


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		State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505			Form C-105 Revised August 1, 2011					
		1. WELL API NO.			30-015-45379					
		2. Type of Lease			<input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN					
		3. State Oil & Gas Lease No.								
WELL COMPLETION OR RECOMPLETION REPORT AND LOG										
4. Reason for filing:					5. Lease Name or Unit Agreement Name					
<input checked="" type="checkbox"/> COMPLETION REPORT (Fill in boxes #1 through #31 for State and Fee wells only) <input type="checkbox"/> C-144 CLOSURE ATTACHMENT (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)					TODD 36 STATE					
					6. Well Number:					
					231H					
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					9. OGRID					
Devon Energy Production Company, L.P.					6137					
10. Address of Operator					11. Pool name or Wildcat					
333 West Sheridan Avenue, Oklahoma City, OK 73102					53805-SAND DUNES; BONESPRING					
12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	N	36	23S	31E		330	South	1629	West	EDDY
BH:	C	36	23S	31E		190	North	1328	West	EDDY
13. Date Spudded	14. Date T.D. Reached		15. Date Rig Released		16. Date Completed (Ready to Produce)			17. Elevations (DF and RKB, RT, GR, etc.)		
6/21/19	7/6/19		7/8/19		4/6/20			3505.1 GL		
18. Total Measured Depth of Well			19. Plug Back Measured Depth			20. Was Directional Survey Made?		21. Type Electric and Other Logs Run		
15207 MD, 10565 TVD			15188			Yes		CBL		
22. Producing Interval(s), of this completion - Top, Bottom, Name										
10704-15178, BONESPRING										
23. CASING RECORD (Report all strings set in well)										
CASING SIZE		WEIGHT LB./FT.		DEPTH SET		HOLE SIZE		CEMENTING RECORD		AMOUNT PULLED
13-3/8"		54.5		822		17-1/2"		855		
9-5/8"		40		8427		12-1/4"				
5-1/5"		17		10835		8-3/4"		#REF!		#REF!
5-1/5"		17		15192		8-1/2"		1380		TOC @ 6270
24. LINER RECORD										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN		25. TUBING RECORD				
				, Tubing		3/20/2020, set @ 10091', 2-7/8", L-80, 303 jnts, packer set @ 10073.6				
26. Perforation record (interval, size, and number)						27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.				
10704 - 15178, total 544 holes						DEPTH INTERVAL				
						10704-15178				
						Acidize and frac in 19 stages. See detailed summary attached.				
28. PRODUCTION										
Date First Production		Production Method (Flowing, gas lift, pumping - Size and type pump)				Well Status (Prod. or Shut-in)				
4/6/20		Flowing				Producing				
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio			
4/17/20	24			873	1146	1719	1312			
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)				
0 psi	0 psi									
29. Disposition of Gas (Sold, used for fuel, vented, etc.)							30. Test Witnessed By			
Sold										
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		Printed Name		Title		Regulatory Analyst		Date		
		Jenny Harms		Title		Regulatory Analyst		Date 5/6/2020		
E-mail Address		Jenny.Harms@dvn.com								

10/06/2020 AB

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

IMPORTANT WATER SANDS

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