

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NM OIL CONS COMMISSION
Drawer DD
Artesia, NM 88210

FORM APPROVED
Budget 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 <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 (406)552-4530
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2625' FSL & 2625' FWL, Sec 10-T17S-R31E

5. Lease Designation and Serial No. LC 029426-B
6. If Indian, Allottee or Tribe Name NA
7. If Unit or CA, Agreement Designation NA
8. Well Name and No. H.E. West "B" #59
9. API Well No. 30-015-27318
10. Field and Pool, or Exploratory Area GRAYBURG-JACKSON
11. County or Parish, State EDDY COUNTY, NM

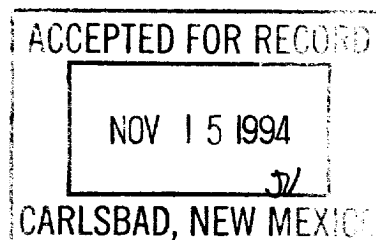
CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input 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 Perf, acidize & frac
	<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.)*

10/24/ 94 thru 11/3/94 , we perforated Jackson zone 3684'-3939' (20 holes), acidized perms w/1700 gals 15% HCL + BS (1.3 SG). Perforated Grayburg zone 3275'-3550' (23 holes), acidized w/1500 gals 15% HCL acid. Spotted 100 gals of 15% HCL acid across upper Grayburg (3275'-3303'), Loco Hills (3351'-2255'), and Metex (3387'-3415') perforations. Frac'd San Andres perms 3275'-3550' w/51,000 gals of YF 130 x-linked gel + 110,000# 20/40 brady sand + 15,000# 20/40 R. C. sand.



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

Signed *Jo Ann Hooks*

Title JO ANN HOOKS
ENGINEERING TECHNICIAN

Date November 8, 1994

(This space for Federal or State office use)

Approved by _____

Title _____

Date _____

Conditions of approval, if any: