

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> <b>1220 South St. Francis Dr.</b> <b>Santa Fe, NM 87505</b>	<b>Form C-105</b> Revised August 1, 2011  <b>1. WELL API NO.</b> <b>30-025-42381</b> <b>2. Type of Lease</b> <input checked="" type="checkbox"/> STATE <input type="checkbox"/> FEE <input type="checkbox"/> FED INDIAN <b>3. State Oil &amp; Gas Lease No.</b>
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**WELL COMPLETION OR RECOMPLETION REPORT AND LOG**

<b>4. Reason for filing:</b> <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)	<b>5. Lease Name or Unit Agreement Name:</b> <b>HOBBS OCD Thistle Unit</b> <b>6. Well Number:</b> <b>66H</b> <div style="text-align: right; font-size: 1.2em; color: blue; font-weight: bold;">OCT 01 2015</div>
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<b>7. Type of Completion:</b> <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	<div style="font-size: 1.2em; color: blue; font-weight: bold;">RECEIVED</div>
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<b>8. Name of Operator:</b> <b>Devon Energy Production Company, L.P.</b>	<b>9. OGRID:</b> <b>6137</b>
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<b>10. Address of Operator:</b> <b>333 West Sheridan Avenue, Oklahoma City, OK 73102</b>	<b>11. Pool name or Wildcat:</b> <b>Triple X; Bone Spring</b>
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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>	<b>M</b>	<b>34</b>	<b>23S</b>	<b>33E</b>		<b>81</b>	<b>South</b>	<b>1250</b>	<b>West</b>	<b>Lea</b>
<b>BH:</b>	<b>L</b>	<b>27</b>	<b>23S</b>	<b>33E</b>		<b>2450</b>	<b>South</b>	<b>1250</b>	<b>West</b>	<b>Lea</b>

<b>13. Date Spudded:</b> <b>3/31/15</b>	<b>14. Date T.D. Reached:</b> <b>4/28/15</b>	<b>15. Date Rig Released:</b> <b>5/2/15</b>	<b>16. Date Completed (Ready to Produce):</b> <b>8/28/15</b>	<b>17. Elevations (DF and RKB, RT, GR, etc.):</b> <b>3633 GL</b>
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<b>18. Total Measured Depth of Well:</b> <b>17110 MD, 9659 TVD</b>	<b>19. Plug Back Measured Depth:</b> <b>17054</b>	<b>20. Was Directional Survey Made?:</b> <b>Yes</b>	<b>21. Type Electric and Other Logs Run:</b> <b>Isolation Scanner / Cement Print / Gamma Ray</b>
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<b>22. Producing Interval(s), of this completion - Top, Bottom, Name:</b> <b>9704-16932, Bone Spring</b>	
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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
<b>13-3/8"</b>	<b>48#</b>	<b>1349</b>	<b>17-1/2"</b>	<b>1000 sx Cement; circ 210 sx</b>	
<b>9-5/8"</b>	<b>40#</b>	<b>4977</b>	<b>12-1/4"</b>	<b>2400 sx C/C; circ 80 bbls</b>	
<b>5-1/2" + 7"</b>	<b>17# + 29#</b>	<b>17105</b>	<b>8-3/4"</b>	<b>2585 sx Cement; circ 0</b>	

24. LINER RECORD				25. TUBING RECORD			
SIZE	TOP	BOTTOM	SACKS CEMENT	SCREEN	SIZE	DEPTH SET	PACKER SET
					<b>2-7/8" L-80</b>	<b>9033</b>	

<b>26. Perforation record (interval, size, and number):</b> <b>9704 - 16932, total 936 holes</b>	<b>27. ACID, SHOT, FRACTURE, CEMENT, SQUEEZE, ETC.:</b> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>DEPTH INTERVAL</th> <th>AMOUNT AND KIND MATERIAL USED</th> </tr> <tr> <td><b>9704-16932</b></td> <td><b>Acidize and frac in 26 stages. See detailed summary attached.</b></td> </tr> </table>	DEPTH INTERVAL	AMOUNT AND KIND MATERIAL USED	<b>9704-16932</b>	<b>Acidize and frac in 26 stages. See detailed summary attached.</b>
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<b>9704-16932</b>	<b>Acidize and frac in 26 stages. See detailed summary attached.</b>				

**28. PRODUCTION**

<b>Date First Production:</b> <b>8/28/15</b>	<b>Production Method (Flowing, gas lift, pumping - Size and type pump):</b> <b>Flowing</b>	<b>Well Status (Prod. or Shut-in):</b> <b>Producing</b>					
<b>Date of Test:</b> <b>9/19/15</b>	<b>Hours Tested:</b> <b>24</b>	<b>Choke Size:</b> 	<b>Prod'n For Test Period:</b> 	<b>Oil - Bbl:</b> <b>862</b>	<b>Gas - MCF:</b> <b>1439</b>	<b>Water - Bbl:</b> <b>2147</b>	<b>Gas - Oil Ratio:</b> <b>1669.37</b>
<b>Flow Tubing Press.:</b> <b>960 psi</b>	<b>Casing Pressure:</b> <b>0 psi</b>	<b>Calculated 24-Hour Rate:</b> 	<b>Oil - Bbl:</b> 	<b>Gas - MCF:</b> 	<b>Water - Bbl:</b> 	<b>Oil Gravity - API - (Corr.):</b> 	

<b>29. Disposition of Gas (Sold, used for fuel, vented, etc.):</b> <b>Sold</b>	<b>30. Test Witnessed By:</b> 
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<b>31. List Attachments:</b> <b>Directional Survey, Logs</b>	
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<b>32. If a temporary pit was used at the well, attach a plat with the location of the temporary pit.</b>	
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<b>33. If an on-site burial was used at the well, report the exact location of the on-site burial:</b> 	<b>Latitude</b> _____ <b>Longitude</b> _____ <b>NAD 1927 1983</b>
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*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*

<b>Signature:</b>	<b>Printed Name:</b> Lucretia Morris	<b>Title:</b> Regulatory Compliance Analyst	<b>Date:</b> 9/30/2015
<b>E-mail Address:</b> lucretia.morris@dvn.com			

OCT 22 2015

