

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		<b>State of New Mexico</b> <b>Energy, Minerals and Natural Resources</b> <b>Oil Conservation Division</b> 1220 South St. Francis Dr. Santa Fe, NM 87505				<b>Form C-105</b> Revised August 1, 2011				
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		<b>ARTESIA DISTRICT</b> <b>FEB 18 2015</b> <b>RECEIVED</b>				1. WELL API NO. 30-015-42113 2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No.				
<b>WELL COMPLETION OR RECOMPLETION REPORT AND LOG</b>										
4. Reason for filing:  <input checked="" type="checkbox"/> <b>COMPLETION REPORT</b> (Fill in boxes #1 through #31 for State and Fee wells only)  <input type="checkbox"/> <b>C-144 CLOSURE ATTACHMENT</b> (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 <b>Snapping 2 State</b> 6. Well Number: 13H				
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 <b>Devon Energy Production Company, L.P.</b>						9. OGRID 6137				
10. Address of Operator <b>333 West Sheridan Avenue, Oklahoma City, OK 73102</b>						11. Pool name or Wildcat <b>Jennings; Bone Spring, West</b>				
12. Location	Unit-Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	N	2	26S	31E		200	South	2375	West	Eddy
BH:	C	2	26S	31E		327	North	1967	West	Eddy
13. Date Spudded 8/7/14	14. Date T.D. Reached 9/12/14		15. Date Rig Released 9/20/14		16. Date Completed (Ready to Produce) 1/18/15			17. Elevations (DF and RKB, RT, GR, etc.) 3237.1 GL		
18. Total Measured Depth of Well  15990 MD, 11430.79 TVD			19. Plug Back Measured Depth  15938.7		20. Was Directional Survey Made?  Yes			21. Type Electric and Other Logs Run  CBL Gamma Ray		
22. Producing Interval(s), of this completion - Top, Bottom, Name <b>11720-15932, Bone Spring, West</b>										
<b>23. CASING RECORD (Report all strings set in well)</b>										
CASING SIZE		WEIGHT L.B./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13-3/8"		48#		1003		17-1/2"		940 sx CIC; circ 385 sx		
9-5/8"		40#		4060		12-1/4"		1545 sx CIC; circ 5 bbls		
7"		29#		11662		8-3/4"		2150 sx cmt; circ 3 bbls		
4-1/2"		13.5#		15988		6-1/8"		575 sx CIH; circ 0		TOC @ 9282
<b>24. LINER RECORD</b>										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN						
<b>25. TUBING RECORD</b>						SIZE		DEPTH SET		PACKER SET
						2-7/8" L-80		10869		
26. Perforation record (interval, size, and number)  11720 - 15932, total 768 holes						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED 11720-15932      Acidize and frac in 16 stages. See detailed summary attached.				
<b>28. PRODUCTION</b>										
Date First Production 1/18/15		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing				Well Status (Prod. or Shut-in) Producing				
Date of Test 2/12/15	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 507	Gas - MCF 1763	Water - Bbl. 2057	Gas - Oil Ratio 3477			
Flow Tubing Press. 3700 psi	Casing Pressure 1850 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 <i>Megan Moravec</i>				Printed Name Megan Moravec		Title Regulatory Compliance Analyst		Date 2/16/2015		
E-mail Address megan.moravec@dv.com										

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

## 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