State of New Mexico

Energy, Minerals & Natural Resources Department

Form C-104

Revised February 10, 1994 Instructions on back

PO Box 1980, Hobbs, NM 88241-1980

PO Drawer DD, Artesia, NM 88211-0719 District III

OIL CONSERVATION DIVISION
Submit to Appropriate District Office

Santa Fe, NM 87504-2088

PO Box 2088

5 Copies

1000 Rio Brazos Rd., Aztec, NM 87410

AMENDED REPORT

District 1v PO Box 2088, S	Santa Fe, N	IM 87504-2	2088								U	37			
I.				LOW	ABLI	E AND	AUT	HORIZA	ATIC	ON TO	TRA	NSPOR	T		
Operator Name and Address									136025 Number						
DEVON ENERGY OPERATING CORPORATION (DEOC)								-							
20 North Broadway, Suite 1500 Oklahoma City, Oklahoma 73102								Reason for Filing Code CHANGE OF OPERATOR							
API Number Grayburg Jack															
Gray															
['] Prope LC 029548-	erty Code	C. A	Property Nam					•				Well Number			
II "Su	rface L	ocation			-										
UI or lot no.	<u> </u>		Range					South Line	Feet from the		East/West Line		County		
<u> </u>	18 T-17S		R31E		1650'		N		1650'		E		[EDD]	EDDY CO.,NM	
Bottom Hole Loc				- 		In a distribution		S. 10 17:		Feet from the		East/West Line		0	
UI or lot no.	Section	Township	Range					South Line						County	
Lse Code Producing Method C			Code	ode 14 15				C-129 Permit Number		¹⁶ C-129 Effective		re Date C-129 Expiration D		Expiration Date	
III. Oil a	and Ga	s Trans	porters												
Transporter			19					" POD	²¹ O/G		POD ULSTR L				
OGRID 022628			Texas-New Mexico Pipe				eline	23068	10	0	1	and I	Description	1	
			P. O. Box 2528 Hobbs, NM 88241				Ŀ	2306916							
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0050	P. O.					23068:		G				;			
			Hobbs			0	L	23069	130						
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IV. Proc		Water					24							· · · · ·	
230	# POD 49E	0					PODU	JLSTR Locatio	on and	Description					
V. Well	Comp	letion D	ata												
* Spu	Ready Date 27							²¹ PBTD			Perforations				
* Hole Size				31					¹² Dept	h Set		33 Sacks Cement			
												Post ID3			
											11-4			00	
	 .											ا ن ا	9 ()1		
VI. Wel	l Test	Data						-		•					
			Gas Delivery Date Test Date				;	" Test Len	igth		³⁰ Tbg. Pressure			See Csg. Pressure	
" Choke Size			41 Oil 42 Water			Water	43 (is			" AOF		46 Test Method	
"I hereby certif	fy that the n	ules of the O	ril Conserva	tion divisi	on have	been com	plied						•		
with and that t								O	IL C	ONSER	VAT	ION DIV	ISION		
knowledge and	d belief.	Will	Duce	Lion		•									
Signature:								Approved by Title: SUPERVISOR DISTRICT II							
Printed Name: J. M/DUCKWORTH Title: OPERATION MANAGER								Approval Date: NOV 0 8 1994							
	22/94			Phone: 405-552-4530				HUT O DOI							
		operator fill				me of the	previous	operator		_					
SC		Operator S		NIVIT IN	,		Printed N	Name				Title		Date	
		TRANS	77.55	المحرسين		J. M. D		VORTH			OP	ERATION	Γ	9/22/94	

لهاد درده ووقعها دائيات بالد