Form 3160-5 (June 1990)

UN D STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT



FORM APPROVED

Budget Bureau No. 1004-0135 N.M. Oil Cons. Division are Designation and Serial No. SUNDRY NOTICES AND REPORTS ON WELLON 1 ST STORE Do not use this form for proposals to drill or to deepen or reentry to a different res Use "APPLICATION FOR PERMIT—" for such proposals at NA LC-029435-B If Indian, Allottee or Tribe Name SUBMIT IN TRIPLICATE 7. If Unit or CA, Agreement Designation 1. Type of Well ☐ Gas Oil Other WIW 8. Well Name and No. 2. Name of Operator **DEVON ENERGY OPERATING CORPORATION** J. L. Keel "B" #76 9. API Well No. 3. Address and Telephone No. 20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4527 30-015-28255 10. Field and Pool, or Exploratory Area 4. Location of Well (Footage. Sec., T., R., M., or Survey Description) Grayburg Jackson 2030' FNL & 1980' FEL, Sec. 8-17S-31E 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 Recompletion New Construction Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut-Off Final Abandonment Notice Altering Casing Conversion to Injection Other 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.)* 10/19/96 - Ran bit & scraper to 3850'. Tested csg to 500#. 10/20/96 - Perf'd w/2 SPF @ 3313', 3315', 3339', 3368', 3427', 3434', 3450', 3548', 3722' & 3754'; total 20 holes. Acidized each interval w/100 gals 15% HCl acid. 10/21/96 - RIH w/pkr & IPC tbg. Set pkr @ 3008'. Tested. 10/23/96 - Began injecting. BLM 14. I hereby certify that the foregoing is true and correct KAREN BYERS Title ENGINEERING TECHNICIAN Date 11/01/96 Approved by Date Conditions of approval, if any: