

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								
<b>RECEIVED</b> <b>HOBBS OCU</b> <b>APR 17 2014</b>		1. WELL API NO. 30-025-41341								
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)		2. Type of Lease <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED/INDIAN 3. State Oil & Gas Lease No.								
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		5. Lease Name or Unit Agreement Name <b>Thistle Unit</b> 6. Well Number: 57H								
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>Triple X; Bone Spring</b>								
12. Location <b>Surface:</b>	Unit Ltr <b>O</b>	Section <b>22</b>	Township <b>23S</b>	Range <b>33E</b>	Lot 	Feet from the <b>150</b>	N/S Line <b>South</b>	Feet from the <b>2150</b>	E/W Line <b>East</b>	County <b>Lea</b>
<b>BH:</b>	<b>N</b>	<b>27</b>	<b>23S</b>	<b>33E</b>		<b>328</b>	<b>South</b>	<b>2004</b>	<b>West</b>	<b>Lea</b>
13. Date Spudded <b>11/16/13</b>	14. Date T.D. Reached <b>12/16/13</b>	15. Date Rig Released <b>12/19/13</b>		16. Date Completed (Ready to Produce) <b>3/19/14</b>		17. Elevations (DF and RKB, RT, GR, etc.) <b>3691.3' GL</b>				
18. Total Measured Depth of Well <b>16135' MD, 11301' TVD</b>		19. Plug Back Measured Depth <b>16089'</b>		20. Was Directional Survey Made? <b>Yes</b>		21. Type Electric and Other Logs Run <b>Dual Spaced Neutron Spectral Density, Dual Laterolog, Gamma Ray CCL</b>				
22. Producing Interval(s), of this completion - Top, Bottom, Name <b>11550-16002, Bone Spring</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"	54.5#	1428'	17-1/2"	500 sx Econocem, 895 sx Halcem, circ 460 sx						
9-5/8"	40#	5240'	12-1/4"	1030 sx Econocem, 430 sx Halcem, circ 182 sx						
5-1/2"	17#	16135'	8-3/4"	2490 sx Versacem, 405 sx Econocem	TOC @ 3676'					
<b>24. LINER RECORD</b>										
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	25. TUBING RECORD					
					SIZE	DEPTH SET	PACKER SET			
					2-7/8" L-80	4608.7'				
26. Perforation record (interval, size, and number) <b>11550 - 16002, total 500 holes</b>				27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC. DEPTH INTERVAL      AMOUNT AND KIND MATERIAL USED <b>11550-16002      Acidize and frac in 10 stages. See detailed summary attached.</b>						
<b>28. PRODUCTION</b>										
Date First Production		Production Method ( <i>Flowing, gas lift, pumping - Size and type pump</i> )				Well Status ( <i>Prod. or Shut-in</i> )				
3/19/14		Flowing				Producing				
Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio			
3/30/14	24			731	1076	1220	1471.95			
Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - ( <i>Corr.</i> )				
1425 psi	0 psi									
29. Disposition of Gas ( <i>Sold, used for fuel, vented, etc.</i> ) <b>Sold</b>							30. Test Witnessed By			
31. List Attachments <b>Directional Survey, Logs</b>										
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>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</i>										
Signature <i>Megan Moravec</i>			Printed Name Megan Moravec		Title Regulatory Compliance Analyst			Date 4/16/2014		
E-mail Address megan.moravec@dvn.com										

MAY 05 2014

