

Submit To Appropriate District Office Two Copies <b>District I</b> 1625 N. French Dr., Hobbs, NM 88240 <b>District II</b> 811 S. First St., Artesia, NM 88210 <b>District III</b> 1000 Rio Brazos Rd., Aztec, NM 87410 <b>District IV</b> 1230 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> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>		<b>Form C-105</b> Revised August 1, 2011	
		1. WELL API NO. 30-015-44097		2. Type of Lease <input type="checkbox"/> STATE <input type="checkbox"/> FEE <input checked="" type="checkbox"/> FED/INDIAN	
		3. State Oil & Gas Lease No.		5. Lease Name or Unit Agreement Name Emerald PWU 20-22	
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)		6. Well Number:  12H		NM OIL CONSERVATION ARTESIA DISTRICT JUN 01 2018 RECEIVED	
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 Devon Energy Production Company, L.P.		9. OGRID 6137			
10. Address of Operator 333 West Sheridan Avenue, Oklahoma City, OK 73102		11. Pool name or Wildcat PARKWAY; BONE SPRING, WEST			
12. Location	Unit Ltr	Section	Township	Range	Lot
Surface:	M	20	19S	29E	
BH:	P	21	19S	29E	
13. Date Spudded 7/6/17	14. Date T.D. Reached 8/18/17	15. Date Rig Released 10/23/17		16. Date Completed (Ready to Produce) 4/15/18	
17. Elevations (DF and RKB, RT, GR, etc.) 3437.2' GL		21. Type Electric and Other Logs Run CBL			
18. Total Measured Depth of Well 21670 MD, 8191 TVD		19. Plug Back Measured Depth 10407		20. Was Directional Survey Made? Yes	
22. Producing Interval(s), of this completion - Top, Bottom, Name 9300-21520, BONE SPRING, WEST					
23. CASING RECORD (Report all strings set in well)					
CASING SIZE	WEIGHT LBS./FT.	DEPTH SET	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	54.5#	190	20	825 sx CIC; circ 106.76	
9-5/8"	40#	3409	12-1/4"	1360 sx CIC; circ 248.12	
5 1/2"	17#	21654	8.5" OH	1555 sx CIC; circ 0	TOC @ 8940'
				260 sx CIH -Cmt plug WS; circ 0	TOC @ 7744'
5 1/2"	17#	21655	8.5" ST01	3315 sxs CLC	
24. LINER RECORD			25. TUBING RECORD		
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE
					2-7/8" L-80
26. Perforation record (interval, size, and number) 9300 - 21520, total 1492 holes			27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL 9300-21520 Acidize and frac in 62 stages. See detailed summary attached.		
28. PRODUCTION					
Date First Production 4/15/18		Production Method (Flowing, gas lift, pumping - Size and type pump) Flowing		Well Status (Prod. or Shut-in) Producing	
Date of Test 5/3/18	Hours Tested 24	Choke Size	Prod'n For Test Period	Oil - Bbl 1320	Gas - MCF 2088
Flow Tubing Press. 258 psi	Casing Pressure 1118 psi	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl. 816
					Gas - Oil Ratio 976
29. Disposition of Gas (Sold, used for fuel, vented, etc.) Sold				30. Test Witnessed By <i>[Signature]</i> 6.10.2018	
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>[Signature]</i>	Printed Name Erin Workman	Title Regulatory Analyst	Date 5/29/2018		
E-mail Address Erin.Workman@devn.com					

CONFIDENTIAL

## 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