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

State of New Mexico
Energy, Minerals and Natural Resources

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

Form C-105
Revised August 1, 2011

1. WELL API NO. 30-025-42486
2. Type of Lease ☑ STATE ☐ FEE ☐ FED/INDIAN
3. State Oil & Gas Lease No.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

4. Reason for filing:

☑ **COMPLETION REPORT** (Fill in boxes #1 through #31 for State and Fee wells only)

☐ **C-144 CLOSURE ATTACHMENT** (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: Thistle Unit
6. Well Number: 72H

HOBBS OCD
SEP 29 2015
RECEIVED

7. Type of Completion: ☑ NEW WELL ☐ WORKOVER ☐ DEEPENING ☐ PLUGBACK ☐ DIFFERENT RESERVOIR ☐ 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: Triple X; Bone Spring

12. Location	Unit Ltr	Section	Township	Range	Lot	Feet from the	N/S Line	Feet from the	E/W Line	County
Surface:	O	27	23S	33E		330	South	2630	East	Lea
BH:	B	27	23S	33E		330	North	2627	East	Lea

13. Date Spudded	14. Date T.D. Reached	15. Date Rig Released	16. Date Completed (Ready to Produce)	17. Elevations (DF and RKB, RT, GR, etc.)
5/22/15	6/29/15	7/3/15	8/22/15	3667 GL

18. Total Measured Depth of Well	19. Plug Back Measured Depth	20. Was Directional Survey Made?	21. Type Electric and Other Logs Run
15490 MD, 10980 TVD	15437	Yes	Host Nat GR/Plat Exp-High Res Laterolog-Micro-CFL-HNGS/Caliper/Plat Exp-Comp Neutron-3 Det Litho-Density

22. Producing Interval(s), of this completion - Top, Bottom, Name: 11218-15421, Bone Spring

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#	1435	17-1/2"	1425 sx ClC; circ 60 bbls	
9-5/8"	40#	5228	12-1/4"	1835 sx ClC; circ 141 sx	
5-1/2" + 7"	17# + 29#	15480	8-3/4"	1715 sx ClH; circ 0	TOC @ 4916

24. LINER RECORD

SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN

25. TUBING RECORD

SIZE	DEPTH SET	PACKER SET
2-7/8" L-80	10091	

26. Perforation record (interval, size, and number): 11218 - 15421, total 490 holes

27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.

DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED
11218-15421	Acidize and frac in 14 stages. See detailed summary attached.

28. **PRODUCTION**

Date First Production	Production Method (Flowing, gas lift, pumping - Size and type pump)	Well Status (Prod. or Shut-in)
8/22/15	Pumping	Producing

Date of Test	Hours Tested	Choke Size	Prod'n For Test Period	Oil - Bbl	Gas - MCF	Water - Bbl.	Gas - Oil Ratio
9/4/15	24			426	480	414	1126.76

Flow Tubing Press.	Casing Pressure	Calculated 24-Hour Rate	Oil - Bbl.	Gas - MCF	Water - Bbl.	Oil Gravity - API - (Corr.)
160 psi	1450 psi					

29. Disposition of Gas (Sold, used for fuel, vented, etc.): Sold
30. Test Witnessed By:
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: Lucretia Morris Printed Name: Lucretia Morris Title: Regulatory Compliance Analyst Date: 9/28/2015

E-mail Address: lucretia.morris@dvn.com

OCT 07 2015

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

Southeastern New Mexico		Northwestern New Mexico	
2nd Bone Spring Sand - 11019			

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