Submit To Appropriate District Office Two Copies <u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 District II				State of New Mexico Energy, Minerals and Natural Resources					Form C-105 Revised August 1, 2011 1. WELL API NO.							
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				Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505					30-025-42216 2. Type of Lease ✓ STATE FEE FED/INDIAN 3. State Oil & Gas Lease No.							
				R RECOMPLETION REPORT AND LOG												
4. Reason for fil		ETION	UKK	ECU	IVIPL					5. Lease Nam	. Lease Name or Unit Agreement Name					
COMPLET	ION REPO			xes #1 through #31 for State and Fee wells only)					Chincoteague 32 State Com 6. Well Number:							
C-144 CLO: #33; attach this a 7. Type of Comp	nd the plat									l/or	3H					
NEW 1	WELL	WORKOV	ER 🔲	DEEPEN	NING	PLUGBACK	C DIF	FERE	ENT RESERV	VOIF						
8. Name of Open		Energy P	roductio	on Con	npany	. L.P.					9. OGRID 6137					
10. Address of O		01								-	11. Pool name or Wildcat					
	333 W	est Sherid	lan Ave	nue, O	klaho	ma City, OK 7	3102				WC-025 G-06 S253206M; Bone Spring					one Spring
12.Location	Unit Ltr	Section		Townsh		Range	Lot		Feet from t	the	N/S Line	Feet from the				County
Surface:	N	32	2	24	IS	32E			200		South	2630		V	Vest	Lea
BH:	С	32	_	24		32E			221		North	1816		-	Vest	Lea
13. Date Spudded 2/3/16	1 14. Dat	e T.D. Read 2/16/16	hed	15. Da	ate Rig	Released 2/18/16		16	, Date Compl		(Ready to Produce 2/29/16			7. Eleva T, GR, (and RKB, 3471' GL
18. Total Measure	ed Depth of			19. Ph	ug Bac	k Measured Dep	th	20	. Was Direct		1 Survey Made				'	her Logs Run
15,265	' MD, 10,	491' TVD				15,179'				Yes			MWD	GR		
22. Producing Int	erval(s), of	this comple	tion - To	op, Botto	om, Na	me						_				
			10,70		the second se	Bone Spring										
23.						ING RECO	ORD (ring			0000		101 0 100	
CASING SI2 13-3/8"	CE	WEIGH	FLB/F1 50#	r		DEPTH SET 854'		_	DLE SIZE		CEMENTIN 1050	-		Al	MOUNTI	PULLED
9-5/8"			0#			4505'			12-1/2		1380					
5-1/2"		1	7#	10,858' 8-3/4"				165) sx							
5-1/2"		17	7#			15,261'			8-1/2"		165) sx			TOC @	3230
21					TINT	D DECODD				25.	T	TIDD	NG RECO	OPD		
24. SIZE	TOP		BOTT	LINER RECORD YOM SACKS CEMENT		ENT SC			SIZ			EPTH SET		PACKE	R SET	
		_									2-7/8" L-80		10,12	2'		
26 D 6 1			<u> </u>										TT COLT	-	DTO	
26. Perforation	record (inte	erval, size, a	nd numb	per)					ID, SHOI, INTERVAL		ACTURE, CE AMOUNT A					
	10,70)6' - 15,15	5', tota	al 552 h	oles				06'-15,155			-	in 23 stages.			y attached.
28.]	PROD							4		
Date First Product	ion	P	roduction	n Metho	d (Flo	wing, gas lift, pu	mping - S	ize an	nd type pump)	1	Well Status	(Prod	L or Shut-	in)		
	9/16					Flowin	0						and the second se	ducin	-	
Date of Test	Hours T	ested	Choke	e Size		Prod'n For Test Period	Oi	l - Bb	1	Gas	- MCF	I	ater - Bbl,		Gas - O	il Ratio
12/30/16		24		1 . 104				-	108		160		120			1481
Press.	Press. Hour			lculated 24- Oil - Bbl.				Gas - MCF Water - Bb		water - Bol.		OII OTAV	vity - A	PI - (Corr		
1989 psi 29. Disposition of		3 psi used for fue	el, ventea	l, etc.)				_		-		30. 1	est Witnes	ssed By		
31. List Attachments																
							tional Su		, 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 NAD 1927 1983															
I hereby certify	that the	informati	ion sho	wn on		sides of this j rinted	form is t	rue d	and comple	ete i	to the best of	my	know led	ge and	d belief	
Signature K	inda	How	al				Linda G	bod	Titl	e	Regulat	ory S	pecialist		Date	1/9/2017
E-mail Address	s Lin	da.Good@	@dvn.co	om)	1	
														T	In	

KA

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

Southeastern Ne	w Mexico	INOTHIWESTEED	II New Mexico
Rustler - 741			
Salado - 1047			
Base of Salt - 4376			
Delaware - 7394			
Bone Spring - 8150			
2nd Bone Spring - 10137			
			OIL OR GAS SANDS OR ZONES
1 C N/A	NI/A	N/A	Ν/Δ

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 or	n rate of water	inflow and	elevation to which wat	er rose in hole.					

No	. 1,	from	to	.teet
No	. 2,	from	to	.feet
		from	to	feet

LITHOLOGY RECORD (Attach additional sheet if necessary)

From	То	Thickness In Feet	Lithology	From	To	Thickness In Feet	Lithology