltr</th> <th>Section</th> <th>Township</th> <th>Range</th> <th>Lot</th> <th>Feet from the</th> <th>N/S Line</th> <th>Feet from the</th> <th>E/W Line</th> <th>County</th> </tr> <tr> <td>Surface:</td> <td>M</td> <td>34</td> <td>23S</td> <td>33E</td> <td>81</td> <td>South</td> <td>1250</td> <td>West</td> <td>Lea</td> </tr> <tr> <td>BH:</td> <td>L</td> <td>27</td> <td>23S</td> <td>33E</td> <td>2450</td> <td>South</td> <td>1250</td> <td>West</td> <td>Lea</td> </tr> </table>	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County	Surface:	M	34	23S	33E	81	South	1250	West	Lea	BH:	L	27	23S	33E	2450	South	1250	West	Lea	13. Date Spudded 3/31/15	
Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County																							
Surface:	M	34	23S	33E	81	South	1250	West	Lea																							
BH:	L	27	23S	33E	2450	South	1250	West	Lea																							
14. Date T.D. Reached 4/28/15		15. Date Rig Released 5/2/15																														
16. Date Completed (Ready to Produce) 8/28/15		18. Total Measured Depth of Well 17110 MD, 9659 TVD																														
19. Plug Back Measured Depth 17054		20. Was Directional Survey Made? Yes																														
21. Type Electric and Other Logs Run Isolation Scanner / Cement Print / Gamma Ray		22. Producing Interval(s), of this completion - Top, Bottom, Name 9704-16932, Bone Spring																														
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#	1349	17-1/2"	1000 sx Cement; circ 210 sx																												
9-5/8"	40#	4977	12-1/4"	2400 sx C/C; circ 80 bbls																												
5-1/2" + 7"	17# + 29#	17105	8-3/4"	2585 sx Cement; circ 0																												
24. LINER RECORD																																
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	TUBING RECORD																											
					SIZE																											
					DEPTH SET																											
					PACKER SET																											
26. Perforation record (interval, size, and number) 9704 - 16932, total 936 holes			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> <tr> <td style="text-align: center;">9704-16932</td> <td style="text-align: center;">Acidize and frac in 26 stages. See detailed summary attached.</td> </tr> </table>			DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	9704-16932	Acidize and frac in 26 stages. See detailed summary attached.																							
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28. PRODUCTION																																
Date First Production 8/28/15		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing		Well Status (Prod. or Shut-in) Producing																												
Date of Test 9/19/15	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 862	Gas - MCF 1439																											
Flow Tubing Press. 960 psi	Casing Pressure 0 psi	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl. 2147																											
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: <div style="display: flex; justify-content: space-between;"> Latitude Longitude NAD 1927 1983 </div>																																
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 Lucretia Morris		Title Regulatory Compliance Analyst																												
E-mail Address lucretia.morris@dvn.com		Date 9/30/2015																														

OCT 22 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