

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

HOBBS OCD
NOV 19 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

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 / 10/22/15
⁴ API Number 30-025-41854	⁵ Pool Name WC-025 G-06 S223421L; Bone Spring	⁶ Pool Code 97922
⁷ Property Code 30863	⁸ Property Name Gaucho Unit	⁹ Well Number 17H

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
P	19	22S	34E		200	South	420	East	Lea

¹¹ Bottom Hole Location

UL or lot no. B	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
	19	22S	34E		321	North	2260	East	Lea

¹² Lse Code F	¹³ Producing Method Code F	¹⁴ Gas Connection Date 10/22/15	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
174238	Enterprise 201 Park Avenue, Ste 1600 Oklahoma City, OK 73102	Oil
024650	Targa Permian, LP 1000 Louisiana, Ste 4300 Houston, TX 77002	Gas

IV. Well Completion Data

²¹ Spud Date 7/31/15	²² Ready Date 10/22/15	²³ TD 15260	²⁴ PBSD 15213	²⁵ Perforations 10700 - 15166	²⁶ DHC, MC
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set		³⁰ Sacks Cement	
17-1/2"	13-3/8"	1854		1610 sx CIC; Circ 200 bbls	
12-1/4"	9-5/8"	5065		3050 sx CIH; Circ 0	
8-3/4"	5-1/2"	15254		2510 sx CIH; Circ 0	
	Tubing: 2-7/8"	10021			

V. Well Test Data

³¹ Date New Oil 11/10/15	³² Gas Delivery Date 11/10/15	³³ Test Date 11/10/15	³⁴ Test Length 24 hrs	³⁵ Tbg. Pressure 225 psi	³⁶ Csg. Pressure 700 psi
³⁷ Choke Size	³⁸ Oil 639 bbl	³⁹ Water 924 bbl	⁴⁰ Gas 863 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: *Lucretia Morris*
Printed name: Lucretia Morris
Title: Regulatory Compliance Analyst
E-mail Address: lucretia.morris@dvn.com
Date: 11/18/2015 Phone: 405-552-3303

OIL CONSERVATION DIVISION
Approved by: *[Signature]*
Title: Petroleum Engineer
Approval Date: 11/24/15

NOV 30 2015

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD

NOV 19 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.
NMNM66272

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
GAUCHO UNIT 17H

9. API Well No.
30-025-41854

10. Field and Pool, or Exploratory
WC025 G06 S223421L; B.S.

11. County or Parish, and State
LEA 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 CO** Contact: **LUCRETIA MORRIS**
Email: **Lucretia.Morris@dvn.com**

3a. Address **333 WEST SHERIDAN
OKLAHOMA CITY, OK 73102-5015**
3b. Phone No. (include area code)
Ph: **405-552-3303**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 19 T22S R34E SESE 200FSL 420FEL

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 recompleate 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 recompleation 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.)

(7/31/15-8/5/15) Spud @ 23:00. TD 17-1/2? hole @ 1866?. RIH w/ 45 jts 13-3/8? 54.5# K-55 BT csg, set @ 1853.9?. Lead w/ 1065 sx CIC, yld 1.74 cu ft/sk. Tail w/ 545 sx CIC, yld 1.34 cu ft/sk. Circ 200 bbbs cmt to surf. PT BOPE @ 250/3000 psi. PT top drive valves, FOSV, IBOP and standpipe back to pumps @ 250/5000 psi, held each test for 10 min, OK.

(8/9/15-8/12/15) TD 12-1/4? hole @ 5075?. RIH w/ 114 jts 9-5/8? 40# HCK-55 BTC csg, set @ 5065.4?. 1st stage cmt lead w/ 200 sx CIH, yld 1.98 cu ft/sk. Tail w/ 270 sx CIH, yld 1.18 cu ft/sk. Disp & land plug. Drop bomb & open DV Tool, set btm @ 3432.5?. 2nd stage cmt lead w/ 2180 sx CIH, yld 1.98 cu ft/sk. Tail w/ 400 sx CIH, yld 1.19 cu ft/sk. Disp & bump plug. PT csg to 500 psi for 15 min, OK. Drill out DV Tool. PT csg to 2750 psi, held for 30 min, OK.

(8/27/15-8/30/15) TD 8-3/4? hole @ 15260?. RIH w/ 347 jts 5-1/2? 17# P110RY DWC/C Plus csg, set @

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

**Electronic Submission #319190 verified by the BLM Well Information System
For DEVON ENERGY PRODUCTION CO LP, sent to the Hobbs**

Name (Printed/Typed) LUCRETIA MORRIS	Title REGULATORY COMPLIANCE ANALYST
Signature (Electronic Submission)	Date 10/08/2015

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 #319190 that would not fit on the form

32. Additional remarks, continued

15254?. Lead w/ 1230 sx CIH, yld 2.31 cu ft/sk. Tail w/ 1280 sx CIH, yld 1.22 cu ft/sk. Disp w/ 354 bbls 8.33 ppg FW. RR @ 00:00.

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

HOBBS OCD
NOV 19 2015
RECEIVED

FORM APPROVED
OMB No. 1004-0137
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. **BHL: NMNM066272**

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.
NMNM94480X

8. Well Name and No.
Gaicho Unit 17H

9. API Well No.
30-025-41854

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

10. Field and Pool or Exploratory Area
WC-025 G-06 S223421L; Bone Spring

4. Location of Well (Footage, Sec., T.R.M., or Survey Description)
200' FSL & 420' FEL Unit P, Sec 19, T22S, R34E
321' FNL & 2260' FEL Unit B, Sec 19, T22S, R34E **PP: 70' FSL & 1930' FEL**

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/BLA. 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.)

9/8/15-10/22/15: MIRU WL & PT. TIH & ran CBL. TIH w/pump through frac plug and guns. Perf Bone Spring 10700'-15166', total 525 holes. Frac'd 10700'-15166' in 15 stages. Frac totals 17,010 gals 15% HCl Acid, 780,000# Ottawa Sand 40/70, 3,405,000# Ottawa Sand 30/50 & 2,585,000# TerraProp 30/50. ND frac, MIRU PU, NU BOP, DO plugs & CO to PBDT 15213'. CHC, FWB, ND BOP. RIH w/ 310 jts 2-7/8" L-80 tbg, set @ 10020.7'. TOP.

14. I hereby certify that the foregoing is true and correct.
Name (Printed/Typed) **Lucretia Morris**
Title **Regulatory Compliance Analyst**
Signature *Lucretia Morris*
Date **11/18/2015**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date _____
Office _____

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.

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
NOV 19 2015

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

RECEIVED

5. Lease Serial No. BHL: NMNM066272

1a. 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

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

7. Unit or CA Agreement Name and No.
NMNM94480X

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

8. Lease Name and Well No.
Gaucho Unit 17H

4. Location of Well (Report location clearly and in accordance with Federal requirements)*

9. AFI Well No.
30-025-41854

At surface
200' FSL & 420' FEL Unit P, Sec 19, T22S, R34E

10. Field and Pool or Exploratory
WC-025 G-06 S223421L; Bone Spring

At top prod. interval reported below

11. Sec., T., R., M., on Block and Survey or Area
Sec 19, T22S, R34E

At total depth 321' FNL & 2260' FEL Unit B, Sec 19, T22S, R34E

12. County or Parish 13. State
Lea NM

14. Date Spudded 7/31/15 15. Date T.D. Reached 8/2/15 16. Date Completed 10/22/15
 D & A Ready to Prod.

17. Elevations (DF, RKB, RT, GL)*
GL: 3445

18. Total Depth: MD 15260 TVD 10582 19. Plug Back T.D.: MD 15213 TVD

20. Depth Bridge Plug Set: MD TVD

21. Type Electric & Other Mechanical Logs Run (Submit copy of each)

Gamma Ray / CBL / 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	Wt. (#/ft.)	Top (MD)	Bottom (MD)	Stage Cementer Depth	No. of Sk. & Type of Cement	Slurry Vol. (BBL)	Cement Top*	Amount Pulled
17-1/2"	13-3/8" K-55	54.5#	0	1854		1610 sx CIC		0	200 bbls
12-1/4"	9-5/8" HCK-55	40#	0	5065	DV @ 3433	3050 sx CIH		0	
8-3/4"	5-1/2" P110RY	17#	0	15254		2510 sx CIH		125	

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"	10021							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Bone Spring	10700	15166	10700 - 15166		525	open
B)						
C)						
D)						

26. Perforation Record

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

Depth Interval	Amount and Type of Material
10700 - 15166	17,010 gals 15% HCl Acid, 780,000# Ottawa Sand 40/70, 3,405,000# Ottawa Sand 30/50, 2,585,000# TerraProp 30/50

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
10/22/15	11/10/15	24	→	639	863	924			Flow
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas/Oil Ratio	Well Status	
	225psi	700psi	→				1350.548		

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.

Formation	Top	Bottom	Descriptions, Contents, etc.	Name	Top
					Meas. Depth
Bone Spring	10187			2nd Bone Spring SS	10187

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.

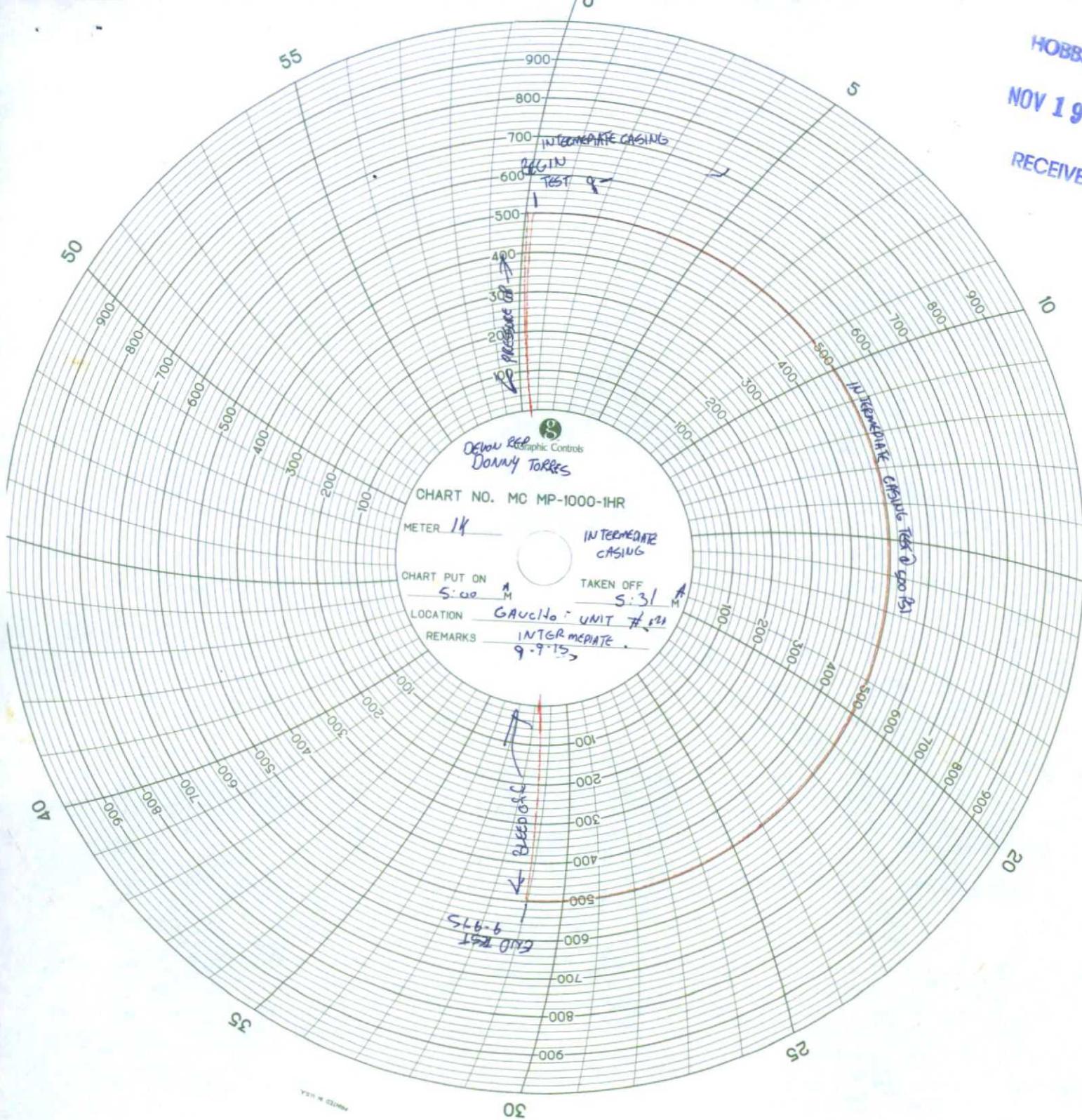
34. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records (see attached instructions)*

Name (please print) Lucretia Morris Title Regulatory Compliance Analyst

Signature *Lucretia Morris* Date 11/18/2015

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.

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DEVON REP
DONNY TORRES
CHART NO. MC MP-1000-1HR
METER 14
CHART PUT ON 5:00 AM
TAKEN OFF 5:31 AM
LOCATION GAUCHO UNIT #121
REMARKS INTERMEDIATE 9-9-15

BLEED OFF

INTERMEDIATE CASING BLEED TEST @ 500 PSI

INTERMEDIATE CASING
BEGIN TEST 9-

END TEST 9-9-15

