

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
NM OIL CON. DIVISION  
Expires March 31, 1993  
Drawer DD  
Lease Designation and Serial No.  
Artesia, NM 88210  
LC-029426-A

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	6. If Indian, Allottee or Tribe Name N/A
2. Name of Operator DEVON ENERGY OPERATING CORPORATION	7. If Unit or CA, Agreement Designation N/A
3. Address and Telephone No. 20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4527	8. Well Name and No. H. E. West "A" #32
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2622' FNL & 1330' FEL Sec. 3-17S-31E	9. API Well No. 30-015-28324
	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
<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 <u>Change name of well</u>
	<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.)\*

RECEIVED

Please note the name change for this well

JUL 27 1995

from West "A" #32 or West "A" Federal #12  
to H. E. West "A" #32

OIL CON. DIV.  
DIST. 2

J. Lara  
7.5 1995

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

Signed Karen Rosa Byers Title KAREN ROSA BYERS ENGINEERING TECHNICIAN Date 6/23/95  
(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