

Submit To: Appropriate District Office No 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			Form C-105 Revised August 1, 2011			
		1. WELL API NO. 30-015-40781			2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN			
		3. State Oil & Gas Lease No.			5. Lease Name or Unit Agreement Name Peridot 13 State			
		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)			6. Well Number: 7H			
		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			<div style="border: 2px solid black; padding: 5px; display: inline-block;"> RECEIVED NOV 18 2013 </div>			
8. Name of Operator DEVON ENERGY PRODUCTION COMPANY, L.P.		9. OGRID 6137						
10. Address of Operator 333 W. SHERIDAN AVE. OKLAHOMA CITY, OK 73102		11. Pool name or Wildcat Turkey Track; Bone Spring						
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	
Surface:	H	12	19S	29E		1650	North	
BH:	O	13	19S	29E		349	South	
13. Date Spudded 7/1/2013		14. Date T.D. Reached 8/7/2013		15. Date Rig Released 8/10/2013		16. Date Completed (Ready to Produce) 9/26/2013		
17. Elevations (DF and RKB, RT, GR, etc.) 3393.5' GR		18. Total Measured Depth of Well 15730' MD, 7362' TVD		19. Plug Back Measured Depth 15727'		20. Was Directional Survey Made? yes		
21. Type Electric and Other Logs Run CBL		22. Producing Interval(s), of this completion - Top, Bottom, Name 11110 - 15720'; 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#	310'	17 1/2"	410 sx CI C	Circ 142 sx			
9 5/8"	40#	3656'	12 1/4"	1600 sx CI C	Circ 325 sx			
5 1/2"	20#	15730'	8 3/4"	3490 sx CI H	Circ 268 sx			
24. LINER RECORD				25. TUBING RECORD				
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET	
					2-7/8"	7105'		
26. Perforation record (interval, size, and number) 11110 - 15720' (300 holes) see attached perforation summary				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.				
				DEPTH INTERVAL				
				AMOUNT AND KIND MATERIAL USED				
				11110-15720'				
				30K gals 15% HCL acid, 124K # 30/50 white				
				(10 stages)				
				Sd, 1954K 20/40 white sd, 442K # 20/40 prop				
28. PRODUCTION								
Date First Production 9/26/2013		Production Method (Flowing, gas lift, pumping - Size and type pump) pumping			Well Status (Prod. or Shut-in) producing			
Date of Test 10/14/2013	Hours Tested 24 hrs	Choke Size	Prod'n For Test Period	Oil - Bbl 22	Gas - MCF 281	Water - Bbl. 1226	Gas - Oil Ratio 12772.72727	
Flow Tubing Press. 500 psi	Casing Pressure	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								
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: <u>Patti Riechers</u>		Printed Name: <u>Patti Riechers</u>		Title: <u>Regulatory Specialist</u>		Date: <u>11/11/2013</u>		
E-mail Address: <u>patti.riechers@dvn.com</u>								

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.....to.....

No. 4, from.....to.....

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