

Submit To Appropriate District Office Two Copies District I 1625 N. French Dr., Hobbs, NM 88246 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> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>	<b>Form C-105</b> Revised August 1, 2011
<b>HOBBS CCD</b>  <b>MAR 01 2013</b>		1. WELL API NO. 30-025-40743
		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:  <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 TAIPAN 10 STATE COM  6. Well Number:  IH
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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
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8. Name of Operator DEVON ENERGY PRODUCTION COMPANY L.P.	9. OGRID 6137
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10. Address of Operator 333 W. SHERIDAN AVE., OKLAHOMA CITY, OKLAHOMA 73102-5015	11. Pool name or Wildcat <i>BRAININ 5700</i> ERUZ, BONE SPRING <i># 7320</i>
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12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
<b>Surface:</b>	D	15	23S	33E		150	NORTH	710	WEST	LEA
<b>BH:</b>	D	10	23S	33E		335	NORTH	277	WEST	LEA

13. Date Spudded 11/4/2012	14. Date T.D. Reached 11/27/2012	15. Date Rig Released 11/30/2012	16. Date Completed (Ready to Produce) 2/19/2013	17. Elevations (DF and RKB, RT, GR, etc.) 3,700' GR
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18. Total Measured Depth of Well 16,079' MD	19. Plug Back Measured Depth 16,016' MD	20. Was Directional Survey Made? YES	21. Type Electric and Other Logs Run CBL
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22. Producing Interval(s), of this completion - Top, Bottom, Name 11,505' - 16,002' BONE SPRING
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**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"	48#	1,400'	17 1/2"	1,760 sx, CI C	0
9 5/8"	40#	5,220'	12 1/4"	1,930 sx, CI C	0
5 1/2"	17#	16,064'	8 3/4"	2,270 sx, CI H	CBL TOC @ 4,750'

24. LINER RECORD				25. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					2 7/8"	10,811'	

26. Perforation record (interval, size, and number) 11,505' - 16,002', 0.42", 288 holes  See attached report.	27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> </thead> <tbody> <tr> <td>11,505' - 16,002'</td> <td>8 stage frac: 1,275,471# 30/50 WS, 24,062 gals 10.1-15% HCL, 968,255 # 20/40 SLC, 573 bbls Slick water</td> </tr> </tbody> </table>	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	11,505' - 16,002'	8 stage frac: 1,275,471# 30/50 WS, 24,062 gals 10.1-15% HCL, 968,255 # 20/40 SLC, 573 bbls Slick water
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**28. PRODUCTION**

Date First Production 2/19/2013		Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> ) Pump			Well Status ( <i>Prod. or Shut-in</i> ) Prod.		
Date of Test 2/22/2013	Hours Tested 24	Choke Size	Prod'n For Test Period 2/22/2013	Oil - Bbl 414	Gas - MCF 499	Water - Bbl. 864	Gas - Oil Ratio <i>1205</i>
Flow Tubing Press. 300	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl. 414	Gas - MCF 499	Water - Bbl. 864	Oil Gravity - API - ( <i>Corr.</i> )	

29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc.</i> ) Sold	30. Test Witnessed By
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31. List Attachments
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32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.
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33. If an on-site burial was used at the well, report the exact location of the on-site burial:
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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: David H. Cook Title: Regulatory Specialist	Date: 2/27/2013
E-mail Address: david.cook@dvn.com	<i>[Signature]</i>	

MAR 14 2013

