

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

Form C-104  
Revised August 1, 2011

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

NOV 04 2015

RECEIVED

AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator name and Address Devon Energy Production Company, L.P. 333 West Sheridan, Oklahoma City, OK 73102		<sup>2</sup> OGRID Number 6137
<sup>4</sup> API Number 30-025-42693		<sup>3</sup> Reason for Filing Code/ Effective Date NW / 10/4/15
<sup>5</sup> Pool Name Lusk; Bone Spring	<sup>6</sup> Pool Code 41440	
<sup>7</sup> Property Code 313577	<sup>8</sup> Property Name Taylor Draw 7 Fed Com	<sup>9</sup> Well Number 2Y

II. <sup>10</sup> 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	7	19S	32E		665	South	400	East	Lea

<sup>11</sup> 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
4	7	19S	32E		417	South	305	West	Lea

<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date 10/4/15	<sup>15</sup> C-129 Permit Number	<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date
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III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID	<sup>19</sup> Transporter Name and Address	<sup>20</sup> O/G/W
278421	Holly-Frontier 10 Desta Drive, Ste 350W Midland, TX 79710	Oil
036785	DCP Midstream P.O. Box 50020 Midland, TX 79710-0020	Gas

IV. Well Completion Data

<sup>21</sup> Spud Date	<sup>22</sup> Ready Date	<sup>23</sup> TD	<sup>24</sup> PBSD	<sup>25</sup> Perforations	<sup>26</sup> DHC, MC
7/20/15	10/4/15	13845	13794	9363 - 13784	

<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement
17-1/2"	13-3/8"	896	895 sx CIC; Circ 428 sx
12-1/4"	9-5/8"	4527	2694 sx CIC; Circ 1225 sx
8-3/4"	5-1/2"	13845	2605 sx CIC; Circ 279 sx
	Tubing: 2-7/8"	8387	

V. Well Test Data

<sup>31</sup> Date New Oil	<sup>32</sup> Gas Delivery Date	<sup>33</sup> Test Date	<sup>34</sup> Test Length	<sup>35</sup> Tbg. Pressure	<sup>36</sup> Csg. Pressure
10/23/15	10/23/15	10/23/15	24 hrs	312 psi	114 psi

<sup>37</sup> Choke Size	<sup>38</sup> Oil	<sup>39</sup> Water	<sup>40</sup> Gas	<sup>41</sup> Test Method
	350 bbl	454 bbl	279.9 mcf	

<sup>42</sup> 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@dvn.com  
Date: 11/3/2015

OIL CONSERVATION DIVISION  
Approved by: *[Signature]*  
Title: Petroleum Engineer  
Approval Date: 12/14/15

E-PERMITTING - - New Well \_\_\_\_\_  
Comp PM P&A \_\_\_\_\_ TA \_\_\_\_\_  
CSNG PM Loc Chng \_\_\_\_\_  
ReComp \_\_\_\_\_ Add New Well \_\_\_\_\_  
Cancl Well \_\_\_\_\_ Create Pool \_\_\_\_\_

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UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

WELL COMPLETION OR RECOMPLETION REPORT AND LOG

RECEIVED

5. Lease Serial No. **BHL: NMNM104685**

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. **Taylor Draw 7 Fed Com 2Y**

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

9. AFI Well No. **30-025-42693**

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

At surface **665' FSL & 400' FEL Unit P, Sec 7, T19S, R32E**

At top prod. interval reported below

At total depth **417' FSL & 305' FWL Lot 4, Sec 7, T19S, R32E**

10. Field and Pool or Exploratory **Lusk; Bone Spring**

11. Sec., T., R., M., on Block and Survey or Area **Sec 7, T19S, R32E**

12. County or Parish **Lea** 13. State **NM**

14. Date Spudded **7/20/15** 15. Date T.D. Reached **8/8/15** 16. Date Completed **10/4/15** 17. Elevations (DF, RKB, RT, GL)\* **GL: 3612.1**

D & A  Ready to Prod.

18. Total Depth: MD **13845** 19. Plug Back T.D.: MD **13794** 20. Depth Bridge Plug Set: MD **TVD 9253.3** 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" K-55	54.5#	0	896		895 sx CIC		0	428 sx
12-1/4"	9-5/8" HCK-55	40#	0	4527	DV @ 2777	2694 sx CIC		0	1225 sx
8-3/4"	5-1/2" HCP-110	17#	0	13845	DV @ 5340.4	2605 sx CIC		0	279 sx

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"	8387							

25. Producing Intervals

Formation	Top	Bottom	Perforated Interval	Size	No. Holes	Perf. Status
A) Bone Spring	9363	13784	9363 - 13784		640	open
B)						
C)						
D)						

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

Depth Interval	Amount and Type of Material
9363 - 13784	9,828 gals 15% HCl Acid, 6,653,000# 20/40 Ottawa Sand

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
10/4/15	10/23/15	24	→	350	279.9	454			Pump
Choke Size	Tbg. Press. Flwg. SI	Csg. Press.	24 Hr. Rate	Oil BBL	Gas MCF	Water BBL	Gas Oil Ratio	Well Status	
	312psi	114psi	→				799.7		

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
Bone Spring	6987			Rustler	829
				Top of Salt	912
				Yates	2585
				Capitan	2875
				Delaware	5361
			Bone Spring	6987	

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 11/3/2015

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

NOV 04 2015

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: NMMNM104685**

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.  
**Taylor Draw 7 Fed Com 2Y**

2. Name of Operator

**Devon Energy Production Company, L.P.**

9. API Well No.  
**30-025-42693**

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  
**Lusk; Bone Spring**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**665' FSL & 400' FEL Unit P, Sec 7, T19S, R32E  
417' FSL & 305' FWL Lot 4, Sec 7, T19S, R32E**

**PP: 448' FSL & 226' 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 <b>Completion Report</b>	
	<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.)

8/18/15-10/4/15: MIRU WL & PT. TIH & ran CBL, found ETOC @ 1590'. TIH w/pump through frac plug and guns. Perf Bone Spring, 9363'-13784', total 640 holes. Frac'd 9363'-13784' in 16 stages. Frac totals 9,828 gals 15% HCl Acid, 6,653,000# 20/40 Ottawa Sand. ND frac, MIRU PU, DO plugs & CO to PBTD 13794'. CHC, FWB. RIH w/280 jts 2-7/8" L-80 tbg, set @ 8387'. TOP.

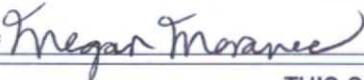
14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)

**Megan Moravec**

Title **Regulatory Compliance Analyst**

Signature



Date **11/3/2015**

**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.

(Instructions on page 2)