

HOBBS
APR 21 2015

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 & Natural Resources
Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

RECEIVED
Submit one copy to appropriate District Office

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Devon Energy Production Company, L.P. 333 West Sheridan, Oklahoma City, OK 73102		² OGRID Number 6137
		³ Reason for Filing Code/ Effective Date NW / 3/15/15
⁴ API Number 30-025-41264	⁵ Pool Name Paduca; Delaware; N.	⁶ Pool Code 49490
⁷ Property Code 40025	⁸ Property Name Cotton Draw 33 Fed	⁹ Well Number 2H

II. ¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	33	24S	32E		330	North	1345	West	Lea

¹¹ Bottom Hole Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	33	24S	32E		357	South	1974	West	Lea

¹² Lsc Code F	¹³ Producing Method Code F	¹⁴ Gas Connection Date 3/15/15	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date
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III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
020445	Plains Marketing P.O. Box 4648 Houston, TX 77210	Oil
036785	DCP Midstream P.O. Box 50020 Midland, TX 79710-0020	Gas

IV. Well Completion Data

²¹ Spud Date 11/22/14	²² Ready Date 3/15/15	²³ TD 12909	²⁴ PBTD 12861.5	²⁵ Perforations 8761 - 12847	²⁶ DHC, MC
²⁷ Hole Size		²⁸ Casing & Tubing Size		²⁹ Depth Set	³⁰ Sacks Cement
17-1/2"		13-3/8"		900	840 sx CIC; Circ 150 sx
12-1/4"		9-5/8"		4650	1950 sx CIC; Circ 33 sx
8-3/4"		5-1/2"		12909	2295 sx CIC; Circ 0
		Tubing: 2-7/8"		7783.3	

V. Well Test Data

³¹ Date New Oil 4/12/15	³² Gas Delivery Date 4/12/15	³³ Test Date 4/12/15	³⁴ Test Length 24 hrs	³⁵ Tbg. Pressure 501 psi	³⁶ Csg. Pressure 420 psi
³⁷ Choke Size	³⁸ Oil 658 bbl	³⁹ Water 2242 bbl	⁴⁰ Gas 1070 mcf		⁴¹ Test Method

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Megan Moravec*
Printed name: Megan Moravec
Title: Regulatory Compliance Analyst
E-mail Address: megan.moravec@dmv.com
Date: 4/20/2015

OIL CONSERVATION DIVISION

Approved by: *[Signature]*
Title: Petroleum Engineer
Approval Date: 05/04/15

Comp _____ Add New Well _____
Cancl Well _____ Create Pool _____
E-PERMITTING -- New Well _____
Comp *PM* P&A _____ TA _____
CSNG *PM* Loc Chng _____

MAY 04 2015

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

APR 21 2015

RECEIVED

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

5. Lease Serial No.
NMMN113964

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
COTTON DRAW 33 FED 2H

9. API Well No.
30-025-41264

10. Field and Pool, or Exploratory
PADUCA; DELAWARE; N.

11. County or Parish, and State
LEA COUNTY COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
DEVON ENERGY PRODUCTION COMPAN
Contact: MEGAN MORAVEC
megan.moravec@dvn.com

3a. Address
333 WEST SHERIDAN AVENUE
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)
Ph: 405-552-3622

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 33 T24S R32E NENW 330FNL 1345FWL

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Drilling Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

(11/22/14-11/25/14) Spud @ 19:00. TD 17-1/2? hole @ 900?. RIH w/ 21 jts 13-3/8? 48# H-40 BTC csg, set @ 900?. Lead w/ 840 sx CIC, yld 1.34 cu ft/sk. Disp w/ 135 bbls FW. Circ 150 sx cmt to surf. PT all BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1211 psi for 30 min, OK.

(11/27/14-11/30/14) TD 12-1/4? hole @ 4650?. RIH w/ 103 jts 9-5/8? 40# HCK-55 BTC csg, set @ 4650?. Lead w/ 1120 sx CIC, yld 1.87 cu ft/sk. Tail w/ 430 sx CIC, yld 1.33 cu ft/sk. Disp w/ 348 bbls FW. Pump 400 sx CIC, yld 1.33 cu ft/sk. Circ 33 sx cmt to surf. PT all BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1500 psi for 30 min, OK.

(12/8/14-12/12/14) TD 8-3/4? hole @ 12909?. RIH w/ 294 jts 5-1/2? 17# HCP-110 BTC csg, set @ 12909?. 1st stage lead w/ 695 sx CIC. Tail w/ 1340 sx CIC. Disp w/ 299 bbls FW. Drop DVT opening bomb; open DVT set @ 4918.3?. 2nd stage lead w/ 130 sx CIC, yld 2.75 cu ft/sk. Tail w/ 130 sx

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #286119 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION COMPAN, sent to the Hobbs

Name (Printed/Typed) MEGAN MORAVEC Title REGULATORY ANALYST

Signature (Electronic Submission) Date 12/22/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____ Date _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office 

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

Additional data for EC transaction #286119 that would not fit on the form

32. Additional remarks, continued

CIC, yld 1.33 cu ft/sk. Disp w/ 114 bbls FW. No cmt to surf, TOC @ 500?. RR @ 06:00.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

5. Lease Serial No. **BHL: NMNM113964**

6. If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS
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SUBMIT IN TRIPLICATE – Other instructions on page 2.

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No.
Cotton Draw 33 Fed 2H

9. API Well No.
30-025-41264

10. Field and Pool or Exploratory Area
Paduca; Delaware; N.

11. Country or Parish, State
Lea, NM

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Devon Energy Production Company, L.P.

3a. Address
333 West Sheridan, Oklahoma City, OK 73102

3b. Phone No. (include area code)
405-228-4248

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
330' FNL & 1345' FWL Unit C, Sec 33, T24S, R32E
357' FSL & 1974' FWL Unit N, Sec 33, T24S, R32E **PP: 505' FNL & 1585' FWL**

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

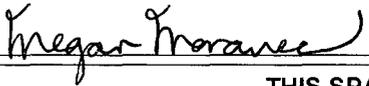
TYPE OF SUBMISSION	TYPE OF ACTION				
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off	
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other <u>Completion Report</u>	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon		
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal		

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

1/30/15-3/15/15: MIRU WL & PT. TIH & ran CBL, found TOC @ 3160'. TIH w/pump through frac plug and guns. Perf Delaware, 8761'-12847', total 540 holes. Frac'd 8761'-12847' in 15 stages. Frac totals 45,018 gals 7.5% NEFE Acid, 1,082,651# 100 Mesh, 1,499,012# Prem White 40/70. ND frac, MIRU PU, NU BOP, DO plugs @ CO to PBTD 12861.5'. CHC, ND BOP. RIH w/ ESP. RIH w/237 jts 2-7/8" L-80 tbg, set @ 7783.3'. TOP.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed) **Megan Moravec** Title **Regulatory Compliance Analyst**

Signature  Date **4/20/2015**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office 

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD
APR 21 2015
RECEIVED

FORM APPROVED
OMB NO. 1004-0137
Expires: July 31, 2010

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

1. Type of Well: Oil Well Gas Well Dry Other
 b. Type of Completion: New Well Work Over Deepen Plug Back Diff. Resrv.,
 Other: _____

2. Name of Operator: **Devon Energy Production Company, L.P.**

3. Address: **333 West Sheridan Ave, Oklahoma City, OK 73102** 3a. Phone No. (include area code): **405-228-4248**

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
 At surface: **330' FNL & 1345' FWL Unit C, Sec 33, T24S, R32E**
 At top prod. interval reported below:
 At total depth: **357' FSL & 1974' FWL Unit N, Sec 33, T24S, R32E**

14. Date Spudded: **11/22/14** 15. Date T.D. Reached: **12/8/14** 16. Date Completed: **3/15/15**
 D & A Ready to Prod.

17. Elevations (DF, RKB, RT, GL)*
 GL: **3515.3**

18. Total Depth: MD **12909** TVD **8428.6** 19. Plug Back T.D.: MD **12861.5** TVD _____

20. Depth Bridge Plug Set: MD _____ TVD _____

21. Type Electric & Other Mechanical Logs Run (Submit copy of each): **CBL / Gamma Ray / CCL**

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 Cementer Depth	No. of Sks. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17-1/2"	13-3/8" H-40	48#	0	900		840 sx CIC		0	150 sx
12-1/4"	9-5/8" HCK-55	40#	0	4650		1950 sx CIC		0	33 sx
8-3/4"	5-1/2" HCP-110	17#	0	12909	DV @ 4918.3	2295 sx CIC		500	

24. Tubing Record

Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)	Size	Depth Set (MD)	Packer Depth (MD)
2-7/8"	7783.3							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Delaware	8761	12847	8761 - 12847		540	open
B)						
C)						
D)						

26. Perforation Record

27. Acid, Fracture, Treatment, Cement Squeeze, etc.

Depth Interval	Amount and Type of Material
8761 - 12847	45,018 gals 7.5% NEFE Acid, 1,082,651# 100 Mesh, 1,499,012# Prem White 40/70

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	Flow
3/15/15	4/12/15	24	→	658	1070	2242				
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status		
	501psi	420psi	→				1626			

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	Flow
			→							
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)

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):

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.

31. Formation (Log) Markers

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
Delaware	4702			Delaware	4702
				Cherry Canyon	5626
				Brushy Canyon	7022
				Lwr Brushy Canyon	8440

32. Additional remarks (include plugging procedure):

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

- Electrical/Mechanical Logs (1 full set req'd.)
 Geologic Report
 DST Report
 Directional Survey
 Sundry Notice for plugging and cement verification
 Core Analysis
 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) Megan Moravec Title Regulatory Compliance Analyst
 Signature *Megan Moravec* Date 4/20/2015

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(Continued on page 3)

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(Form 3160-4, page 2)