

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

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**

<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>3</sup> Reason for Filing Code/ Effective Date NW / 1/16/20
<sup>4</sup> API Number 30-025-44990	<sup>5</sup> Pool Name Draper Mill; Bone Spring	<sup>6</sup> Pool Code 96392
<sup>7</sup> Property Code	<sup>8</sup> Property Name Flagler 8 Fed	<sup>9</sup> Well Number 14H

**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
M	8	25S	33E		380	South	570	West	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
D	8	25S	33E		101	North	435	West	LEA

<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code F	<sup>14</sup> Gas Connection Date 1/16/20	<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
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**

<sup>21</sup> Spud Date	<sup>22</sup> Ready Date	<sup>23</sup> TD	<sup>24</sup> PBTD	<sup>25</sup> Perforations	<sup>26</sup> DHC, MC
8/14/19	1/16/20	15,702'	15,686'	11,168' - 15,366'	
<sup>27</sup> Hole Size	<sup>28</sup> Casing & Tubing Size	<sup>29</sup> Depth Set	<sup>30</sup> Sacks Cement		
17.5"	13.375"	1155'	1190 sx CIC; Circ 499 sx		
12.25"	9.625"	5016'	1375 sx CIH; Circ 591 sx		
8.75" & 8.5"	5.5"	15,690'	1590 sx CIPOZ MIX; Circ 0		
	Tubing: 2-7/8"	10,687'			

**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
1/16/20	1/16/20	2/5/20	24 hrs	psi	psi
<sup>37</sup> Choke Size	<sup>38</sup> Oil	<sup>39</sup> Water	<sup>40</sup> Gas	<sup>41</sup> Test Method	
	695 bbl	1995 bbl	965 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: <i>Rebecca Deal</i> Printed name: Rebecca Deal Title: Regulatory Analyst E-mail Address: Rebecca.Deal@devon.com Date: 2/13/2020	OIL CONSERVATION DIVISION Approved by: <i>P. Maers</i> Title: L.M. Approval Date: 2/26/2020
	Phone: 405-228-8429

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.*

**HOBBS OCD**

5. Lease Serial No.  
NMNM97151

6. If Indian, Allottee or Tribe Name

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

**SUBMIT IN TRIPLICATE - Other instructions on page 2**  
**FEB 19 2020**

1. Type of Well  
 Oil Well  Gas Well  Other

8. Well Name and No.  
FLAGLER 8 FED COM 30H

2. Name of Operator  
DEVON ENERGY PRODUCTION COMPANY  
Contact: REBECCA DEAL  
Email: Rebecca.Deal@dvn.com

**RECEIVED**

9. API Well No.  
30-025-44996

3a. Address  
333 WEST SHERIDAN AVE  
OKLAHOMA CITY, OK 73102

3b. Phone No. (include area code)  
Ph: 405-228-8429

10. Field and Pool or Exploratory Area  
RED HILLS; UBS SHALE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 8 T25S R33E Mer NMP SWSW 380FSL 620FWL

11. County or Parish, State  
LEA COUNTY, 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"/> Hydraulic Fracturing	<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 Hydraulic Fracture
	<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.

Completion Ops Summary

11/24/2019-1/16/2020: MIRU WL & PT csg for 30 mins, OK. TIH & ran CBL, found TOC @ 3850'. TIH w/pump through frac plug and guns. Perf Bone Spring, 9560'-14,118'. Frac totals 9,066,803# prop, 240 bbl acid. ND frac, MIRU PU, NU BOP, DO plugs & CO to PBDT 14,128'. CHC, FWB, ND BOP. RIH w/ 270 jts 2-7/8" L-80 tubing, set @ 9009'. TOP.

14. I hereby certify that the foregoing is true and correct.  
**Electronic Submission #503288 verified by the BLM Well Information System For DEVON ENERGY PRODUCTION COMPAN, sent to the Hobbs**

Name (Printed/Typed) REBECCA DEAL	Title REGULATORY COMPLIANCE PROFESSI
Signature (Electronic Submission)	Date 02/13/2020

**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)

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

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5. Lease Serial No.  
NMNM97151

6. If Indian, Allottee or Tribe Name

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

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. FLAGLER 8 FED COM 14H
2. Name of Operator DEVON ENERGY PRODUCTION COMPANY Contact: REBECCA DEAL Email: Rebecca.Deal@dvn.com		9. API Well No. 30-025-44990
3a. Address 333 WEST SHERIDAN AVE OKLAHOMA CITY, OK 73102	3b. Phone No. (include area code) Ph: 405-228-8429	10. Field and Pool or Exploratory Area DRAPER MILL; BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 8 T25S R33E Mer NMP SWSW 380FSL 570FWL		11. County or Parish, State LEA COUNTY, NM

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**Completion Ops Summary**

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Name (Printed/Typed) REBECCA DEAL	Title REGULATORY COMPLIANCE PROFESSI
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