

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
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
DEVON ENERGY OPERATING CORPORATION

3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4527

4. Location of Well (Footage. Sec., T., R., M., or Survey Description)
2550' FNL & 1190' FWL, Unit E *Sec. 6-17S-31E*

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" #81

9. API Well No.
30-015-28252

10. Field and Pool, or Exploratory Area
Grayburg Jackson (Q,SR,GB,SA)

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	
☐ Notice of Intent	☐ Abandonment	☐ Change of Plans
☒ Subsequent Report	☐ Recompletion	☐ New Construction
☐ Final Abandonment Notice	☐ Plugging Back	☐ Non-Routine Fracturing
	☐ Casing Repair	☐ Water Shut-Off
	☐ Altering Casing	☐ Conversion to Injection
	☒ Other <u>Change name of well</u>	☐ 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.)*

Please note the name change for this well

from Keel "B" #81 or Keel "B" Federal #81

to J. L. Keel "B" #81

RECEIVED

JUL 27 1995

OIL CON. DIV.
DIST. 5

J. L. Keel

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

Signed Karen Rosa Byers
(This space for Federal or State office use)

KAREN ROSA BYERS
ENGINEERING TECHNICIAN

Date 6/23/95

Approved by _____
Conditions of approval, if any: _____

Title _____

Date _____