


Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88240 District II 811 S. First St., Artesia, NM 88210 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV 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			<div style="display: flex; justify-content: space-between;"> NMOCD-REC'D: 8/24/2020 Form C-105 </div> Revised August 1, 2011 1. WELL API NO. 30-015-45939 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 TODD 36 STATE 6. Well Number: 625H				
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										
8. Name of Operator Devon Energy Production Company, L.P.						9. OGRID 6137				
10. Address of Operator 333 West Sheridan Avenue, Oklahoma City, OK 73102						11. Pool name or Wildcat WWC-015 G-08 S233135D; WOLFCAMP				
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	M	36	23S	31E		180	South	485	West	EDDY
BH:	C	36	23S	31E		20	North	1641	West	EDDY
13. Date Spudded 8/27/19	14. Date T.D. Reached 9/30/19	15. Date Rig Released 10/2/19		16. Date Completed (Ready to Produce) 4/1/20		17. Elevations (DF and RKB, RT, GR, etc.) 3516.4' GL				
18. Total Measured Depth of Well 17038 MD, 11887 TVD			19. Plug Back Measured Depth 16976		20. Was Directional Survey Made? Yes		21. Type Electric and Other Logs Run CBL			
22. Producing Interval(s), of this completion - Top, Bottom, Name 12134-16919, WOLFCAMP										
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"	54.5	855		17-1/2"		1045		Surface		
8-5/8"	32	11470 11460		10- 5/8"		1435		2425		
5-1/5"	20	17038 17028		7-7/8"		1230		7017		
24. LINER RECORD										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN		25. TUBING RECORD				
						SIZE		DEPTH SET		PACKER SET
						@ 11728.5', 2-7/8"				
26. Perforation record (interval, size, and number) 12134 - 16919, total 484 holes					27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL AMOUNT AND KIND MATERIAL USED 12134-16919 Acidize and frac in 25 stages. See detailed summary attached.					
28. PRODUCTION										
Date First Production 4/1/20		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing				Well Status (Prod. or Shut-in) Producing				
Date of Test 4/15/20	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 1524	Gas - MCF 4722	Water - Bbl. 2878	Gas - Oil Ratio 3098			
Flow Tubing Press. 0 psi	Casing Pressure 0 psi	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)				
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:										
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				Printed Name	Jenny Harms	Title	Regulatory Analyst	Date	5/4/2020	
E-mail Address	Jenny.Harms@dv.com									

REVIEWED: 9/26/2020 ab

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..... to..... No. 3, from..... to.....
 No. 2, from..... N/A to..... N/A No. 4, from..... N/A to..... N/A
 N/A N/A N/A N/A

IMPORTANT WATER SANDS

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