

U.S. Department of the Interior BUREAU OF LAND MANAGEMENT

Well Completion Print

Operator Name DEVON

ENERGY PRODUCTION

Well Name MAGIC CAT 30 FED COM

Well Number 212H

US Well Number 3002547687

COMPANY LP

County LEA

State NM

Lease Number(s) NMNM86927, NMNM086927

SHL SESE Sec 30 23S 32E

Well Status Producing Oil

Agreement Name

Agreement Number(s)

Well

NMNM143516

Submission Date: 07-22-2022

Title: Regulatory Compliance

Lease Acres:

Allottee/Tribe Name

Well Type OIL WELL

Well Pad Name

Well Pad Number 501H/502H/503H

ID 10400050342

FRODERICK 30 FED COM

Section 1 - General

Well Completion Report Id: 85464

BLM Office: Carlsbad Field Office

Federal/Indian: FEDERAL

Agreement in place?: NO **Agreement Number:**

User: SHAYDA OMOUMI

Lease Number: NMNM86927

Federal or Indian Agreement:

Agreement Name:

Keep this Well Completion Report confidential?:

APD Operator: DEVON ENERGY PRODUCTION COMPANY LP

Section 2 - Well

Field/Pool or Exploratory: Pool Name: BONE SPRING, SOUTH Field Name: WC025 G08 S253216D

Well Type: OIL WELL

Spud Date: 05-19-2021

Date Total Measured Depth Reached: 06-11-2021

Drill & Abandon or Ready To Produce: READY TO

Well Class: HORIZONTAL

Section 3 - Geologic

Formation Name	Lithology	Describe Lithology	Elevation	TVD	MD	Mineral Resources	Describe Mineral
PERMIAN	ALLUVIUM		3611	0	0	NONE	

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Section 3 - Geologic

Formation Name	Lithology	Describe Lithology	Elevation	TVD	MD	Mineral Resources	Describe Mineral
RUSTLER	ANHYDRITE		2558	1025	1025	NONE	
TOP SALT	SALT		1020	1355	1355	NONE	
LAMAR	LIMESTONE		-1065	4385	4385	NONE	
BASE OF SALT	SALT		-838	4385	4385	NONE	
BELL CANYON	SANDSTONE		-1127	4625	4625	NATURAL GAS, OIL	
CHERRY CANYON	SANDSTONE		-1859	5565	5565	NATURAL GAS, OIL	
BRUSHY CANYON	SANDSTONE		-3293	6825	6825	NATURAL GAS, OIL	
BONE SPRING LIME	LIMESTONE		-4948	8450	8450	NONE	
FIRST BONE SPRING SAND	SANDSTONE		-6066	9585	9585	NATURAL GAS, OIL	
BONE SPRING 2ND	SANDSTONE		-6535	10175	10175	NATURAL GAS, OIL	

Completion and Completed

Completion Data

Wellbore Code	Completion Code	Interval Number	Case Number	Lease Number	Well Completion Type	Describe Well Completion Type	Completion Status	Date Completed	Date First Produced	Formation	Interval Top (MD)	Interval Bottom (MD)	Interval Perforated?	Perforation Size	Number of Holes	Status of Interval

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Allottee/Tribe Name

FRODERICK 30 FED COM

501H/502H/503H

Completion Data

Wellbore Code	Completion Code	Interval Number	Case Number	Lease Number	Well Completion Type	Describe Well Completion Type	Completion Status	Date Completed	Date First Produced	Formation	Interval Top (MD)	Interval Bottom (MD)	Interval Perforated?	Perforation Size	Number of Holes	Status of Interval
00	S1	1	NMNM14 3516	NMNM08 6927	NEW		POW	09-07- 2021	09-07- 2021	BONE SPRING	108 90	15626	Y	.38	574	OPEN

Treatment Data

Wellbore	Completion	Interval	Interval	Treatment	Totle Fluid	Total	Treatment
Code	Code	Number	Treated?	Type	(bbls)	Proppant (lbs)	Remarks
00	S1	1	Y	ACID FRAC	170110	9463823	

Production Data

Wellbore	Completion	Interval	API Oil	Gas Gravity	Production	Describe	Disposition of	Describe
Code	Code	Number	Gravity		Method	Production	Gas	Disposition
00	S1	1			FLOWS FROM WELL		SOLD	

Test Data

Wellbore Code	Completic Code	Interval Number	Test Dat	Hours Test	24-Hour Ra Oil (bbls)	24-Hour Ra Gas (MCF	24-Hour Ra Water(BWF	Gas-Oil Rat (SCF/Bbl)	Choke Size	Tubing PRessur	Tubing Pressure Shut-In (ps	Casing Pressure (p
Ф	9		ि ल	ted	Rate	Rate CF)	Rate WPD)	Ratio bl)	ze	<u>6</u> _	e Si)	psi

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Test Data

Wellbore Code	Completion Code	Interval Number	Test Date	Hours Tested	24-Hour Rate Oil (bbls)	24-Hour Rate Gas (MCF)	24-Hour Rate Water(BWPD)	Gas-Oil Ratio (SCF/Bbl)	Choke Size	Tubing PRessure	Tubing Pressure Shut-In (psi)	Casing Pressure (psi)
00	S1	1	09/14/20 21	24	697	1183	2909	1697				

Well Location

Survey Type: RECTANGULAR

Survey Number:

Datum: NAD83

Vertical Datum: NAVD88

Reference Datum: KB

	State	Meridian	County	Latitude	Longitude	Elevation (MSL)	MD (ft)	TVD (ft)	Lease Type	Lease Number	Plug TVD (ft)	Plug MD (ft)	Plug Type	NS-Foot	NS-Indicator	EW-Foot	EW-Indicator	Township	Range	Section	AllquovEov
SHL	NEW MEXIC O	NEW MEXICO PRINCIPA L	LEA	32.269 0484	- 103.70 91569	3611	N/A	N/A	FEDER AL	NMNM 86927				300	FSL	122 2	FEL	235	32E	30	SE
KOP Well bore 00		NEW MEXICO PRINCIPA L	LEA	32.268 3652	- 103.70 76289	-6346	10041	9957	FEDER AL	NMNM 86927				49	FSL	750	FEL	235	32E	30	SE
PPP Well bore 00	NEW MEXIC O	NEW MEXICO PRINCIPA L	LEA	32.269 262	- 103.70 75665	-6558	10261	10169	FEDER AL	NMNM 86927				376	FSL	731	FEL	235	32E	30	SE

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EXIT Well bore 00	NEW MEXIC O	NEW MEXICO PRINCIPA L	LEA	32.282 409	- 103.70 73611	-6823	15445	10434	FEDER AL	NMNM 66924				124	FNL	665	FEL	235	32E	30	NE
BHL Well bore	NEW MEXIC O	NEW MEXICO PRINCIPA	LEA	32.282 4941	- 103.70 73666	-7136	15639	10747	FEDER AL	NMNM 66924			float collar	93	FNL	667	FEL	235	32E	30	NE

Casing, Liner and Tubing

Casing and Liner

Wellbore Code	Casing String Type	Hole Size	Top Setting Depth (MD)	Bottom Setting Depth (MD)	Casing Size	Wt(lbs/ft)	Casing Grade	Describe Other Casing Grade	Joint	Other Joint	Amount Pulled (ft)
00	SURFACE	17.5	0	1178	13.375	54.5	J-55		OTHER	втс	
00	INTERME DIATE	12.25	0	4548	9.625	40	J-55		OTHER	втс	

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Casing and Liner

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00	PRODUCT ION	8.5	0	15641	5.5	20	P-110		OTHER	DWC/C IS PLUS	

Cementing

Wellbore Code	Casing String Type	Stage Tool Depth	Cement Lead Type	Cement Lead Qty (sks)	Cement Lead Yield (cu.ft/sks)	Cement Lead Top (MD)	Cement Tail Type	Cement Tail Qty (sks)	Cement Tail Yield(cu.ft/sks)	Cement Tail Top (MD)	Total (Lead + Tail) Cement Slurry Volume
00	SURFACE		Class C	890	1.85	0					293.2
00	INTERME DIATE		Class C	975	2.19	0	Class C	120	1.83	3908	419.4
00	PRODUCT ION		Class H	480	4.11	3044	Class H	1010	1.59	9286	637.4

Tubing

Wellbore Code	Tubing Size	Describe Other	Tubing Setting Depth (MD/ft)	Packer Depth (MD/ft)	Tubing Weight	Tubing Grade	Describe Other	Tubing Coupling	Describe Other
00	2.875		10341			L-80			

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Logs

Wellbore Code	Log Upload	Was Well Cored?	Was DST Run?	Directional Survey?	Geologic Report	Wellbore Diagram	
00	YES	NO	NO	YES	NO	NO	

Operator

I hereby certify that the foregoing and attached information is complete and correct as determined from all available records. 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 any department or agency of the United States any false, fictitious or fradulent statements or representations aas to any matter within its jurisdiction. Electronic submission of Well Completion Reports through this system satifies regulations requiring a submission of Form 3160-4 or a Well Completion Report.

Name: DEVON ENERGY PRODUCTION COMPANY LP

Signed By: SHAYDA OMOUMI Title: Regulatory Compliance Signed on: 03/02/2023

Associate 3

Street Address: 333 W SHERIDAN AVE

State: OK **Zip:** 73102 City: OKLAHOMA CITY

Phone: (405)235-3611

Email address: SHAYDA.OMOUMI@DVN.COM

Field

Representative Name:

Street Address:

City: State: Zip:

Phone: **Extension:**

Email address:

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Attachments

MAGIC_CAT_30_FED_COM_212H_300254768700_CBL_LOG_24_JUN_2021_8550343_20220721124713.pd

Devon_Magic_Cat_30_Fed_Com_212H_Final_Surveys_20220721124747.pdf

MAGIC_CAT_30_FED_COM_212H_AS_DRILLED_20220721124755.pdf

MAGIC_CAT_30_FED_COM_212H_300254768700_GR_2md_Final_20230213093232.pdf

Sante Fe Main Office Phone: (505) 476-3441

General Information Phone: (505) 629-6116

Online Phone Directory https://www.emnrd.nm.gov/ocd/contact-us

State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

ACKNOWLEDGMENTS

Action 246247

ACKNOWLEDGMENTS

Operator:	OGRID:
DEVON ENERGY PRODUCTION COMPANY, LP	6137
333 West Sheridan Ave.	Action Number:
Oklahoma City, OK 73102	246247
	Action Type:
	[C-105] Well (Re)Completion (C-105)

ACKNOWLEDGMENTS

V	I hereby certify that the required Water Use Report has been, or will be, submitted for this wells completion.
V	I hereby certify that the required FracFocus disclosure has been, or will be, submitted for this wells completion.
Г	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.
	I hereby certify that no additives containing PFAS chemicals were added to the fluid used in the completion or recompletion of this well.

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CONDITIONS

Action 246247

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	Action Type:
	[C-105] Well (Re)Completion (C-105)

CONDITIONS

Cre	eated By	Condition	Condition Date
cr	ystal.walker	None	9/25/2025