

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
District III  
1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural Resources Department

Form C-104  
Revised October 18, 1994  
Instructions on back

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Submit to Appropriate District Office

5 Copies

☒ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

<sup>1</sup> Operator Name and Address Devon Energy Production Company, L.P. 20 N. Broadway, Suite 1500 Oklahoma City, OK 73102-8260		<sup>2</sup> OGRID Number 6137	
		<sup>3</sup> Reason for Filing Code CH 1/1/2000	
<sup>4</sup> API Number 30-025-02445	<sup>5</sup> Pool Name Lynch Yates Seven Rivers		<sup>6</sup> Pool Code 42370
<sup>7</sup> Property Code 003443	<sup>8</sup> Property Name Ballard De Federal		<sup>9</sup> Well Number 5

II. <sup>10</sup> Surface Location

UI or lot no. M	Section 27	Township 20S	Range 34E	Lot.Idn	Feet from the 330	North/South Line South	Feet from the 990	East/West Line West	County Lea
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<sup>11</sup> Bottom Hole Location

UI or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P		<sup>14</sup> Gas Connection Date		<sup>15</sup> C-129 Permit Number		<sup>16</sup> C-129 Effective Date	<sup>17</sup> C-129 Expiration Date	

III. Oil and Gas Transporters

<sup>18</sup> Transporter OGRID 022628	<sup>19</sup> Transporter Name and Address Texas New Mexico Pipeline Co P.O. Box 2648 Houston, TX 77252-2648	<sup>20</sup> POD 852710	<sup>21</sup> O/G O	<sup>22</sup> POD ULSTR Location and Description

IV. Produced Water

<sup>23</sup> POD 852750	<sup>24</sup> POD ULSTR Location and Description
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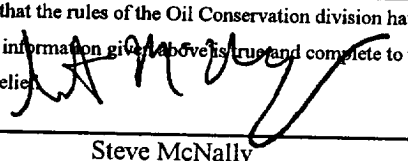
V. Well Completion Data

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBDT	<sup>29</sup> Perforations	<sup>30</sup> DHC, DC, MC
<sup>31</sup> Hole Size		<sup>32</sup> Casing & Tubing Size	<sup>33</sup> Depth Set		<sup>34</sup> Sacks Cement

VI. Well Test Data

<sup>35</sup> Date New Oil	<sup>36</sup> Gas Delivery Date	<sup>37</sup> Test Date	<sup>38</sup> Test Length	<sup>39</sup> Tbg. Pressure	<sup>40</sup> Csg. Pressure
<sup>41</sup> Choke Size	<sup>42</sup> Oil	<sup>43</sup> Water	<sup>44</sup> Gas	<sup>45</sup> AOF	<sup>46</sup> Test Method

"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:   
Printed Name: Steve McNally  
Title: District Manager  
Date: 3/20/00 Phone: (405) 235-3611

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

DAVE WINK  
FIELD REP. II

MAY 15 2000

<sup>47</sup> If this is a change of operator fill in the OGRID number and name of the previous operator

6137 Devon Energy Corporation (Nevada)

Previous Operator Signature

Printed Name

Steve McNally

Title

District Manager

Date

3/20/00

District I  
PO Box 1980, Hobbs, NM 88241-1980  
District II  
PO Drawer DD, Artesia, NM 88211-0719  
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1000 Rio Brazos Rd., Aztec, NM 87410  
District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
**PO Box 2088**  
**Santa Fe, NM 87504-2088**

Form C-104  
Revised February 10, 1994  
Instructions on back  
Submit to Appropriate District Office  
5 Copies

☐ AMENDED REPORT

**I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT**

<sup>1</sup> Operator Name and Address Devon Energy Corporation (Nevada) 20 N. Broadway Suite 1500 Oklahoma City, OK 73102-8260		<sup>2</sup> OGRID Number 006037
		<sup>3</sup> Reason for Filing Code CO Effective 7-1-96
<sup>4</sup> API Number 30-025-02445	<sup>5</sup> Pool Name Lynch Yates Seven Rivers	<sup>4</sup> Pool Code 42370
<sup>7</sup> Property Code 003443	<sup>8</sup> Property Name Ballard De Federal	<sup>9</sup> Well Number 5

**II <sup>10</sup> Surface Location**

UI or lot no. M	Section 22	Township 20S	Range 34E	Lot.Idn	Feet from the 330	North/South Line South	Feet from the 990	East/West Line West	County Lea
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**<sup>11</sup> Bottom Hole Location**

UI or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
<sup>12</sup> Lse Code F	<sup>13</sup> Producing Method Code P	<sup>14</sup> Gas Connection Date		<sup>15</sup> C-129 Permit Number		<sup>16</sup> C-129 Effective Date		<sup>17</sup> C-129 Expiration Date	

**III. Oil and Gas Transporters**

<sup>18</sup> Transporter OGRID 149410	<sup>19</sup> Transporter Name and Address Ada Crude Oil Company P.O. Box 844 Houston, Texas 77001	<sup>20</sup> POD 0852710	<sup>21</sup> O/G O	<sup>22</sup> POD ULSTR Location and Description M 27-20S-34E Lea Co., NM

**IV. Produced Water**

<sup>23</sup> POD	<sup>24</sup> POD ULSTR Location and Description
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**V. Well Completion Data**

<sup>25</sup> Spud Date	<sup>26</sup> Ready Date	<sup>27</sup> TD	<sup>28</sup> PBDT	<sup>29</sup> Perforations
<sup>30</sup> Hole Size	<sup>31</sup> Casing & Tubing Size	<sup>32</sup> Depth Set	<sup>33</sup> Sacks Cement	

**VI. Well Test Data**

<sup>34</sup> Date New Oil	<sup>35</sup> Gas Delivery Date	<sup>36</sup> Test Date	<sup>37</sup> Test Length	<sup>38</sup> Tbg. Pressure	<sup>39</sup> Csg. Pressure
<sup>40</sup> Choke Size	<sup>41</sup> Oil	<sup>42</sup> Water	<sup>43</sup> Gas	<sup>44</sup> AOF	<sup>45</sup> Test Method

\*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: *Kris Baxter*  
Printed Name: Kris Baxter  
Title: Marketing Representative  
Date: 06-28-96 Phone: (405)-235-3611

**OIL CONSERVATION DIVISION**

Approved by: *[Signature]*  
Title: *[Signature]*  
Approval Date: **JUL 8 1996**

<sup>47</sup> If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date
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DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

## OIL CONSERVATION DIVISION

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

### REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

Operator Devon Energy Corporation (Nevada)		Well API No. 3002502445
Address 1500 Mid-America Tower, 20 N. Broadway, Oklahoma City, OK 73102		
Reason(s) for Filing (Check proper box) New Well <input type="checkbox"/> Change in Transporter of: <input type="checkbox"/> Other (Please explain) Recompletion <input type="checkbox"/> Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/> Change in Operator Name Effective Change in Operator <input checked="" type="checkbox"/> Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/> July 1, 1992		
If change of operator give name and address of previous operator: Hondo Oil & Gas Co., P.O. Box 2208, Roswell, NM 88202		

### II. DESCRIPTION OF WELL AND LEASE

Lease Name Ballard DE Federal	Well No. 5	Pool Name, including Formation Lynch Yates 7-Rivers	Kind of Lease State, Federal or Fee	Lease No. NM08822
Location Unit Letter M : 330 Feet From The South Line and 990 Feet From The West Line Section 22 Township 20S Range 34E, NMPM, Lea County				

### III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> Texas New Mexico Pipeline Co.	Address (Give address to which approved copy of this form is to be sent) P. O. Box 2528, Hobbs, NM 88240					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <del>Phillips 66 Natural Gas</del> GPM Gas Corporation	Address (Give address to which approved copy of this form is to be sent) 4001 Penbrook, Odessa, TX 79762					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 27	Twp. 20S	Rge. 34E	Is gas actually connected? Yes	When?

If this production is commingled with that from any other lease or pool, give commingling order number:

### IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded	Date Compl. Ready to Prod.		Total Depth		P.B.T.D.			
Elevations (DF, RKB, RT, GR, etc.)	Name of Producing Formation		Top Oil/Gas Pay		Tubing Depth			
Perforations					Depth Casing Shoe			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			

### V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

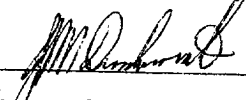
Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas - MCF

### GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

### VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations 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   
J. M. Duckworth Operations Manager  
Printed Name  
Date 6/30/92 405/235-3611  
Telephone No.

### OIL CONSERVATION DIVISION

Date Approved JUL 09 '92  
By ORIGINAL SIGNED BY JERRY SEXTON  
DISTRICT I SUPERVISOR  
Title

### INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.