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

## State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

RECEIVED

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

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

APR 1 2 1993

DISTRICT III								•		
1000 Rio Brazos Rd., Aztec, NM 87410	REQU	EST FO	R ALLOWAE	LE AND	AUTHORIZ	ZATION	day.			
[ <b>.</b>	T	OTRAN	ISPORT OIL	AND NAT	TURAL GA	10				
Operator	<del></del>	<u> </u>	101 0111 012	Well API No.						
•		. , ,				30-	015-27236			
Devon Energy Corporation (Nevada)							<u> </u>	Δ		
Address			01.671	OTZ	72102					
20 North Broadway	Suite	1500	Okłahoma C	ity. OK	73102 T (Please expla	uin)			-	
Reason(s) for Filing (Check proper box)		<b>О</b> i. Т	ransporter of:		A (1 100010 Capital	,				
New Well			> C							
Recompletion $\bigsqcup$	Oil		Try Gas			سر.				
Change in Operator	Casinghead	Gas	Condensate		- N.W	<u> </u>				
f change of operator give name and address of previous operator		_		11	2000 CO					
•				/ Jela	· ·					
II. DESCRIPTION OF WELL		SE		0,000			( Lease	1-1-	ase No.	
Lease Name	1	i	001 14000, 12010	<b></b>	U111 - 1	State 1	Federal or Fee			
Cactus State		#1	Catelaw Di	aw East	Delawar	e <u> </u>		L-670	10	
Location										
Unit Letter C	. 96	0 1	Feet From The	orth Line	and18	60F	et From The	west	Line	
Olin Detail										
Section 16 Townsh	ip 21S	1	Range26E	, N	<b>мРМ</b> ,	Edd	у		County	
							-			
II. DESIGNATION OF TRAI	NSPORTE	R OF OII	AND NATU	RAL GAS						
Name of Authorized Transporter of Oil		or Condens		Address (Giv			copy of this for		ਧ)	
Pride Pipeline	LX		. —	P. O.	Box 243	6 Abile	ne, TX	79604		
Name of Authorized Transporter of Casi	nghead Gas	$\overline{X}$	or Dry Gas	Address (Giv	e address to wi	rich approved	copy of this for	m is to be ser	ਾਂ)	
Feagan Gathering Co		ر ت		4000	N. Big S	pring St	e. 305_	Midland	, TX 797	
If well produces oil or liquids,		Sec.	Twp. Rge.		y connected?		? APK 11			
ir well produces on or inquies,	C	16	21S   26E	1 -	16 6	i ar	proximat	ely 4/1	.4/93	
f this production is commingled with the							<u> </u>			
f this production is commingled with the	I from any our	er rease or p	oo, give community	ing 0:00:						
V. COMPLETION DATA				N 117.11	1 31/	Descrip	Plug Back	Come Dec'y	Diff Res'v	
Designation of Completion	. ~	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back ja	Willie Wes A	Diff Kes v	
Designate Type of Completion		<u>l</u> x		Total Doorh		<u> </u>	DDTD		.1	
Date Spudded	, -	Date Compl. Ready to Prod.			Total Depth			P.B.T.D.		
2/5/93		3/24/93			4361'			4325'		
Elevations (DF, RKB, RT, GR, etc.)	Name of Pr	Name of Producing Formation			Top Oil/Gas Pay			Tubing Depth		
3295.1' Cherry Canyon "D"			on "D"	Cherry Canyon 3120			Depth Casing Shoe			
Perforations							Depth Casing	Shoe		
3170 <b>' -</b> 3220' (100	holes)						4361	1		
	T	UBING,	CASING AND	CEMENTI	NG RECOR	D				
HOLE SIZE		CASING & TUBING SIZE			DEPTH SET			SACKS CEMENT		
17 1/2"		13 3/8		350'			450 sks			
12 1/4"	+	8 5/8		2193'				0 sks		
7 7/8"	<del></del>	5 1/2"			4361'			0 sks		
		3 1/2	<u></u>	<del> </del>	+301		1 02	<u> </u>		
The state of the s	OT FOR	T T ONLY	DIE				<u> </u>			
V. TEST DATA AND REQUI OIL WELL (Test must be after	SI FUK A	LLLUYY A	<b>uli</b> Klaad =H am∃ == =:	the entrol to a	r avecad ton ell	owable for thi	s depth or he fo	or full 24 hou	rs.)	
			j ioaa ou ana mus	Dentinia M	ethod (Flow, p	umn ene lift i	etc.)		,	
Date First New Oil Run To Tank	Date of Ter			Producing M			····/			
3/24/93	3/	3/21/93				lowing	Choke Size			
Length of Test	Tubing Pre	Tubing Pressure		Casing Pressure						
24 hrs.		135			560		0	<u> 24</u>		
Actual Prod. During Test	Oil - Bbls.	Oil - Bbls.		Water - Bbis.			Gas- MCF			
-		81		1_	87	<u> </u>		185		
GAG TITLE										
GAS WELL		Tost		Rhis Conde	nsate/MMCF		Gravity of C	ondensale		
Actual Prod. Test - MCF/D	Length of	Length of Test			Bbis. Condensate/MMCF			_		
					Cooling Descript (Chart in)		Choke Size			
Testing Method (pitot, back pr.)	(pitot, back pr.) Tubing Pressure (Shut-in)		Casing Pressure (Shut-in)							
VI. OPERATOR CERTIFI	CATE OF	COMP	LIANCE		<u> </u>		ATION!	\\ /\O\	NI.	
					OIL COI	42FKA	ATION [	אפועור	אוע	
I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above							Ann a a	4000		
is true and complete to the best of my knowledge and belief.					Date Approved APR 2 6 1993					
	11				e whhink		<del></del>			
Chal My	1/1 -			11		~~····	01011PA	014		
	you			∥ By_			SIGNED	51		
Signature					MIKE WILLIAMS					

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

Charles W. Horsman

4/7/93

Signature

Date

Printed Name

1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.

Title

MIKE WILLIAMS

SUPERVISOR, DISTRICT IS

- 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.

Engr

Title

552-4508 Telephone No.

4) Separate Form C-104 must be filed for each pool in multiply completed wells.