

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 _____ b. Type of Completion <input checked="" 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						5. Lease Serial No. NM-0418220-A			
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY, LP						6. If Indian, Allottee or Tribe Name			
3. Address 20 North Broadway, Oklahoma City, OK 73102				3a. Phone No. (include area code) 405-235-3611		7. Unit or CA Agreement Name and No.			
4. Location of Well (Report location clearly and in accordance with Federal requirements)* At Surface 1980 FSL 660 FEL At top prod. Interval reported below At total Depth 1980 FSL 660 FEL						8. Lease Name and Well No. Todd 27I Federal 9			
<div style="text-align: center;"> MAR 25 2008 OCD-ARTESIA </div>						9. API Well No. 30-015-35521			
						10. Field and Pool, or Exploratory Ingle Wells; Delaware			
11. Sec. T., R., M., on Block and Survey or Area I SEC 27 T23S R31E						12. County or Parish 13. State Eddy NM			
14. Date Spudded 1/10/2008		15. Date T.D. Reached 1/29/2008		16. Date Completed 2/19/2008 <input type="checkbox"/> D & A <input checked="" type="checkbox"/> Ready to Prod.		17. Elevations (DR, RKB, RT, GL)* 3411' GL			
18. Total Depth: MD 8255' TVD		19. Plug Back T.D.: MD 8206' TVI		20. Depth Bridge Plug Set: MD TVI					
21. Type Electric & Other Mechanical Logs Run (Submit copy of each) HI RES/LAT ARRAY/MICRO/CFL/GR & THREE DET/LITHO DENS/COMP/NEUTRON/GR						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)	Stage Cementer Depth	No. of Sk. & Type Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pul
17 1/2"	13 3/8" H-40	48#	0	830'		860 sx Cl C; 78 sx to pit		Surface	
11"	8 5/8" HCK-55	32#	0	4350'		1400 sx Cl C; 20 sx to pit		Surface	
7 7/8"	5 1/2" J-55	15.5 & 17#	0	8255'		1310 sx Cl C		TOC @ 3320'	(CBL)
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									
Formation			Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status	
A) Brushy Canyon Delaware			7900	7907	7900-07			Producing	
B) Brushy Canyon Delaware			7984	7994	7984-94			Producing	
C) Brushy Canyon Delaware			8070	8080	8070-80			Producing	
27. Acid, Fracture, Treatment, Cement Squeeze, Etc.									
Depth Interval			Amount and Type of Material						
A) Brushy Canyon Delaware			RU BJ pump 2K g 7 1/2% HCL acid w/ 60 BS. Frac w/ 8300 g Spectra Star 2500 w/ 3K# 100 mesh white sd, 139K 20/ white sd, 24K 16/40 Siberprop & flush w/ 7730 gals 10# linear gel.						
B) M. Brushy Canyon Delaware			Acidize w/ 1000 g Pentol acid w/ 20 BS.						
C)									
D)									
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
2/23/2008	2/23/2008	24	→	120	222	224			
Choke Size	Tbg. Press. Flwg SI	Csg. Press	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas : Oil Ratio	Well Status	
			→	120	222	224	1,850		
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	623'
				Delaware Lamar	4323'
				Bell Canyon	4381'
				Cherry Canyon	5262'
				Brushy Canyon	6531'
				Bone Spring	8170'

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

3/24/2008

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

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)
114	1.14	0.9	1.5705	1.79	1.79
206	0.92	0.9	1.5705	1.44	3.24
325	1.19	1.5	2.6173	3.11	6.35
450	1.25	1.4	2.4429	3.05	9.40
580	1.30	2.4	4.1870	5.44	14.85
695	1.15	3.4	5.9298	6.82	21.67
830	1.35	4.6	8.0188	10.83	32.49
930	1.00	3.4	5.9298	5.93	38.42
1089	1.59	2.9	5.0586	8.04	46.46
1247	1.58	2.3	4.0126	6.34	52.08
1564	3.17	1.5	2.6173	8.30	61.10
1882	3.18	1.2	2.0939	6.66	67.76
2199	3.17	1.5	2.6173	8.30	76.06
2515	3.16	1.8	3.1406	9.92	85.98
2832	3.17	0.9	1.5705	4.98	90.96
3213	3.81	1.1	1.9195	7.31	98.27

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 8255 feet = 199.10 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: 432 362-3633

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)

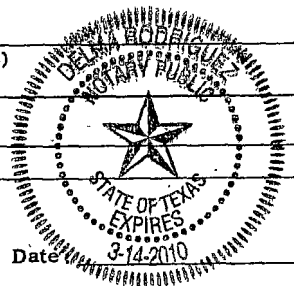
Elabor

Telephone:

Area Code

Sworn to and subscribed before me on
the 18th day of February, 2008

Delma Rodriguez
Notary Public's Signature
My Commission Expires 3-14-10



Railroad Commission Use Only:

Approved By: _____

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

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.