Form 3160-5 (June 1990)

UNI O STATES DEPARTMEN OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N. M. Oil Cc Division

811 S. 1ST ST.

ARTESIA, NM 88210-2834

FORM APPROVED
Budget Bureau No. 1004-0135

C154

DEVON ENERGY OPERATING CORPORATION Address and Telephone No. 20 NORTH BROADWAY, SUITE 1800, OKLAHOMA CITY, OKLAHOMA 73102 (406)6524627 30-015-10705 10. Field and Pool, or Exploratiny Area Grayburg Jackson (Q.SR.GB.SA) 1980' FSL & 1980' F\$L, Sec. \$4.775-31E CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Recompletion Pugging Back Casing Repair Abering Casing Pinal Abandonment Notice Pugging Back Casing Repair Abering Casing Other Addige Other Addige Other Addige Other Addige Well back on injection 5/15/96. 6/25/96 - Acidized perfs w/6000 gais 15% HCl acid. 6/27/96 - Returned to injection. KAREN ROSA BYES Finde KAREN ROSA BYES ENGINEERING TECHNICIAN Date 2/19/95			Expires March 31, 1993
Use "APPLICATION FOR PERMIT—" for Color of Color	SUNDRY NOTICES	S AND REPORTS ON WELLS	5. Lease Designation and Serial No.
SUBMIT IN TRIPLICATE Type of Well			[· LC-029426-B
Type of Well Case West Case Willer Case West Case Willer Case Case Willer Case C	Use "APPLICATION FO		6. If Indian, Allottee or Tribe Name
Type of Wall One Wall One WIW O	SURMIT	IN TRIPLICATE	N/A
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Name of Operator DEVON ENERGY OPERATING CORPORATION Address and Telephone No. 20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)662-4627 10 Field and Pool, or Exploratory Area Grayburg Jackson (C, SR, GB, SA) 11. County or Parish, Sate Eddy County, NM CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abundomment Notice Change of Plans New Contribution New Contribution New Contribution New Contribution New Contribution Conversion to Ligitation Claring Repair Casing Repair Casing Repair Conversion to Ligitation Conversion to Singetion Valer Adding Conversion to Male Conversion to Male Completed Operations (Clarby state all perticent details, and grey pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give submit locations and measured and true vertical depths for all maskers and zones pertinent to this work.)* Well back on injection 5/15/96. 6/25/96 - Acidized perfs w/6000 gals 15% HCl acid. 6/27/96 - Returned to injection. ALL I hereby certify that the foregoing is true and correct KAREN ROSA BYERS ENGINEERING TECHNICIAN Date 7/10/96 Title Date	Well Well Other WIW		- 137
Address and Telephone No. 20 NORTH BROADMAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)852.4827 20 Location of Well (Processe, Sec., T. R., M., or Survey Description) 1980' FSL & 1980' FFL, Sec., \$-17S-31E W CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Recompletion Nor-Routine Fracturing Subsequent Report Recompletion Plugging Back Albandonment Notice Albandonment Notice Plugging Back Caning Repair Hall Abandonment Notice Albandonment Notice Albandonment Notice Other Acidize Nor-Routine Fracturing Water Report Nor-Routine Fracturing Conversion to Injection Discussed Art reversion of Conversion to Injection Nor-Routine Fracturing Conversion to Injection Discussed Water Note: Report meable of measured and true vertical deepths for all markers and zoness pertinent to this work, } Well back on injection 5/15/96. 6/25/96 - Acidized perfs w/6000 gals 15% HCl acid. 6/27/96 - Returned to injection. Albandon Research Albandon Research	Name of Operator	ation OIL CON. DIV	b S. Well Name and No.
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (406)552-4527 Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FSL & 1980' FfL, Sec. & 175-31E CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION Notice of Intent Abandonment Plugging Back Casing Repair Horizontal Abandonment Notice Attering Casing Other Acidize Other Acidize Other Acidize Other Acidize Other Acidize Well back on injection 5/15/96. 6/25/96 - Acidized perfs w/6000 gals 15% HCl acid. 4 Thereby certify that the foregoing is true and correct KAREN ROSA BYERS Title ENGINEERING TECHNICIAN Date Date Date Date Date			H. E. West "B" #30
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Secretary Secr	20 NORTH BROADWAY, SUITE 1500, OKLAHO	DMA CITY, OKLAHOMA 73102 (405)552-4527	
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TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent			
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Recompletion New Construction New Constructio	Notice of Intent	Abandonment	Change of Plans
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