

**NM OIL CONSERVATION**

ARTESIA DISTRICT

Form C-104

District I  
1625 N. French Dr., Hobbs, NM 88240

State of New Mexico  
Energy, Minerals & Natural Resources

Revised August 1, 2011

District II  
811 S. First St., Artesia, NM 88210

FEB 23 2015

Submit one copy to appropriate District Office

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

Oil Conservation Division  
1220 South St. Francis Dr.

RECEIVED

AMENDED REPORT

District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

Santa Fe, NM 87505

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator name and Address Devon Energy Production Company, L.P. 333 West Sheridan, Oklahoma City, OK 73102		<sup>2</sup> OGRID Number 6137
		<sup>3</sup> Reason for Filing Code/ Effective Date NW / 1/10/15
<sup>4</sup> API Number 30-015-42370	<sup>5</sup> Pool Name Hackberry; Bone Spring, East	<sup>6</sup> Pool Code 96746
<sup>7</sup> Property Code 39244	<sup>8</sup> Property Name Bellatrix 28 Fed Com	<sup>9</sup> Well Number 7H

**II. <sup>10</sup> Surface Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	29	19S	31E		1710	South	160	East	Eddy

**<sup>11</sup> Bottom Hole Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	28	19S	31E		2200	South	460	East	Eddy

<sup>12</sup> Lse Code	<sup>13</sup> Producing Method Code	<sup>14</sup> Gas Connection Date	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date
F	F	1/10/15			

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
278421	Holly-Frontier 10 Desta Drive, Ste 350W Midland, TX 79710	Oil
036785	DCP Midstream P.O. Box 50020 Midland, TX 79710-0020	Gas

**IV. Well Completion Data**

<sup>21</sup> Spud Date	<sup>22</sup> Ready Date	<sup>23</sup> TD	<sup>24</sup> PBTD	<sup>25</sup> Perforations	<sup>26</sup> DHC, MC
9/14/14	1/10/15	13160	13119.2	8553 - 13109	
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
26"	20"	555	1250 sx CIC; Circ 226 sx		
17-1/2"	13-3/8"	2370	1767 sx CIC; Circ 171 bbls		
12-1/4"	9-5/8"	4200	1643 sx CIC; Circ 114 sx		
8-3/4"	5-1/2" & 7"	13160	2030 sx CIH; Circ 0		

**V. Well Test Data** Tubing: 2-7/8" & 2-3/8"

<sup>31</sup> Date New Oil	<sup>32</sup> Gas Delivery Date	<sup>33</sup> Test Date	<sup>34</sup> Test Length	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure
1/23/15	1/23/15	1/23/15	24 hrs	368 psi	198 psi
<sup>37</sup> Choke Size	<sup>38</sup> Oil	<sup>39</sup> Water	<sup>40</sup> Gas	<sup>41</sup> Test Method	
	142 bbl	1106 bbl	347 mcf		

<sup>42</sup> I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Megan Moravec*  
 Printed name: Megan Moravec  
 Title: Regulatory Compliance Analyst  
 E-mail Address: megan.moravec@dmn.com  
 Date: 2/20/2015

OIL CONSERVATION DIVISION  
 Approved by: *RD Wade*  
 Title: *DIST R Super*  
 Approval Date: *2/26/15*

Pending BLM approvals will subsequently be reviewed and scanned

**NM OIL CONSERVATION**  
ARTESIA DISTRICT

Form 3160-5  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FEB 23 2015

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**RECEIVED**

5. Lease Serial No. **BHL: NMNM101113**

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2.**

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No.  
**Bellatrix 28 Fed Com 7H**

9. API Well No.  
**30-015-42370**

10. Field and Pool or Exploratory Area  
**Hackberry; Bone Spring, East**

11. Country or Parish, State  
**Eddy, NM**

1. Type of Well  
 Oil Well     Gas Well     Other

2. Name of Operator  
**Devon Energy Production Company, L.P.**

3a. Address  
**333 West Sheridan, Oklahoma City, OK 73102**

3b. Phone No. (include area code)  
**405-228-4248**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**1710' FSL & 160' FEL Unit I, Sec 29, T19S, R31E**  
**2200' FSL & 460' FEL Unit I, Sec 28, T19S, R31E**      **PP: 2020' FSL & 300' FEL**

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <b>Completion Report</b>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

11/17/14-1/10/15: MIRU WL & PT. TIH & ran CBL, found ETOC @ 3200'. TIH w/pump through frac plug and guns. Perf Bone Spring, 8553'-13109', total 640 holes. Frac'd 8553'-13109' in 16 stages. Frac totals 49,391 gals 15% NEFE Acid, 13,632,675# Prem White 20/40. ND frac, MIRU PU, NU BOP, DO plugs. CHC, FWB. RIH w/158 jts 2-7/8" P-110 tbg & 189 jts 2-3/8" P-105 tbg, set @ 13314'. TOP.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)  
**Megan Moravec**

Signature *Megan Moravec*

Title **Regulatory Compliance Analyst**

Date **2/20/2015**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by \_\_\_\_\_ Title \_\_\_\_\_

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon. Office \_\_\_\_\_

**Pending BLM approvals will subsequently be reviewed and scanned**

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FEB 23 2015

FORM APPROVED  
OMB NO. 1004-0137  
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

RECEIVED

5. Lease Serial No. BHL: NMMN101113

6. If Indian, Allottee or Tribe Name

7. Unit or CA Agreement Name and No.

2. Name of Operator  
Devon Energy Production Company, L.P.

8. Lease Name and Well No.  
Bellatrix 28 Fed Com 7H

3. Address  
333 West Sheridan Ave, Oklahoma City, OK 73102

3a. Phone No. (include area code)  
405-228-4248

9. AFI Well No.  
30-015-42370

4. Location of Well (Report location clearly and in accordance with Federal requirements)\*

At surface  
1710' FSL & 160' FEL Unit I, Sec 29, T19S, R31E

At top prod. interval reported below

At total depth  
2200' FSL & 460' FEL Unit I, Sec 28, T19S, R31E

14. Date Spudded  
9/14/14

15. Date T.D. Reached  
10/7/14

16. Date Completed  
1/10/15

17. Elevations (DF, RKB, RT, GL)\*  
GL: 3482.8

18. Total Depth: MD 13160  
TVD 8272.4

19. Plug Back T.D.: MD 13119.2  
TVD

20. Depth Bridge Plug Set: MD  
TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)  
Gamma Ray / CCL

22. Was well cored?  No  Yes (Submit analysis)  
Was DST run?  No  Yes (Submit report)  
Directional Survey?  No  Yes (Submit copy)

23. Casing and Liner Record (Report all strings set in well)

Hole Size	Size/Grade	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
26"	20" J-55	94#	0	555		1250 sx CIC		0	226 sx
17-1/2"	13-3/8" J-55	68#	0	2370		1767 sx CIC		0	171 bbls
12-1/4"	9-5/8" J-55	40#	0	4200	DV @ 2414.7	1643 sx CIC		0	114 sx
8-3/4"	5-1/2" & 7" P-110	17# & 29#	0	13160		2030 sx CIH		3200	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
-7/8" & 2-3/8"	13314							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Bone Spring	8553	13109	8553 - 13109		640	open
B)						
C)						
D)						

26. Perforation Record

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Bone Spring	8553	13109	8553 - 13109		640	open

27. Acid, Fracture, Treatment, Cement Squeeze, etc.

Depth Interval	Amount and Type of Material
8553 - 13109	49,391 gals 15% NEFE Acid, 13,632,675# Prem White 20/40

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	Flow
1/10/15	1/23/15	24	→	142	347	1106				
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status		
	368psi	198psi	→				2443.6			

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	Flow
			→							
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Sta.		
			→							

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\*(See instructions and spaces for additional data on page 2)

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

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

SOLD

30. 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
Bone Spring	6835			Rustler	520
				Top of Salt	770
				Capitan	2491
				Delaware	4424
				Bone Spring	6835

32. Additional remarks (include plugging procedure):

33. Indicate which items have been attached by placing a check in the appropriate boxes:

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

34. 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) Megan Moravec Title Regulatory Compliance Analyst  
 Signature *Megan Moravec* Date 2/20/2015

Title 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.