PO Box 1980, Hobbs, NM 88241-1980

PO Drawer DD, Artesia, NM 88211-0719

District III

1000 Rio Brazos Rd., Aztec, NM 87410

OIL CONSERVATION DIVISION PO Box 2088

Santa Fe, NM 87504-2088

Revised February 10, 1994 Instructions on back

Submit to Appropriate District Office



District IV PO Box 2088,	, Santa Fe	e, NM 875	504-2088									AMENDED REPOR	
I.		UEST 1	FOR ALI		LE AND A	<u>UTHO</u>	RIZAT	<u>'ION</u>					
Devon I	Energy (-	perator Name ar ion (Nevada)				T			² OGRII 6137	ID Number		
1		y, Suite 15		,			3 Reason for Filing Code						
Oklahon	ma City,		ma 73102				CH effective 11/1/96						
⁴ API 30-015-0	I Number -05469			- GF		Pool Name		24			4	Pool Code	
	-05469 perty Code	<u> </u>		UK	RAYBURG JA	ACKSON S Property Na		SA		\longrightarrow	9	28509 Well Number	
	1607-2	20081				Max Friess	_					Well Number	
		Location			-								
UI or lot no. A	Section 30	Township 17S	ip Range 31E	Lot.Idn	Feet from the 660	North/Sor N			from the		West Line	County	
		Hole Loc			000	IN		Ц	660	<u></u>	E	EDDY CO., NM	
UI or lot no.	Section			Lot.Idn	Feet from the	North/Sor	outh Line	Feet f	from the	East/V	West Line	County	
12 Lse Code	13 Produ	ucing Metho	od Code	14 Gas Conn	ection Date	15 C-129 Pr	ermit Numb	ner	¹⁶ C-129 I	Effective	e Date	¹⁷ C-129 Expiration Date	
						·		" 		LIIV.) Daic	C-129 Expiration Date	
		as Tran	sporters										
16 Trans	nsporter RID			¹⁹ Transporter Name and Address			²⁰ POD ²¹		²¹ O/G		²² POD ULSTR Location and Description		
74	440			EOTT P. O. Box 4666			492410						
			Hou		s 77210-4666					İ			
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IV. Frou	POD POD	<u>Nater</u>			<u> </u>	²⁴ POD ULS	Orm Locati	'd '	intio				
						FOD OLO	1K Locan)n anu 1)escription	1			
V. Well (etion D											
[≈] Spud	Date)	•	Ready Date		" TD			²⁶ PBTD			2º Perforations	
30	Hole Size	:		31 Casing & T	Tubing Size	二二	3	32 Depth	Set	二	33 5	Sacks Cement	
 			+							$\overline{}$			
			 		-					+			
										-			
	Test D										•		
	New Oil	36 (Gas Delivery I	Delivery Date			37 Test Length			36 Tbg. Pressure		36 Csg. Pressure	
40 Choke	e Size		" Oil	Oil Water			43 Gas		4 AO		.OF	45 Test Method	
					l nave been complie	ed							
		ion given a	above is true ar	nd complete to	to the best of my		OI	ıL CO	NSERV	/ATIC	ON DIVIS	SION	
knowledge and t Signature:	belief.	444	Bue	^ ^							·· ==		
Printed Name:		Karen E		اللاع		Approved 1 Title:	by: S	<u> IIPER</u>	RVISOR.	DISTR	<u>≀ICT II</u>		
Title:			rechnician			Approval Date:							
Date: 11/2	1/96		Phone:	(405)	552-4527	DEC 1 3 1985							

OGRID # 1332

Printed Name

Rick Clark

Title

Production Manager

WOV 2 5 1996

If this is a change of operator fill in the OGRID number and name of the previous operator