

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED
OMB NO 1004-0137
Expires March 31, 2007

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1a Type of Well ☒ Oil Well ☐ Gas Well ☐ Dry ☐ Other
b Type of Completion ☒ New Well ☐ Work Over ☐ Deepen ☐ Plug Back ☐ Diff Resvr, Other _____

2 Name of Operator
Devon Energy Production Co., LP

3 Address 20 North Broadway
OKC, OK 73102

3a Phone No (include area code)
(405)-552-7802

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

760' FNL & 2310' FWL
At surface

At top prod interval reported below

At total depth 760' FNL & 2310' FWL

14 Date Spudded
03/10/2008

15 Date T D Reached
07/07/2008

16 Date Completed
☐ D & A ☒ Ready to Prod

18 Total Depth MD
TVD 5,210'

19 Plug Back T D MD
TVD 5,115'

20 Depth Bridge Plug Set MD
TVD

21 Type Electric & Other Mechanical Logs Run (Submit copy of each)
IND, CNL, Microlog

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 Cement Depth	No of Sks & Type of Cement	Slurry Vol (BBL)	Cement Top*	Amount Pulled
14 3/4"	11 3/4" H-40	42#		532'		485 sx Cl C			
11"	8 5/8" J-55	32#		1725'		675 sx Cl C	175 sx to pit		
8 3/4"	5 1/2" J-55	15.5#		5210'		895 sx Cl C			

24 Tubing Record

Size	Depth Set (MD)	Packet Depth (MD)	Size	Depth Set (MD)	Packet Depth (MD)	Size	Depth Set (MD)	Packet Depth (MD)
2 7/8"	4,936'	TAC @ 4676'						

25 Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No Holes	Perf Status
A) Delaware	4848	4854	4848 - 4854		36	Producing
B) Delaware	4806	4812	4806 - 4812		36	Producing
C)						
D)						

27 Acid, Fracture, Treatment, Cement Squeeze, etc

Depth Interval	Amount and Type of Material
4806 - 4854	Frac w/39,000# 20/40 sn & 12,500# Siberprop
	Acidize w/1000 gal 7 1/2 HCL acid

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
10/14/08	10/14/08	24	→	20	150	180			Flowing
Choke Size	Tbg Press Flwg SI	Csg Press	24 Hr Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
	130	100	→					Producing	

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	
			→						

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

ACCEPTED FOR RECORD

OCT 22 2008

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

Accepted for record - NMOCB

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)	31 Formation (Log) Markers
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	

Formation	Top	Bottom	Descriptions, Contents, etc	Name	Top
					Meas Depth
				Capitan Delaware	525' 1660'
				Bone Springs	4920'

32 Additional remarks (include plugging procedure)

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

<input type="checkbox"/> Electrical/Mechanical Logs (1 full set req'd)	<input type="checkbox"/> Geologic Report	<input type="checkbox"/> DST Report	<input type="checkbox"/> Directional Survey
<input type="checkbox"/> Sundry Notice for plugging and cement verification	<input type="checkbox"/> Core Analysis	<input type="checkbox"/> 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) Stephanie A. Ysasaga Title Sr. Staff Engineering Technician

Signature [Signature] Date 09/05/2008