

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

C/SF

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 type="checkbox"/> Other
2. Name of Operator DEVON ENERGY OPERATING CORPORATION
3. Address and Telephone No. 20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1780' FNL & 660' FWL of Section 5 - T17S - R31E

5. Lease Designation and Serial No. LC 029435-B
6. If Indian, Allottee or Tribe Name N/A
7. If Unit or CA, Agreement Designation N/A
8. Well Name and No. J.L. Keel "B" #37
9. API Well No. 30-015-25934
10. Field and Pool, or Exploratory Area Grayburg-Jackson Field
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	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input checked="" type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<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.)*

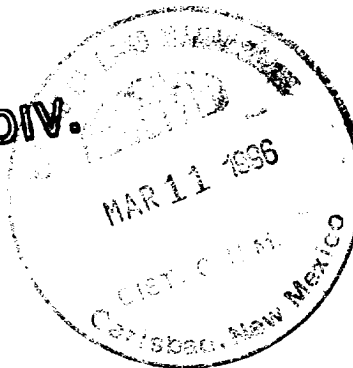
To be converted to water injection well as follows:

1. Add perforations to Jackson interval 3288' - 3711' (OA).
2. Add perforations to Grayburg interval 2945' - 3146' (OA).
3. RIH with Baker AD-1 packer on 2-3/8" tubing and set at 2900'.
4. Inject through perforations 2945' - 3711' (OA).

RECEIVED

APR 09 1996

OIL CON. DIV.
DIST. 2



SUBJECT TO
STATE APPROVAL
BY STATE

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

Signed <u>Randy Jackson</u>	Randy Jackson	
(This space for Federal or State office use)	Title <u>District Engineer</u>	Date <u>03/05/96</u>
Oriz Signed by Shannon J. Shaw	Title <u>PETROLEUM ENGINEER</u>	Date <u>4/8/96</u>
Approved by _____		
Conditions of approval, if any:		