

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. Conservation Division  
811 S. 1st Street  
Artesia, NM 88210-2884

FORM APPROVED  
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  
☐ Oil Well ☐ Gas Well ☒ Other W I W

2. Name of Operator  
DEVON ENERGY OPERATING CORPORATION

3. Address and Telephone No.  
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4527

4. Location of Well (Footage. Sec., T., R., M., or Survey Description)  
1980' FSL & 1980' FWL of Section 8 - T17S - R31E

5. Lease Designation and Serial No.  
LC 029435-B

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.  
J. L. Keel "B" #29

9. API Well No.  
30-015-10471

10. Field and Pool, or Exploratory Area  
Grayburg Jackson

11. County or Parish, State  
Eddy County, OK

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<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>Perforate &amp; acidize</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.)\*

9/21/96 to 9/27/96 - TIH w/bit & scraper to 3701'.

Perf'd w/2 SPF @ 3260', 63', 78', 81', 3302', 16', 21', 53', 3435', 40', 57', & 59';  
total 24 holes.

Acidized perfs 3007'-3660' w/6000 gals 15% HCl acid.

Perf'd w/2 SPF @ 2883', 2912', 15', 32', 38', 42', 3055', 57', 66', 70', 96', 98', 3104',  
23', & 25'; 30 holes.

Acidized 2883'-3660' w/6000 gals 15% HCl acid.

Swabbed.

RIH w/pkr & plastic coated tbg. Set pkr @ 2808'.

10/10/96 - Began injecting.

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

Signed Karen Byers  
(This space for Federal or State office use)

KAREN BYERS  
Title ENGINEERING TECHNICIAN

Date 10/21/96

Approved by \_\_\_\_\_  
Conditions of approval, if any:

Title \_\_\_\_\_

Date \_\_\_\_\_