ox 1980, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Departn.

RECEIVED

DISTRICT II P.O. Drawer DD, Astonia, NM 88210

OIL CONSERVATION DIVISION P.O. Box 2088

Santa Fe, New Mexico 87504-2088

OCT 16'89

DISTRICT III 1000 Rio Brazos Rd., Aziec, NM 8741	0		•	-	EXICO 6/30				_		
,	REQ					AUTHORIZ FURAL GA		O. C. I ARTESIA, O			
Devon Energy Corporation (Nevada)						Well API No.					
ddress								-015- 2068	4		
1500 Mid-America T		North	Broa	dway,		City, O		2			
lew Well	,	Change in	Тяваро	rter of:			•	Randel St	tate #4		
ecompletion	Oil		Dry Ga		•						
hange in Operator	Caninghe	ad Gas	Conden	mate		-					
change of operator give name d address of previous operator				- 							
. DESCRIPTION OF WEL		la	• • •	I per a			of Lease No.				
Etz State Unit (TR 5)		Well No. Pool Name, Grayb		i me, includ lyburg	e, Including Formation burg Jackson - SR-Q-6-SH			Kind of Lease State, Foderal or See		В 2130	
ocation			<u>.</u>	•		27 9 10	-4: <u> </u>		1 1 21	,,,	
Unit LetterD	: 6	660	Feet Pr	om The	north	ead	Fe	et From The	west	Line	
Section 16 Town	hin 17S		Range	30E	NA.	APM.		Eddy		County	
						41 144	······································			County	
I. DESIGNATION OF TRA ame of Authorized Transporter of Oil	NSPORTE	OF OF O		D NATU		eddress to wh	ick approved	copy of this form	is to be sent)	
TX Nm Pene	line	60				Ser 15		idland Tx 79701			
ame of Authorized Transporter of Car	_		or Dry	Gas	Address (Give address to which approved						
well produces oil or liquids.) Unit	Sec.	Twp.	Rge.	Is gas actually	2-12197	When	Ston 7x	772	52	
ve location of tanks.	02			~~			1	·			
this production is commingled with the	it from any of	her lease or	pool, giv	e comming	ing order numb	er:			·		
COMPLETION DATA		Oil Well	·	as Well	New Well	Workover	Deepen	Plug Back Sa	me Res'v	Diff Res'v	
Designate Type of Completio	n - (X)	1	i								
ste Spudded	Date Com	ipl. Ready to	Prod.		Total Depth		•	P.B.T.D.	- · · · · · · -		
evations (DF, RKB, RT, GR, etc.)	Name of I	Producing Fo	ormation		Top Oil/Gas Pay			Tubing Depth			
erforations								Depth Casing S	hoe		
		TUBING.	CASI	NG AND	CEMENTIN	NG RECOR	D	<u> </u>			
HOLE SIZE		CASING & TUBING SIZE				DEPTH SET			SACKS CEMENT		
. TEST DATA AND REQUIL IL WELL (Test must be after				nil and must	he equal to or	exceed ton allo	mable for thi	s depth or be for :	full 24 hours.)	
tate First New Oil Run To Tank	Date of Te		o, iosa c			thod (Flow, pu				<u></u>	
						Carina Program			Choke Size		
ength of Test	Jubing Pri	Tubing Pressure				Casing Pressure					
ctual Prod. During Test	Oil - Bbls.				Water - Bbls.	-		Gas- MCF			
					<u> </u>						
GAS WELL	The second of	Ter			Dhie Candan	mie/MARA/~E		Gravity of Can	densate		
ctual Prod. Test - MCF/D	Length of Test				Bbis. Condensate/MMCF			Gravity of Condensate			
sting Method (pirot, back pr.)	Tubing Pr	essure (Shut	-in)		Casing Pressu	re (Shut-in)		Choke Size			
I. OPERATOR CERTIFI				CE		DIL CON	ISERV	ATION D	10ISIVI	Vio-20	
I hereby certify that the rules and reg Division have been complied with an									1	hg Will.	
is true and complete to the best of m					Date	Approve	d	OCT 2 0	1989		
IM Karelow	/					• •		nkien DV			
Signature					By_		MNAL SIG				
J.M. Duckworth Printed Name	Dist	rict En	ginee Tide	<u>er</u>	Title	6119	ERVISOR	DISTRICT	19		
10-3-89	(405)	235-3	611		II TILIE			 —			
I Tota		Tala	mhose N	^							

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.