

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

AUG 13 2015

Form C-104
Revised August 1, 2011

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

Submit one copy to appropriate District Office

RECEIVED

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
⁴ API Number 30-025-41976		³ Reason for Filing Code/ Effective Date NW / 7/7/15
⁵ Pool Name Bell Lake; Bone Spring, North	⁶ Pool Code 5150	
⁷ Property Code 313495	⁸ Property Name Hognose Viper 23 Fed	⁹ Well Number 2H

II. ¹⁰ Surface Location

UI or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	23	23S	33E		200	South	900	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
C	23	23S	33E		330	North	1980	West	Lea
¹² Lse Code F	¹³ Producing Method Code P	¹⁴ Gas Connection Date 7/7/15	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
92591	Western Refining Company, L.P. 6500 Trowbridge Drive El Paso, TX 79905	Oil
036785	DCP Midstream P.O. Box 50020 Midland, TX 79710-0020	Gas

IV. Well Completion Data

²¹ Spud Date	²² Ready Date	²³ TD	²⁴ PBDT	²⁵ Perforations	²⁶ DHC, MC
3/12/15	7/7/15	16163	16113	11524 - 16104	
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set		³⁰ Sacks Cement	
17-1/2"	13-3/8"	1445		1185 sx Cement; Circ 80 bbls	
12-1/4"	9-5/8"	5195		1805 sx Cement; Circ 162 bbls	
8-3/4"	5-1/2" + 7"	16163		1660 sx Cement; Circ 0	
	Tubing: 2-7/8"	10809			

V. Well Test Data

³¹ Date New Oil	³² Gas Delivery Date	³³ Test Date	³⁴ Test Length	³⁵ Tbg. Pressure	³⁶ Csg. Pressure
7/20/15	7/20/15	7/20/15	24 hrs	200 psi	50 psi
³⁷ Choke Size	³⁸ Oil	³⁹ Water	⁴⁰ Gas	⁴¹ Test Method	
	353 bbl	461 bbl	420 mcf		

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: *Lucretia Morris*
Printed name: Lucretia Morris
Title: Regulatory Compliance Analyst
E-mail Address: lucretia.morris@dvn.com
Date: 8/12/2015 Phone: 405-552-3903

OIL CONSERVATION DIVISION
Approved by: *[Signature]*
Title: Petroleum Engineer
Approval Date: 08/17/15

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

AUG 20 2015

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

AUG 13 2015

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

RECEIVED

5. Lease Serial No. BHL: NMNM121489

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

6. If Indian, Allottee or Tribe Name
 7. Unit or CA Agreement Name and No.

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

8. Lease Name and Well No. **Hognose Viper 23 Fed 2H**

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

9. AFI Well No. **30-025-41976**

4. Location of Well (Report location clearly and in accordance with Federal requirements)*
 At surface **200' FSL & 900' FWL Unit M, Sec 23, T23S, R33E**
 At top prod. interval reported below
 At total depth **330' FNL & 1980' FWL Unit C, Sec 23, T23S, R33E**

10. Field and Pool or Exploratory **Bell Lake; Bone Spring, North**
 11. Sec., T., R., M., on Block and Survey or Area **Sec 23, T23S, R33E**
 12. County or Parish **Lea** 13. State **NM**

14. Date Spudded **3/12/15** 15. Date T.D. Reached **3/30/15** 16. Date Completed **7/7/15**
 D & A Ready to Prod.

17. Elevations (DF, RKB, RT, GL)* **GL: 3682.1**

18. Total Depth: MD **16163** TVD **11235** 19. Plug Back T.D.: MD **16113** TVD
 20. Depth Bridge Plug Set: MD TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each) **Isolation Scanner - Cement Print - Gamma Ray / CBL IBC-SSLT-GR-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	Wl. (#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	1445		1185 sx Cement		0	80 bbls
12-1/4"	9-5/8" J-55, HCK-55	40#	0	5195		1805 sx Cement		0	162 bbls
8-3/4"	5-1/2" J-77 MCP-110, COC-110	17# + 29#	0	16163		1660 sx Cement		2500	

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"	10809							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) 2nd Bone Spring	11524	16104	11524 - 16104		519	open
B)						
C)						
D)						

26. Perforation Record

Depth Interval	Amount and Type of Material
11524 - 16104	18,396 gals 15% HCl Acid, 1,231,000# Okla #1 100 Mesh, 4,465,000# Ottawa Sand 30/50, 1,199,000# Ottawa Sand 20/40

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

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
7/7/15	7/20/15	24	→	353	420	461			Pump
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
	200psi	50psi	→				1189.8		

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
			→						
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
2nd Bone Spring	10968	11556		2nd Bone Spring	10968

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) Lucretia Morris Title Regulatory Compliance Analyst
 Signature *Lucretia Morris* Date 8/12/2015

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
AUG 13 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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	8. Well Name and No. HOGNOSE VIPER 23 FED 2H
2. Name of Operator DEVON ENERGY PRODUCTION CO Contact: LUCRETIA A MORRIS Email: Lucretia.Morris@dvn.com	9. API Well No. 30-025-41976
3a. Address 333 WEST SHERIDAN AVENUE OKLAHOMA CITY, OK 73102	10. Field and Pool, or Exploratory BELL LAKE; BONE SPRING N.
3b. Phone No. (include area code) Ph: 405-552-3303	11. County or Parish, and State LEA COUNTY, NM
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 23 T23S R33E SWSW 200FSL 900FWL	

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 recomplate 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 recomplate 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.)

(3/12/3/14/15) Spud @ 03:30. TD 17-1/2? hole @ 1450?. RIH w/ 32 jts 13-3/8? 48# H-40 ST&C csg, set @ 1445?. Lead w/ 860 sx Econocem cmt, yld 1.87 cu ft/sk. Tail w/ 325 sx Halcem, yld 1.34 cu ft/sk. Disp w/ 219 bbls 8.34 ppg water. Circ 80 bbls cmt to surf. PT BOPE @ 250/3000 psi, held each test for 10 min, OK. PT csg to 1211 psi, OK.

(3/17/15-3/19/15) TD 12-1/4? hole @ 5210?. RIH w/ 103 jts 9-5/8? 40# J-55 BTC csg and 20 jts 9-5/8? 40# HCK-55 BTC csg, set @ 5195.1?. Lead w/ 1410 sx Econocem HLC cmt, yld 1.87 cu ft/sk. Tail w/ 395 sx Halcem C, yld 1.33 cu ft/sk. Disp w/ 390 bbls FW. Circ 162 bbls cmt to surf. PT csg to 2765 psi for 30 min, OK.

(3/29/15-4/2/15) TD 8-3/4? hole @ 16163?. RIH w/ 118 jts 5-1/2? 17# CDC-HTQ csg and 241 jts 7? 29# HCP-110 BT csg, set @ 16163?. Lead w/ 540 sx Tuned Light cmt, yld 3.38 cu ft/sk. Tail w/ 1120 sx

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

**Electronic Submission #298190 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO LP, sent to the Hobbs**

Name (Printed/Typed) LUCRETIA A MORRIS

Title REGULATORY COMPLIANCE ANALYST

Signature (Electronic Submission)

Date 04/14/2015

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.

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

Additional data for EC transaction #298190 that would not fit on the form

32. Additional remarks, continued

Versacem, yld 1.23 cu ft/sk. Disp w/ 525 bbls 8.33 FW. RR @ 14:00.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICES AND REPORTS ON WELLS
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HOBBS OGD
REC'D
AUG 23 2015

5. Lease Serial No. **BHL: NMNM121489**

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE – Other instructions on page 2.

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

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
Hognose Viper 23 Fed 2H

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

9. API Well No.
30-025-41976

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

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

10. Field and Pool or Exploratory Area
Bell Lake; Bone Spring, North

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
200' FSL & 900' FWL Unit M, Sec 23, T23S, R33E
330' FNL & 1980' FWL Unit C, Sec 23, T23S, R33E

PP: 200' FSL & 900' FWL

11. Country or Parish, State
Lea, NM

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 Completion Report
	<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.)

4/30/15-7/7/15: MIRU WL & PT. TIH & ran CBL, found TOC @ 4800'. TIH w/pump through frac plug and guns. Perf 2nd Bone Spring, 11524'-16104', total 519 holes. Frac'd 11524'-16104' in 15 stages. Frac totals 18,396 gals 15% HCl acid, 1,231,000# Okla #1 100 Mesh sand, 4,465,000 Ottawa Sand 30/50, 1,199,000# Ottawa Sand 20/40. ND frac, MIRU PU, NU BOP, DO plugs & CO. CHC, FWB, ND BOP. RIH w/ 328 jts 2-7/8" L-80 tbg, set @ 10809'. TOP. RIH w/ ESP, Cont flowing ESP.

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

Name (Printed/Typed) **Lucretia Morris** Title **Regulatory Compliance Analyst**

Signature *Lucretia Morris* Date **8/12/2015**

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.