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Artesia, # 05210 UNITED STATES

Form Approved. Budget Bureau No. 42-R1424

DEPARTMENT OF THE INTERIOR	5. LE		
GEOLOGICAL SURVEY		NM 074936	32 S
TEOLOGICAL SURVEY	o. IF	INDIAN, ALLOTTE	E OR TRIBE NAME
SUNDRY NOTICES AND REPORTS ON WELLS	7. UI	NIT AGREEMENT I	NAME
(Do not use this form for proposals to drill or to deepen or RECEIVED different reservoir. Use Form 9-331-C for such proposals.)			
	8. FA	RM OR LEASE NA	ME
1. oil gas cother self-self-self-self-self-self-self-self-		McIntyre "D"	
2. NAME OF OPERATOR MAR 14'89	9. W	ELL NO.	,
Devon Energy Corporation ✓	10 FI	LD OR WILDCAT I	NAME -
3. ADDRESS OF OPERATOR O. C. D.			kson SR-O-G-U
1500 Mid America Tower, OKC, OKARISTO OFFICE	11. SE	C., T., R., M., OR	BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	AR	EA 170 000	
AT SURFACE: 1980' FNL & 660' FEL Sec. 17-178-30	E12 CO	UNITY OD DADIO	
AT TOP PROD. INTERVAL: SAME AT TOTAL DEPTH: SAME	Edd	ly	13. STATE New Mexico
	14. AP	NO.	N
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA			
NEW ONLY ON OTHER BATA	15. ELE	VATIONS (SHOW	DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	367	5 GR	
TEST WATER SHUT-OFF FRACTURE TREAT			
SHOOT OR ACIDIZE X			
REPAIR WELL	(1:075		<i>.</i>
PULL OR ALTER CASING	(NOTE:	Report results of mu change on Form 9-3	Itiple completion or zone
CHANGE ZONES			
ABANDON+ ⊟ ⊟			
(other) Plug off open hole & acidize perfs.			÷
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state including estimated date of starting any proposed work. If well is dire measured and true vertical depths for all markers and zones pertinent to	all pertirectionally to this we	nent details, and details, and drilled, give subsork.)*	give pertinent dates, urface locations and
TOOH w/rods, pump & tubing. TIH w/bit and csg s	cranei	to 2000 ft	
orn w/wireline gauge ring/junk basket to 2880 fr	. GIH	I w/CIBP and	set at 2860 fr
bump 5 bk cut on top.			
TIH w/tbg and packer. Spot 500 gals MFS-415 acro	oss pe	erfs. Pull	pkr to 2470 ft.
propried converter infough csg. & thg. Set nkr	- Wait	· 2/ ha	
Acidize well w/1500 gals 15% HCl and 50 ball seals Swab back load. Release pkr. TOOH.	ers.	SI one hour	•
Run production string and place well back on production	luotio	n II-de F	
production.	146,10	u. wait 5 c	lays and test
			• • • • • • • • • • • • • • • • • • •
Verbal approval received from Shannon Shaw 2/28/8	10	3 20	
ubsurface Safety Valve: Manu. and Type	59	S-4 @	
B. I hereby certify that the foregoing is true and correct		Set @	' ———— Ft.
GNED AMILE District Enginee	r DATE	2/28/89	
ACCEPTED FOR RECEIPING Space for Federal or State office u	se)		
PPROVED BY SCIENCE DAVID DO CANAL TO THE CONTROL OF	•		
DINDITIONS OF APPROVIDED AND 1989 ASSITTLE	DAT	Έ	
• · · · · · · · · · · · · · · · · · · ·			