

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN 1. LOCATE*

NO-OIL COMMISSION

FOR APPROVED
OMB NO. 1004-0137
Expires: December 31, 1991

WELL COMPLETION OR RECOMPLETION REPORT AND LOG*

1. TYPE OF WELL:		OIL WELL ☒	GAS WELL ☐	DRY ☐	Other ☐		
2. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. ENVR. ☐	Other ☐
3. NAME OF OPERATOR Devon Energy Corporation							
4. ADDRESS AND TELEPHONE NO. 20 North Broadway Suite 1500 Oklahoma City, OK 73102 (405) 552-4511							
5. LOCATION OF WELL (Report location clearly and in accordance with any State requirements) At surface 2270' FSL & 840' FEL At top prod. interval reported below same At total depth same							
14. PERMIT NO.				DATE ISSUED OCT 22 1993			
15. DATE SPUDDED 6-28-93		16. DATE T.D. REACHED 7-9-93		17. DATE COMPL. (Ready to prod.) 8-19-93		18. ELEVATIONS (OF. RKS. RT. OR, ETC.)* 3628'	
19. ELEV. CASINGHEAD 3628'		20. TOTAL DEPTH, MD & TVD 4500'		21. PLUG. BACK T.D., MD & TVD 4427'		22. IF MULTIPLE COMPL., HOW MANY*	
23. INTERVALS DRILLED BY ROTARY TOOLS		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 3765' - 3844' Queen Sand (34 perfs, 0.52" diameter)		25. WAS DIRECTIONAL SURVEY MADE yes - enclosed		26. TYPE ELECTRIC AND OTHER LOGS RUN DLL, CN, CBL	
27. WAS WELL CORED no		28. CASING RECORD (Report all strings set in well)					
CASING SIZE/GRADE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE	
8 5/8"		24#		965'		12 1/4"	
5 1/2"		15.5#		4500'		7 7/8"	
TOP OF CEMENT, CEMENTING RECORD		AMOUNT PULLED					
surface - 480 sx		none					
surface - 1110 sx		none					
29. LINER RECORD		30. TUBING RECORD		31. PREPARATION RECORD (Check one, put log number)			
SIZE		DEPTH SET (MD)		PACKER SET (MD)		32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2 7/8"		3950'		3950'		DEPTH INTERVAL (MD)	
ACCEPTED FOR RECORD		CARLSBAD, NEW MEXICO		3765' - 3844'		AMOUNT AND KIND OF MATERIAL USED	
1120 gals 15% NEPE HCl acid		29,490 gals gelled 2% KCl		water + 64,500# sand		33. PRODUCTION	
DATE FIRST PRODUCTION 8-19-93		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) pumping		WELL STATUS (Producing or shut-in) producing		34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) sold	
DATE OF TEST 9-8-93		HOURS TESTED 24		CHOKE SIZE		PROD'N. FOR TEST PERIOD 72	
OIL—BSL.		GAS—MCF.		WATER—BSL.		OIL GRAVITY-API (CORR.)	
72		-		370		0:1	
FLOW. TUBING PRESS.		CASING PRESSURE		CALCULATED 24-HOUR RATE 72		GAS—MCF.	
-		-		-		-	
35. LIST OF ATTACHMENTS logs (3), inclination record		36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records		TEST WITNESSED BY Danny Hockett		SIGNED Deby O'Donnell	
TITLE Engineering Technician		DATE 9-30-93					

*(See Instructions and Spaces for Additional Data on Reverse Side)

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.

38. GEOLOGIC MARKERS

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
				Base Salt	2100'	2100'
				Yates	2387'	2387'
				Bowers	3203'	3203'
				Queen	3330'	3330'
				Penrose	3631'	3631'
				Grayburg	3887'	3887'

RAILROAD COMMISSION OF TEXAS OIL AND GAS DIVISION

Form W-12
(1-1-71)

INCLINATION REPORT (One Copy Must Be Filed With Each Completion Report.)		6. RRC District
1. FIELD NAME (as per RRC Records or Wildcat)	2. LEASE NAME	7. RRC Lease Number (Oil completions only)
3. OPERATOR	4. ADDRESS	8. Well Number
5. LOCATION (Section, Block, and Survey)		9. RRC Identification Number (Gas completions only)
		10. County

RECORD OF INCLINATION

*11. Measured Depth (feet)	12. Course Length (Hundreds of feet)	*13. Angle of Inclination (Degrees)	14. Displacement per Hundred Feet (Sine of Angle X100)	15. Course Displacement (feet)	16. Accumulative Displacement (feet)
243	243	1/4	.44	1.06	1.06
473	230	1/2	.88	2.02	3.08
733	260	3/4	1.31	3.40	6.48
965	232	1/2	.88	2.04	8.52
1451	486	1 3/4	3.06	14.87	23.39
1672	221	2 3/4	4.81	10.63	34.02
1766	94	3	5.25	4.93	38.95
1890	124	3	5.25	6.51	45.46
2045	155	2 1/4	3.94	6.10	51.56
2202	157	3	5.25	8.24	59.80
2325	123	3	5.25	6.45	66.25
2387	62	2	3.50	2.17	68.42
2571	184	3	5.25	9.66	78.08
2665	94	2	3.50	3.29	81.37
2820	155	1 1/2	2.63	4.07	85.44
3005	185	1 3/4	3.06	5.66	91.10

If additional space is needed, use the reverse side of this form.

17. Is any information shown on the reverse side of this form? ☒ yes ☐ no
18. Accumulative total displacement of well bore at total depth of 4500 feet = 123.79 feet.
- *19. Inclination measurements were made in - ☐ Tubing ☐ Casing ☐ Open hole ☒ Drill Pipe
20. Distance from surface location of well to the nearest lease line _____ feet.
21. Minimum distance to lease line as prescribed by field rules _____ feet.
22. Was the subject well at any time intentionally deviated from the vertical in any manner whatsoever? NO
(If the answer to the above question is "yes", attach written explanation of the circumstances.)

INCLINATION DATA CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of the inclination data and facts placed on both sides of this form and that such data and facts are true, correct, and complete to the best of my knowledge. This certification covers all data as indicated by asterisks (*) by the item numbers on this form.

Signature of Authorized Representative

BETH BRAZAL - Bookkeeper
Name of Person and Title (type or print)
Brazeal, Inc.-d/b/a CapStar Drilling
Name of Company

Telephone: 214 727-8367
Area Code

OPERATOR CERTIFICATION

I declare under penalties prescribed in Sec. 91.143, Texas Natural Resources Code, that I am authorized to make this certification, that I have personal knowledge of all information presented in this report, and that all data presented on both sides of this form are true, correct, and complete to the best of my knowledge. This certification covers all data and information presented herein except inclination data as indicated by asterisks (*) by the item numbers on this form.

Signature of Authorized Representative

Name of Person and Title (type or print)

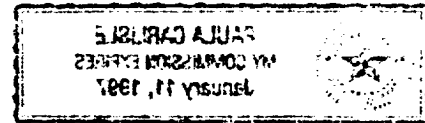
Operator

Telephone: _____
Area Code

Railroad Commission Use Only:

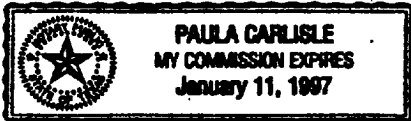
Approved By: _____ Title: _____ Date: _____

* Designates items certified by company that conducted the inclination surveys.



STATE OF TEXAS }
 }
COUNTY OF COLLIN }

The attached instrument was acknowledged before me on the
13th day of July, 1993 by James L. Brazeal as
President of BRAZEAL, INC. d/b/a CapStar Drilling.



Paula Carlisle
Paula Carlisle - Notary Public

My commission expires:
January 11, 1997

