Submit To Appropriate District Office Two Copies District I 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. 30-015-47061							
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						2. Type of Lease  ☐ STATE ☐ FEE ☐ FED/INDIAN  3. State Oil & Gas Lease No.						
		ION OF	RECC	MPL	ETION RE	PORT	ANE	LOG							
4. Reason for filing     ✓ COMPLETIO	tes #1 through #31 for State and Fee wells only)				-	Lease Name or Unit Agreement Name     MALDIVES 15-27 FED COM     Well Number:									
#33; attach this and	the plat to the								/or	234H					
7. Type of Comple		RKOVER	☐ DEEPI	ENING	□PLUGBACE	Id 🔲 2	FFERE	NT RESERV	/OIR	☐ OTHER					
8. Name of Operato										9. OGRID	61	37			1/2
10. Address of Ope				70pa.	,, =				$\dashv$	11. Pool name					
		t Sheridar	Δvenue	Oklah	noma City OK	73102	)						NCH· F	BONE SF	PRING
12.Location [		Section	Towns		Range Lot		-	Feet from the				from the	<u> </u>		County
Surface:	0	10			31E	170		640		South		1897		East	EDDY
BH:	0	27		235	31E			8	34	South		1910		East	EDDY
13. Date Spudded 6/3/20	14. Date T.I	D. Reached /28/20	15. I	Date Rig	Released 8/2/20		16.	Date Comp	leted	(Ready to Prod 12/7/20	uce)	17	7. Elevat T. GR. e		and RKB, 3408 GL
18. Total Measured		<u> </u>	19. I	Plug Bac	k Measured Dep	th	20.	Was Direct	tional	Survey Made?			30 30	,	ner Logs Run
26196 MD, 10281 TVD			26171				Yes		⁄es						
22. Producing Inter	val(s), of this	completion	- Top, Bottom, Name 10535-26161, BONE SPRING												
23.				CAS	ING REC	ORD	(Ren	ort all st	ring	s set in we	ell)				
CASING SIZI	Ε ν	VEIGHT LI						3	CEMENTING RECORD AMOUNT PULLED						
13.375 9.625		54.5 40	j	737 8274				17.5 12.25		892 1990					
5.5		20		26174				8.75		3060					
	20271			+						-					
7												$\neg$			
24.	1			LINE	ER RECORD				25.		_	IG REC			
SIZE	TOP	В	OTTOM		SACKS CEM	ENT S	SCREEN	N	SIZ	E	DE	PTH SET	Γ	PACKE	ER SET
		-				$\dashv$			⊢		╀				
26. Perforation re	cord (interval	l, size, and i	number)				27. AC	ID, SHOT,	FR/	ACTURE, CE	MEN	T. SOU	EEZE,	ETC.	
DEPTH INTERVAL						,	AMOUNT AND KIND MATERIAL USED								
	10535	- 20101, 1	Otal 180	4 noies		- I		535-2616	1	Acidize and frac	in 63 s	tages. 305	68550# PF	ROP; 66 BBL	S ACID
28.  Date First Production	on.	Decd	action Mot	hod Æle	owing, gas lift, pr			TION		Well Status	/Duo:	1 ou Class	inl		
12/2		Fiou	iction Mea	nou (1-10	Flov	1 0	· Size an	а туре ритр	,	wen status	(1 100	. or snut-	Produ	ıcing	
Date of Test	Hours Teste	-d (	hoke Size		Prod'n For		Oil - Bb	1	Gas	- MCF	W	iter - Bbl.		Gas - O	il Ratio
12/31/20	24		noke Size	35	Test Period	1	OII - D0)	3658		4422	"		2681	1	8.857299
Flow Tubing	Casing Pres	sure (	Calculated :	24-	Oil - Bbl.		Gas	- MCF	1	Water - Bbl.		Oil Gra	vity - A	PI - (Corr	:)
Press 1133 psi	1142	2 psi	Iour Rate												
29. Disposition of 0	Gas (Sold, use	d for fuel, v	ented, etc.)		Sold						30. T	est Witne	essed By		
31. List Attachmen	ts					Direct	ional S	urvev							
32. If a temporary p	oit was used at	t the well, a	tach a plat	with the				arvey							
1	<ul><li>32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.</li><li>33. If an on-site burial was used at the well, report the exact location of the on-site burial:</li></ul>														
	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  Printed															
Signature C	helsey	sey.green		1	Name	Chels	sey Gre	een Tit	le	Reg	ulato	ry Spec	ialist	Date	2/1/2021

## **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 STAT	<b>\</b> TE
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<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720

811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720

District III
1000 Rio Brazos Rd., Aztec, NM 87410 Phone:(505) 334-6178 Fax:(505) 334-6170

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone:(505) 476-3470 Fax:(505) 476-3462

**State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division** 1220 S. St Francis Dr. **Santa Fe, NM 87505** 

CONDITIONS

Action 20815

## **CONDITIONS OF APPROVAL**

Operator:			OGRID:	Action Number:	Action Type:
DEVON ENERGY PRODUCTION COMPAN	333 West Sheridan Ave.	Oklahoma City, OK73102	6137	20815	C-105

OCD Reviewer	Condition
plmartinez	File BLM 3160-4 Completion Report and BLM 3160-5 Completion Sundry within 10 days to NMOCD after BLM approval.