Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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FORM APPROVED
Budget Bureau No. 1004-0135
Eypires March 31, 1993

SUNDRY NOTICES Do not use this form for proposals to drill o Use "APPLICATION FO	5. Lease Designation and Serial No. LC-029395-B 6. If Indian, Allottee or Tribe Name			
SUBMIT	IN TRIPLICATE			
I. Type of Well Oil Well Gas Well Other WIW		7. If Unit or CA, Agreement Designation		
Name of Operator DEVON ENERGY CORPORATION (NEVA	FEB 1976 RECEIVED	8. Well Name and No. Turner "B" #62		
3. Address and Telephone No.	CLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611	9. API Well No.		
20 NORTH BROADWAY, SUITE 1500, OK	30-015-05449			
4. Location of Well (Footage. Sec., T., R., M., or Survey I 1980' FSL & 660' FEL, Sec. 29-17S-31E	10. Field and Pool, or Exploratory Area Grayburg Jackson 11. County or Parish, State			
		Eddy County, NM		
CHECK ADDRODDIATE BOY'S) TO INDICATE NATURE OF NOTICE, REP	ORT OR OTHER DATA		
TYPE OF SUBMISSION	ONI, ON OTHER DATA			
Notice of Intent	TYPE OF ACTION Abandonment	Change of Plans		
Notice of Intent	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.)		
Work was done to convert this well to a water injection well as follows: 12/19/97 to 12/31/97 – Drilled out, cleaned out & ran casing scraper to 3659'. 1/2/98 to 1/3/98 – Perf'd 3245'-3624' w/1749" hole. Acidized w/4500 gals 15% HCl acid + 7000# rock salt. 1/5/98 – RIH w/AD-1 packer, seating nipple & 99 jts 2 3/8" IPC tubing. Set pkr @ 3165' & tested to 300 psi for 15 min. 1/16/98 - Began injecting.				
14. I hereby certify that the foregoing is true and correct Karen Byers				
Signed Karon Bueno	Karen Byers Title Engineering Technician			
(This space for Federal or State office use)				
Approved byConditions of approval, if any:	Title	Date		