District I PO Box 1960, Hobbs, NM \$241-1960
District II
PO Drawer DD, Artesia, NM \$5211-0719

District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV

State of New Mexico Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994 Instructions on back Submit to Appropriate District Office 5 Copies

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

AMENDED REPORT

PO Box 2083, Santa Fe, NM 87504-2088

Opposite name of Addree Opposite and Addree OGRD Number Devon Energy Corporation (Keva) 20 N. Broadway, Suite 1500 RECEIVED Name 'An Number 'Shall Call 'Shall Call 'An Number 'Shall Call 'Shall Call 'Source Call Line 'Name 'Shall Call 'Source Call Line 'Name 'Shall Call 'Source Call Call Call W Draw Delaware OC 11 'GA 'Name 'Source Call Call Call W Draw Delaware OC 11 'GA 'Well Nember 'State Call Call Call W Draw Delaware OC 11 'GA 'Well Nember 'Shall Call 'Boutom Hole Location Reget Lot All Formation North 2145 East Call All 'Boutom Hole Location 'Call Parel Name		KEQUES					mon	LAI	ION TO TH			
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"Choke Size "Oil "Water "Gas "AOF "Test Method 24/64" 123 bb1 57 bb1 114 MCF "F "F hereby certify that the rules of the Oil Conservation Division have been complied 01L CONSERVATION DIVISION F hereby certify that the rules of the Oil Conservation Division bave been complied 01L CONSERVATION DIVISION F hereby certify that the rules of the Oil Conservation Division bave been complied 01L CONSERVATION DIVISION F hereby certify that the rules of the Oil Conservation Division bave been complied 01L CONSERVATION DIVISION F hereby certify that the rules of the Oil Conservation Division bave been complete to the best of my OIL CONSERVATION DIVISION F mature: Math Mathemation F OIL CONSERVATION DIVISION hereby certify that the rules of the Oil Conservation Division bave been complete to the best of my Neproved by: SUPERVISOR, DISTRICT IF need name: Charles W. Horsman Title: e: District Engineer Approval Date: OCT 3 1 1994 e: Io/In/94 Phone: (405) 552-4508	8550 50 Well Comple * Sped Date 6-21-94 * Hole Size 7 1/2 2 1/4 7 7/8 Well Test Date	Ci ition Data 8-	* Ready Da -2-94 * C	ale Caring & Tubing 3 3/8 8 5/8	ery 4400	"C" " TD	" Sec.	2200	T21S-R26E * PBTD 3224 ' (RBH	** Se 500 1275	3122-3260'	
24/64" 123 bb1 57 bb1 114 MCF F I hereby certify that the rules of the Oil Conservation Division have been complied th and that the information given above is true and complete to the best of my proved by: OIL CONSERVATION DIVISION weldige and belief. Approved by: SUPERVISOP. DISTRICT IF nature: Charles W. Horsman Title: Ite: District Engineer Approval Date: OCT 3 1 1994	8550 50 Well Comple * Sped Date 6-21-94 * Hole Size 7 1/2 2 1/4 7 7/8 Well Test Date	ata	* Ready Date	ale Caning & Tubing 3 3/8 8 5/8 5 1/2 * Tes	ery 4400 5 Size	"C	" Sec.	. 16- 348 2200 4400	T21S-R26E * PBTD 3224 ' (RBF	* s 500 1275 650	3122-3260 '	
hereby certify that the rules of the Oil Conservation Division have been complied th and that the information given above is true and complete to the best of my provedge and belief. nature: Mach W/farApproved by: Charles W. Horsman te: District Engineer E: 10/11/54 Phone: (405) 552-4508	8550 50 Well Comple * Sped Date 6-21-94 ** Hole Size 7 1/2 2 1/4 7 7/8 Well Test Diale New Oil * Date New Oil 8-2-94	ata 10/0	* Ready Da -2-94 ** C 1: 0 Delivery Date 03/94	ale Caning & Tubing 3 3/8 8 5/8 5 1/2 * Tes	ery 4400 5 Size	"C	" Sec	2200 4400	T21S-R26E * PBTD 3224 ' (RBH	* Se 500 1275 650	* Cag. Pressure	
and that the information given above is true and complete to the best of my OIL CONSERVATION DIVISION wiedge and belief, Approved by: SUPERVISOR_DINTRICT II nature: Image: Charles W. Horsman Title: e: District Engineer Approval Date: OCT 31 1994 e: Image: Imag	3550 50 Well Comple " Sped Date 6-21-94 ** Hole Size 7 1/2 2 1/4 7 7/8 Well Test D " Date New Oil 8-2-94 " Choke Size	ata 10/0	* Ready Da -2-94 ** C 1: 1: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2: 2:	ale Caning & Tubing 3 3/8 5 5/8 5 1/2 * Tes 10/0 * W	ery 4400 5 Size 14 Date 13/94	"C	"Sec. " D 2 2 2 2 4 1 7 5 6 5	16- 348 2200 400	T21S-R26E * PBTD 3224 ' (RBH * Tbg. Pr 175 p	* Sa 500 1275 650	3122-3260' htts Centent * Ceg. Pressure 860 psi	
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Charles W. Horsman Met. E: District Engineer Approval Date: OCT 3 1 1994 E: /////94 Phone: (405) 552-4508	8550 Well Comple ¹¹ Sped Date 6-21-94 ¹¹ Hole Size 7 1/2 2 1/4 7 7/8 . Well Test Di ¹² Date New Oil 8-2-94 ¹² Choke Size 24/64'' hereby certify that the n h and that the information	ata * Ges D 10/0 12 wies of the Oil	** Ready Date -2-94 ** C 1 1 2 03/94 ** Oil 23 23 23 23 23 23 24	ale Casing & Tubing 3 3/8 5 5/8 5 1/2 * Tes 10/0 * W 57 b ivision have been	ery 4400 g Size xt Date 3/94 Vater b1 a complied	"C	" Sec. " Test Leag 24 hr " Geo 14 MCF	16- 348 2200 400	T21S-R26E * PBTD 3224 ' (RBF 	* Sa 500 1275 650	* Cag. Pressure 860 psi * Test Method F	
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IF T "Am	HIS IS AN AMENDED REPORT, CHECK THE BOX LABLED ENDED REPORT" AT THE TOP OF THIS DOCUMENT	22
Repo Repo	ort all gas volumes at 15.025 PSIA at 60°. Art all oil volumes to the nearest whole barrel.	23.
8000	quest for ellowable for a newly drilled or deepened well must be mpanied by a tabulation of the deviation tests conducted in rdance with Rule 111.	
Al e	actions of this form must be filled out for allowable requests on and recompleted wells.	24.
Fill o chan other	ut only sections I, II, III, IV, and the operator certifications for ges of operator, property name, well number, transporter, or such changes.	25.
A	parate C-104 must be filed for each pool in a multiple	26.
-	bletion.	27.
impro opera	operly filled out or incomplete forms may be returned to not incomplete forms may be returned to	28 .
1.	Operator's name and address	29.
2.	Operator's OGRID number. If you do not have one it will be assigned and filled in by the District office.	30.
3.	Resean for filing code from the following table:	31.
	RC Recompletion	32.
	CH Change of Operator AO Add oil/condensate transporter CO Change oil/condensate transporter	33.
	AG Add gas transporter	The
	CG Change gas transporter RT Request for test allowable (Include volume	cond
	requested) If for any other reason write that reason in this box.	34.
4.	The API number of this well	35.
5.	The name of the pool for this completion	36.
6.	The pool code for this pool	37.
7.	The property code for this completion	38.
8.	The property name (well name) for this completion	39.
9.	The well number for this completion	
10.	The surface location of this completion NOTE: If the	40.
	United States government survey designates a Lot Number for this location use that number in the 'UL or lot no.' box. Otherwise use the OCD unit letter.	41.
	Culture des the OCD unit letter.	42.
11.	The bottom hole location of this completion	43.
12.	Lease code from the following table:	44.
	S State	45.

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- State Fee Jicarilla Navajo Ute Mountain Ute Other Indian Tribe
- 13. The producing method code from the following table: F P Flowing Pumping or other artificial lift
- MO/DA/YR that this completion was first connected to a gas transporter 14. 15.
- The permit number from the District approved C-129 for this completion
- 16. MO/DA/YR of the C-129 approval for this completion
- MO/DA/YR of the expiration of C-129 approval for this completion 17.
- 18. The gas or oil transporter's OGRID number
- Name and address of the transporter of the product 19.
- The number assigned to the POD from which this product will be transported by this transporter. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here. 20
- Product code from the following table: O Oil G Gas 21.

- T's ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Example: "Bettery A", "Jones CPD", etc.)
- The POD number of the storage from which water is moved from this property. If this is a new well or recompletion and this POD has no number the district office will assign a number and write it here.
- The ULSTR location of this POD if it is different from the well completion location and a short description of the POD (Exemple: "Battery A Water Tank", "Jones CPD Water Tank",etc.)
- MO/DA/YR drilling commenced
- MO/DA/YR this completion was ready to produce
- Total vertical depth of the well
- Plugback vertical depth
- Top and bottom perforation in this completion or casing shoe and TD if openhole
- inside diameter of the well bore
- Outside diameter of the casing and tubing
- Depth of casing and tubing. If a casing liner show top and bottom.
- Number of sacks of coment used per casing string

following test data is for an oil well it must be from a test lucted only after the total volume of load oil is recovered.

- MO/DA/YR that new oil was first produced
- MO/DA/YR that gas was first produced into a pipeline
- MO/DA/YR that the following test was completed
- Length in hours of the test
- Flowing tubing pressure oil wells Shut-in tubing pressure ges wells
- Flowing casing pressure oil wells Shut-in casing pressure gas wells
- Diameter of the choke used in the test
- Barrele of oil produced during the test
- Barrels of water produced during the test
- MCF of gas produced during the test
- Gas well calculated absolute open flow in MCF/D
 - The method used to test the well: F Flowing P Pumping S Swabbing

 - S Swabbing If other method please write it in.
- The signature, printed name, and title of the person authorized to make this report, the date this report was signed, and the telephone number to call for questione about this report 46.
- The previous operator's name, the signature, printed name, and title of the previous operator's representative authorized to verify that the previous operator no longer operates this completion, and the date this report was signed by that person 47.