

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

2834 FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

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
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
DEVON ENERGY CORPORATION (NEVADA)

3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
660' FSL & 1980' FEL, Unit O, Section 9-T21S-R26E, Eddy Cnty, NM

5. Lease Designation and Serial No.
NM-NM0400877

6. If Indian, Allottee or Tribe Name
N/A

7. If Unit or CA, Agreement Designation
SW933

8. Well Name and No.
BQ 2 FEDERAL COM. #1

9. API Well No.
30-015-21389

10. Field and Pool, or Exploratory Area
Avalon (Strawn)

11. County or Parish, State
Eddy Cnty, 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>Frac'd Strawn</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.)*

11-10-98 thru 11-18-98 Ran gauge ring to 10,145'. Set plug in on/off tool at 9590' and tested same with inhibited packer fluid. Released from on/off tool and TOH with 2 3/8" production string. Ran redressed on/off tool on 2 7/8" work string and hydrotested above the slips. Loaded and tested annulus. Swabbed tubing down. Pulled plug from on/off tool.

RU BJ Services. Frac'd Strawn perfs 9716-9724' (down tubing with packer set at 9591') with 128510 scf nitrogen + 141 bbls CO2 + 14000 gals 70/65 quality binary foam + 21000# 20/40 bauxite at AIR 10.2 BPM with 8200 psi. Jetted and washed out sand to 10,000'.

Flowed to test tank. Ran sinker bar to PBTD 10,123'. Set blanking plug in "F" nipple at 9591'. Bled down tubing press, released on/off tool. TOH with 2 7/8" work string. Ran and tested redressed on/off tool and 2 3/8" production tubing. Loaded hole with packer fluid and reverse circ'd. ND BOP, installed tubing tree. Landed tree with 12,000# tubing compression. Swabbed packer fluid to test tank. Pulled S-type blanking plug from "F" nipple. Repaired production equipment.

11-19-98 Re-open to sales for testing.

12-12-98 Installed compressor. Resumed testing while adjusting compressor.

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

Signed Candace R. Graham
(This space for Federal or State office use)

Candace R. Graham

Title Engineering Technician

Date January 6, 1999

Approved by _____

Conditions of approval, if any:

Title

(ORIG. SGD.) DAVID R. GLASS

Date

RECEIVED

JAN 11 1999

SLM
SOSWELL, NY