## District I

PO Box 1980, Hobbs, NM 88241-1980

District II

## State of New Mexico

Inergy, Minerals & Natural Resources Department

Instructions on back

| PO Drawer Di                                   | D, Artesia             | ., NM 88211-0   | J <b>71</b> 9   | 9 OIL CONSERVATION DIVISION |                    |                     |                           |          |                                     |                | Submit to                   | Appropriate District Office |  |
|--|------------------------|-----------------|---|-----------------------------|--------------------|---------------------|---------------------------|----------|-------------------------------------|----------------|-----------------------------|-----------------------------|--|
| District III                                   |                        |                 |   | PO Box 2088                 |                    |                     |                           |          |                                     |                |                             | 5 Copies                    |  |
| 1000 Rio Braz                                  | os Rd., Az             | ztec, NM 874    | Santa Fe, NM 87504-2088   |                             |                    |                     |                           |          |                                     |                |                             | -                           |  |
| District IV                                    | _                      |                 |   |                             |                    |                     |                           |          |                                     |                |                             | AMENDED REPORT              |  |
| PO Box 2088, S                                 |                        |                 |   | OMA D                       | * ***              | ΨY                  | TTTAN                     | 4 mm     | TOTA MA                             |                |                             |                             |  |
| 1.   | KEQ                    |                 |   |                             | LE AND A           | .U                  | THOK                      | ZAII     | ION TO TR                           |                |                             |                             |  |
| Devon E  | nergy C                | Operation (     | tor Name and<br>(Nevada)  |                             |                    |                     |                           |          | 00613                               |                | Number                      |                             |  |
|  |                        | Suite 1500      |   | , increased                 |                    |                     |                           |          | <sup>3</sup> Reason for Filing Code |                |                             |                             |  |
| Oklahom  | na City,               | OK 73102        |   | 8260                        |                    |                     |                           |          | CO Effective 10-01-96               |                |                             |                             |  |
| l .  | Number                 |                 |   | <sup>5</sup> Pool Name      |                    |                     |                           |          |                                     |                | 4 Pc                        | ool Code                    |  |
| 30-015-28004<br>Property Code                  |                        |                 | Catclaw Draw De   |                             |                    |                     |                           |          |                                     |                |                             | 10500                       |  |
| # 3446   |                        |                 | <sup>6</sup> Property Name Cactus State                         |                             |                    |                     |                           |          |                                     | I              | w                           | Vell Number 4               |  |
| II "Sur  | rface L                | ocation         |   |                             |                    |                     |                           |          |                                     |                |                             | 7                           |  |
| UI or lot no.                                  | Section                | Township        | Range Lot.Idn Feet from the North/South Line Feet from the East |                             |                    |                     |                           |          |                                     |                | West Line                   | County                      |  |
| K  |                        | 218             | 26E   |                             | 2100               | $\perp$             | South                     | a        | 1900                                | Wes            |                             | Eddy                        |  |
| "Bottom Hole Location                          |                        |                 |   |                             |                    |                     |                           |          |                                     |                |                             | <u> </u>                    |  |
| UI or lot no.                                  | Section                | Township        | Range   | Lot.Idn                     | Feet from the      | North/South         |                           |          | e Feet from the                     |                | West Line                   | County                      |  |
| 12 Lse Code                                    | 13 Produc              | cing Method C   | ode '   | 14 Gas Conne                | ction Date         | 15 C                | C-129 Permi               | t Number | er 16 C-129 E                       | Effectiv       | re Date                     | C-129 Expiration Date       |  |
| III. Oil a                                     | ınd Ga                 | s Transpo       | orters  |                             |                    | _                   |                           |          |                                     |                |                             |                             |  |
| <sup>16</sup> Trans                            | sporter                |                 |   | Transporter                 |                    |                     | 20 J                      | POD      | <sup>21</sup> O/G                   | Π              |                             | LSTR Location               |  |
| 1386   |                        |                 | Amoco   | Pipeline IC                 |                    | _                   | 085501                    |          | 0 0                                 | ├-             |                             | escription<br>16-21S-26E    |  |
| <u></u>  |                        |                 | 502 N. V  | West Aven                   | nue                |                     |                           | 00000    |                                     |                | Eddy Co., NM                |                             |  |
|  |                        |                 | Levellan  | ıd, Texas                   | 79336-3914         |                     |                           |          |                                     | İ              |                             | - ,                         |  |
| 1478   | 800                    |                 | Catclaw   | Pipeline, I                 | Inc.               | —                   | (                         | 0855030  | 0 G                                 | <del> </del>   | C Sec                       | 16-21S-26E                  |  |
|  |                        |                 | 20 N. Br  | roadway Si                  | Suite 1500         | ~~                  |                           |          |                                     |                |                             | Co., NM                     |  |
|  |                        |                 | Oklanon   | na City, ∪                  | OK 73102-826       | 60                  |                           |          |                                     |                | OEC                         |                             |  |
|  |                        |                 |   |                             |                    |                     |                           |          |                                     | 1              | M'SO                        |                             |  |
|  |                        |                 |   |                             |                    |                     |                           |          |                                     |                | OCT                         | = <sub>1</sub> 1996         |  |
|  |                        |                 |   |                             |                    |                     |                           |          |                                     | <del>  _</del> | <u>-</u>                    |                             |  |
|  |                        |                 |   |                             |                    |                     |                           |          |                                     | (              | _                           | ON. DIV.                    |  |
|  |                        |                 |   |                             |                    |                     |                           |          |                                     |                | D                           | ist. 2                      |  |
| IV. Produ                                      | uced V                 | Vater           |   | -                           |                    |                     |                           |          |                                     | Щ.             |                             |                             |  |
|  | 23 POD                 |                 |   |                             | <del></del>        | 24 P                | OD ULSTI                  | Locatio  | on and Description                  | <del></del>    |                             | 10                          |  |
|  |                        |                 |   |                             |                    | -                   |                           |          |                                     |                |                             |                             |  |
|  |                        | etion Data      |   |                             |                    |                     |                           |          |                                     |                |                             |                             |  |
| <sup>∞</sup> Spud                              | <sup>∞</sup> Spud Date |                 | <sup>26</sup> Ro  | Ready Date                  | 7                  | <sup>27</sup> T     | TD                        |          | 28 PBTD                             |                | 29                          | Perforations                |  |
| 30   | Hole Size              |                 | 1 3   | 31 Casing & T               | Tuhing Size        | _                   |                           |          | Depth Set                           | <del></del>    | 33 %                        | icks Cement                 |  |
|  | nois size              |                 | <del>                                     </del>                | Casing & .                  | uonig Size         | _                   | -                         |          | Depui Sci                           | -              | Da                          | .cks Cement                 |  |
|  |                        |                 |   |                             |                    | _                   |                           |          |                                     |                | <br>                        |                             |  |
|  |                        |                 | <del></del>   |                             |                    | _                   | <del></del>               |          |                                     |                |                             |                             |  |
| VI. Well                                       | Test D                 | lata            |   |                             |                    |                     |                           |          | <del></del>                         |                |                             |                             |  |
|  |                        |                 | Gas Delivery Date 38 Test Date                                  |                             |                    |                     | 37 T                      | oth 3    | Tbg.                                | Pressure       | <sup>36</sup> Csg. Pressure |                             |  |
|  |                        |                 |   |                             |                    |                     |                           |          |                                     |                |                             |                             |  |
| * Choke  | e Size                 | •1              | " Oil   | 42 Water                    |                    |                     | 43 Gas                    |          |                                     |                | AOF                         | * Test Method               |  |
| I hereby certify                               | that the r             | ules of the Oil | Conservati  | on division h               | nave been complie  | →=<br>ied           |                           |          |                                     | <del></del>    |                             |                             |  |
|  |                        |                 |   |                             | to the best of my  |                     |                           | OI       | L CONSERV                           | /ATI           | ON DIVIS                    | SION                        |  |
| knowledge and l                                | belief.                | <i>'</i>        | <i>!</i>  |                             |                    |                     |                           |          |                                     | 2120           |                             |                             |  |
| Signature: Dis Deals Printed Name: Kris Baxter |                        |                 |   |                             |                    |                     | Approved by: ORIGINAL SIG |          |                                     |                |                             |                             |  |
| Printed Name:<br>Title:                        |                        | eting Repre     | resentative   |                             |                    |                     | THIC.                     |          |                                     |                | 1996                        | <u> </u>                    |  |
| Date:  | 09-24                  |                 | Phone: (405)235-3611  |                             |                    |                     | pprovat Da                | ie:      | <u>UUI V</u>                        |                | 1220                        |                             |  |
| If this is a c                                 |                        |                 | <u> </u>  |                             | I name of the prev | <u>الـــ</u><br>vio | us operator               |          |                                     |                |                             |                             |  |
|  |                        |                 |   |                             |                    |                     |                           |          |                                     |                |                             |                             |  |
|  | Operator Signa         |                 | F   | Prin                        | nted Name          |                     |                           |          | Title                               | Date           |                             |                             |  |