District I

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

State of New Mexico Energy, Minerals & Natural Resources Departmen

Revised February 10, 199

Instructions on back Submit to Appropriate District Office

OIL CONSERVATION DIVISION

PO Box 2088 Santa Fe. NM 87504-2088 5 Copies

District III

ша ге, 141VI 0/304-2000	
	AMENDED REPORT

1000 Rio Braz	os Rd., A7	ztec, NM 87	7410		Santa F	e, NM	8750	04-208	8				•	
District IV PO Box 2088,	Cames Es	NIM 97504	2066										AMENDED REPORT	
I.				OWAB	BLE AND) AUT	'HOR	IZAT	ION	TO TR	ANS	SPORT		
<u> </u>		Opera	rator Name and					Γ				ID Number		
Devon E				<u> </u>		³ Reason	Eil	6137						
	• .	, Suite 150 Oklahoma										ing Code ctive 11/1/	/96	
⁴ API 1	Number					5 Pool 1						Pool Code		
30-015-2				GR	RAYBURG				SA		28509			
	erty Code 596 7 <i>1</i> 2		_			Prope J. L. K	erty Nam Teel A	i c				" Well Number 17		
17 II ** Surface Location											1,			
UI or lot no. C	Section 7	Township 17S	Range 31E	Lot.Idn	Feet from the			1	from the East/West Line 2050 W			County EDDY CO., NM		
" Bot	ttom H	lole Loca	ation											
UI or lot no.	Section	Township	Range	Lot.Idn	Feet from the	he No	orth/Sout	th Line Feet from th		from the	East/West Line		County	
12 Lse Code F		cing Method		Gas Conn	nection Date	15 C-1	129 Pern	nit Numbe	er	¹⁶ C-129 E	Effective Date 17 C-129 Expiration Date			
		s Trans	•											
¹⁸ Trans	sporter ID		· · · · · · · · · · · · · · · · · · ·	Transporte and Add			20	POD		²¹ O/G			ULSTR Location Description	
				WIV	w									
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											2	ECE	AVED -	
											u			
												NOV 2	7 1996	
IV. Prod	uced V	Vater												
	²³ POD					²⁴ PO	D ULST	R Location	on and l	Description	∌ ₩	. CO	N. DIV. I 2	
V. Well (_	etion Da												
²⁵ Spud	Date		* R	Ready Date	²⁷ TD		J	²⁸ PBTD		28 PBTD			29 Perforations	
30	Hole Size		3	Casing &	Tubing Size			32 Depth Set				33 (Sacks Cement	
			+											
			+				+				-			
VI. Well	Test D	ata										<u></u>		
³⁴ Date !			Gas Delivery D)ate	36 Test D				-	h 38 Tbg.		Pressure	36 Csg. Pressure	
40 Choke	e Size		4 Oil		Water		43		43 Gas		4 AOF		* Test Method	
I hereby certify						·		01	- OC			~ · · · · · · · ·		
with and that the knowledge and l		on given abo	ove is true and	d complete t	to the best of	my		Uı	L CC)NSEKV	ATI	ON DIVI	SION	
Signature: Approved by: SUPERVISOR DISTRICT II														
Printed Name: Karen Byers Title:														
Title:		neering Te		(405)	552-4527	Apr	proval Da	ate:	l	EC 13	3 19	96		
Date: 1/2			Phone:		d name of the									
			orporation	number and	I name or use	-	-	13602:	5					
		peralor Sign	_				d Name	100			7	Title	Date	
	1		<u>// /</u>		Rick Clark				Product	tion N	Manager	NOV 2 5 1996		