

OIL CONSERVATION DIVISION

DRAWER DD ARTESIA NM

DISTRICT OFFICE II

January thru June 1994

NO. 2064 N

SUPPLEMENT TO THE OIL PRORATION SCHEDULE

DATE February 18, 1994

PURPOSE ALLOWABLE ASSIGNMENT - NEW WELL

Effective February 1, 1994 an allowable for a marginal (M) well is hereby assigned to Devon Energy Corp. (Nevada), West Red Lake Unit #37-F-7-18-27 in the Red Lake Queen Grayburg San Andres Pool.

L - P

MP - P

mm

Devon Energy Corp.

KOC
GPM

OIL CONSERVATION DIVISION


DISTRICT SUPERVISOR

Submit 5 Copies
Appropriate District Office
DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico
Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088
Santa Fe, New Mexico 87504-2088

Form C-104
Revised 1-1-89
See Instructions
at Bottom of Page

FEB 14 1994

REQUEST FOR ALLOWABLE AND AUTHORIZATION
TO TRANSPORT OIL AND NATURAL GAS

Operator Devon Energy Corporation (Nevada) <i>6127</i>		Well API No. 30-015-27439
Address 20 North Broadway Ste 1500 Oklahoma City, OK 73102		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input checked="" type="checkbox"/>	Change in Transporter of:	
Recompletion <input type="checkbox"/>	Oil <input type="checkbox"/> Dry Gas <input type="checkbox"/>	
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/> Condensate <input type="checkbox"/>	

If change of operator give name
and address of previous operator

II. DESCRIPTION OF WELL AND LEASE

Lease Name West Red Lake Unit <i>3491</i>	Well No. 37	Pool Name, Including Formation <i>Red Lake D-G-SA-51310</i> West Red Lake Unit	Kind of Lease State, Federal or Fee	Lease No. NA
Location Unit Letter <u>F</u> : <u>1490</u> Feet From The <u>north</u> Line and <u>2050</u> Feet From The <u>west</u> Line Section <u>7</u> Township <u>18S</u> Range <u>27E</u> , <u>NMPM</u> Eddy County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) P. O. Box 1558 Breckenridge, TX 76024					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent) 4044 Penbrook Odessa, TX 79762					
If well produces oil or liquids, give location of tanks.	Unit B	Sec. 7	Twp. 18S	Rge. 27E	Is gas actually connected? yes	When? 1/21/94

If this production is commingled with that from any other lease or pool, give commingling order number:

IV. COMPLETION DATA

Designate Type of Completion - (X)	Oil Well X	Gas Well	New Well X	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
Date Spudded 8/26/93	Date Compl. Ready to Prod. 1/21/94		Total Depth 2450'		P.B.T.D. 2394'			
Elevations (DF, RKB, RT, GR, etc.) 3288.1'	Name of Producing Formation San Andres		Top Oil/Gas Pay San Andres		Tubing Depth 1944'			
Perforations 1535' - 1750' (33 holes)					Depth Casing Shoe 2449'			
TUBING, CASING AND CEMENTING RECORD								
HOLE SIZE	CASING & TUBING SIZE		DEPTH SET		SACKS CEMENT			
12 1/4"	8 5/8"		899'		625 sx - circ to surf			
7 7/8"	5 1/2"		2449'		435 sx - circ to surf			

V. TEST DATA AND REQUEST FOR ALLOWABLE

OIL WELL (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank 1/21/94	Date of Test 2/7/94	Producing Method (Flow, pump, gas lift, etc.) pumping	
Length of Test 24 hrs	Tubing Pressure	Casing Pressure	Choke Size <i>Port ID-2</i> <i>3-11-94</i> <i>comp BK</i>
Actual Prod. During Test	Oil - Bbls. 64	Water - Bbls. 200	Gas - MCF 70

GAS WELL

Actual Prod. Test - MCF/D	Length of Test	Bbls. Condensate/MMCF	Gravity of Condensate
Testing Method (pilot, back pr.)	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in)	Choke Size

VI. OPERATOR CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation
Division have been complied with and that the information given above
is true and complete to the best of my knowledge and belief.

Debby O'Donnell
Signature
Debby O'Donnell Engineering Tech.
Printed Name Title
2/9/94 (405) 552-4511
Date Telephone No.

OIL CONSERVATION DIVISION

Date Approved FEB 18 1994
By SUPERVISOR, DISTRICT II
Title _____

INSTRUCTIONS: This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.