

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT



FORM APPROVED
OMB NO. 1004-0137
EXPIRES: March 31, 2007

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 _____		5. Lease Serial No. NM-0418220-A							
b. Type of Completion <input type="checkbox"/> New Well <input type="checkbox"/> Work Over <input type="checkbox"/> Deepen <input type="checkbox"/> Plug Back <input type="checkbox"/> Diff. Resvr., <input type="checkbox"/> Other _____		6. If Indian, Allottee or Tribe Name							
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP		7. Unit or CA Agreement Name and No.							
3. Address 20 North Broadway, Oklahoma City, OK 73102		8. Lease Name and Well No. Todd 27C Federal 3							
3a. Phone No. (include area code) 405-235-3611		9. API Well No. 30-015-35516							
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At Surface 660 FNL 1980 FEL At top prod. Interval reported below At total Depth 660 FNL 1980 FEL <div style="text-align: center;">JAN 30 2008 OCD-ARTESIA</div>		10. Field and Pool, or Exploratory Ingle Wells; Delaware							
		11. Sec. T., R., M., on Block and Survey or Area SEC 27 T23S R31E							
		12. County or Parish 13. State Eddy NM							
14. Date Spudded 10/7/2007	15. Date T.D. Reached 10/31/2007	16. Date Completed 11/30/2007 <input type="checkbox"/> D & <input checked="" type="checkbox"/> Ready to Prod.							
17. Elevations (DR, RKB, RT, GL)* 3398' GL									
18. Total Depth: MD 8516' TVD	19. Plug Back T.D.: MD 8467' TVI	20. Depth Bridge Plug Set: MD TVI							
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) ARRAY IND/TOOL/MICRO/CFL/GR & THREE DET/LITHO DENS/COMP NEUTRON/GR CBL		22. Was well cored? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit analysis) Was DST run? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Submit report) Directional Survey? <input checked="" type="checkbox"/> No <input 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)	Cement Depth	No. of Sk. & Type Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17 1/2"	13 3/4" H-40	48#	0	850'		860sx Cl C; 102 sx to pit		Surface	
11"	8 5/8" J-55	32#		4472'		1900 sx Cl C; 322 sx to pit		Surface	
7 7/8"	5 1/2" J-55	15.5# 17.5#	0	8516'		1272 sx Cl C; 134 sx to pit		TOC 4424	DV @ 4517'
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"									
25. Producing Intervals					26. Perforation Record				
Formation		Top	Bottom	Perforated Interval		Size	No. Holes	Perf. Status	
A) Brushy Canyon		8062	8069	8062-69'			14	Producing	
B) Brushy Canyon		7930	7936	7930-36'			12	Producing	
C) Brushy Canyon		7874	7889	7874-7889			20	Producing	
D)									
27. Acid, Fracture, Treatment, Cement Squeeze, Etc.									
Depth Interval		Amount and Type of Material							
7930-8069		Acidize w/ 2K gals 7 1/2% HCL w/ 40 BS. FL. Frac w/ 84,500 gals Spectra Star 2500 w/ 3K# 100 mesh white sd 146,000# 20/40 white sd & 27K# 16/30 Siberprop & flush w/ 182 bbls 10# Linear gel.							
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
11/30/2007	12/8/2007	24	→	139	404	269			Pumping
Choke Size	Tbg. Press. Flwg SI	Csg. Press	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→	139	404	269	2,906		
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	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→						

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	Ibg. 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	Ibg. Press. Flwg SI	Csg. Press	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→						

(See instructions and spaces for additional data on reverse side)

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

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
				Rustler Delaware Bell Canyon Cherry Canyon Brushy Canyon Bone Spring	578' 4324' 4374' 5246' 6510' 8175'

Additional remarks (include plugging procedure):

Circle enclosed attachments:

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

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)

Judy A. Barnett

Title

Regulatory Analyst

Signature

Date

1/29/2008

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.

**RAILROAD COMMISSION OF TEXAS
OIL AND GAS DIVISION**

Form W-12
(1-1-71)

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)		
1. FIELD NAME (as per RRC Records or Wildcat)	2. LEASE NAME Todd 27 C Fed	6. RRC District
3. OPERATOR Devon Energy Corporation		7. RRC Lease Number. (Oil completions only)
4. ADDRESS 20 North Broadway Oklahoma City, Oklahoma 73102		8. Well Number #3
5. LOCATION (Section, Block, and Survey)		9. RRC Identification Number (Gas completions only)
		10. County Eddy

RECORD OF INCLINATION

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
121	1.21	.25	.436	.53	.53
275	1.54	.75	1.308	2.02	2.54
400	1.25	2.2	3.838	4.80	7.34
617	2.17	.6	1.047	2.27	9.61
1010	3.93	.7	1.221	4.80	14.41
1410	4	.6	1.047	4.19	18.60
1735	3.25	1	1.745	5.67	24.27
1985	2.5	2.2	3.838	9.60	33.87
2117	1.32	2.5	4.361	5.76	39.63
2159	.42	2.7	4.710	1.98	41.60
2237	.78	2.3	4.012	3.13	44.73
2322	.85	2.3	4.012	3.41	48.15
2407	.85	2	3.489	2.97	51.11
2491	.84	1.9	3.315	2.78	53.90
2576	.85	1.9	3.315	2.82	56.71
2618	.42	2.1	3.663	1.54	58.25

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? ☒ yes ☐ no
18. Accumulative total displacement of well bore at total depth of 7985 feet = 152.86 feet.
- *19. Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe
- *20. Distance from surface location of well to the nearest lease line _____ feet.
- *21. Minimum distance to lease line as prescribed by field rules _____ feet.
- *22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? _____
- (If the answer to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.

Kirk Wade
Signature of Authorized Representative
Kirk Wade, Drilling Manager
Name of Person and Title (type or print)
J.B. Hunt Gas & Oil Drilling, LLC
Name of Company
Telephone: 432 362-3433
Area Code

OPERATOR CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.

Signature of Authorized Representative

Name of Person and Title (type or print)

Operator DELMA RODRIGUEZ
Telephone: _____
Area Code _____

Railroad Commission Use Only:

Approved By: _____

* Designates items certified by company that conducted the inclination survey.

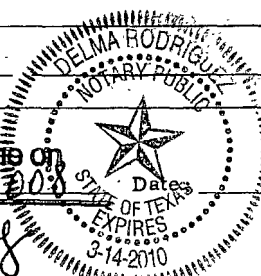
Sworn to and subscribed before me on

the 15 day of January, 2008

Delma Rodriguez

Notary Public's Signature

My Commission Expires 3-14-10



RECORD OF INCLINATION. (Continued from reverse side)

[illegible]

If additional space is needed, attach separate sheet and check here. ☐

REMARKS:

- INSTRUCTIONS -

An inclination survey made by persons or concerns approved by the Commission shall be filed on a form prescribed by the Commission for each well drilled or deepened with rotary tools or when, as a result of any operation, the course of the well is changed. No inclination survey is required on wells that are drilled and completed as dry holes that are plugged and abandoned. (Inclination surveys are required on re-entry of abandoned wells.) Inclination surveys must be made in accordance with the provisions of Statewide Rule 11.

This report shall be filed in the District Office of the Commission for the district in which the well is drilled; by attaching one copy to each appropriate completion for the well. (except Plugging Report)

The Commission may require the submittal of the original charts, graphs, or discs, resulting from the surveys.