

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**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 <b>DEVON ENERGY OPERATING CORPORATION</b>
3. Address and Telephone No. <b>20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4527</b>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>1419' FNL &amp; 1247' FEL, Sec. 3-T17S-R31E</b>

**FORM APPROVED**

Budget Bureau No. 1004-0135  
Expires March 31, 1993

5. Lease Designation and Serial No. <b>LC-029426-A</b>
6. If Indian, Allottee or Tribe Name <b>NA</b>
7. If Unit or CA, Agreement Designation <b>NA</b>
8. Well Name and No. <b>H. E. West "A"31</b>
9. API Well No. <b>30-015- 28323</b>
10. Field and Pool, or Exploratory Area <b>Grayburg-Jackson</b>
11. County or Parish, State <b>Eddy Co., NM</b>

**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 <u>Change name of well</u>	<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 and 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.)\*

**RECEIVED**

**APR 13 1995**

Please note change of well name:

from West "A" #31 or West "A" Federal #31

to H. E. West "A" #31

**OIL CON. DIV.**

**DIST. 2**

*J. Lara*

**WALSBAUGH**

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

Signed Karen Rosa

Title

**KAREN ROSA  
ENGINEERING TECHNICIAN**

Date 3/16/95

(This space for Federal or State office use)

Approved by \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

**\*See Instruction on Reverse Side**