

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Drawer DD
Carlsbad, NM 88210

215P

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
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
DEVON ENERGY OPERATING CORPORATION

3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1600, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4630

4. Location of Well (Footage. Sec., T., R., M., or Survey Description)
2625' FNL & 1305' 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.
WEST "B" #60

9. API Well No.
30-015-27561

10. Field and Pool, or Exploratory Area
GRAYBURG-JACKSON

11. County or Parish, State
EDDY CO., 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 type="checkbox"/> Change of Plans
<input checked="" 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 type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Perf'd, acidized, and frac'd	<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.)*

On 10/11/94, we perf'd the Slaughter zone 4089'-4251' (20 holes). We acidized w/2,000 gals of 15% HCl acid.

On 10/13/94, we frac'd the Slaughter zone 4089'-4251' w/22,000 gals of gel + 84,000# 20/40 sand + 16,000# of resin coated sand.

NOV 18 '94

ACCEPTED FOR RECORD

NOV 14 1994

CARLSBAD, NEW MEXICO

NOV 10 1994

NOV 10 1994

RECEIVED

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

Signed *Jo Ann Hooks*

JO ANN HOOKS
ENGINEERING TECHNICIAN

Date 11/1/94

(This space for Federal or State office use)

Approved by
Conditions of approval, if any:

Title

Date