

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL AND GAS COMMISSION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other WIW
2. Name of Operator DEVON ENERGY OPERATING CORPORATION
3. Address and Telephone No. 20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4530
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SEE BELOW

5. Lease Designation and Serial No. LC 029435-B,
6. If Indian, Allottee or Tribe Name NA
7. If Unit or CA, Agreement Designation NA
8. Well Name and No. SEE BELOW
9. API Well No.
10. Field and Pool, or Exploratory Area GRAYBURG-JACKSON
11. County or Parish, State EDDY COUNTY, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent (SJS)	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Re-schedule Work</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Each of the wells on the attached list is to be utilized as an injection well in a 40-acre 5-spot waterflood pattern following the expansion of the Keel West Waterflood Project. To implement this prospect the existing surface facilities must be modified and expanded. The design work for the necessary upgrades are currently underway. As soon as the design work is complete and facility modifications commence operation will begin to return each of these wells to an active status. The surface facilities must be operational before any of these wells can be returned to an active status. It is anticipated that the required facilities will be completely operational in one year; therefore, it is requested that a one year extension be granted to allow the facilities to be constructed so the wells can be returned to an active status.

J.L. KEEL "B" #2, SWSW, SEC 8-T17S-R31E

J.L. KEEL "B" #29, NESW, SEC 8-T17S-R31E

APPROVED FOR 12 MONTH PERIOD

10/21/95

RECEIVED
OCT 21 11 55 AM '94

14. I hereby certify that the foregoing is true and correct

Signed Jo Ann Hooks

Title JO ANN HOOKS
ENGINEERING TECHNICIAN

Date October 19, 1994

(This space for Federal or State office use)

Signed by Shannon J. Shaw

Title ENGINEER

Date 12/13/94

Approved by
Conditions of approval, if any: