## State of New Mexico

Form C-104

Energy, Minerals & Natural Resources Department

Revised October 18, 1994 Instructions on back

PO Box 1980, Hobbs, NM 88241-1980

District II

PO Drawer DD, Artesia, NM 88211-0719

District III

District IV

1000 Rio Brazos Rd., Aztec, NM 87410

**OIL CONSERVATION DIVISION** 

Submit to Appropriate District Office

2040 South Pacheco Santa Fe, NM 87505

5 Copies

AMENDED REPORT

2040 South Pa	•	,			<b>033</b> 7 4 D.T	F1 4 B1F5 4 F		<b>DIT</b> 1 <b>M</b> 20					•		
I.	REQ					E AND AU	THO	RIZATIO	NT	O TRA					
Operator Name and Address  Devon Energy Production Company, L.P.									OGRID Number 6137						
20 N. Broadway, Suite 1500 Oklahoma City, OK 73102-8260								Reason for Filing Code							
4 API	Okla Number	ihoma (	ity, Ol	K 73102	2-8260	5	Pool Nar			СН	1/1/2	000			
30-015-27884				Ingle Wells Delaware				ne					Pool Code 33745		
Property Code				Property Name				Name	•			<sup>3</sup> Well Number			
II. Surface Location				Todd 27 U Federal									12.		
UI or lot no.	Section	Townshi		Range	Lot.Idn	Feet from the		(0	I		T				
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UI or lot no.	Section	Townshi	p	Range	Lot.Idn	Feet from the	North/	South Line	Feet f	rom the	East/W	est Line	County		
12 Lse Code	13 Produc	ing Metho	od Code		<sup>14</sup> Gas Conn	ection Date	<sup>16</sup> C-129	Permit Number 16 C-129		" C-129 E	ffective Date 17 C-129 Expiration I		17 C-129 Expiration Da	te	
	ind Ga	s Tran	sport	ters											
	Transporter OGRID			<sup>19</sup> Transporter Name and Address				<sup>20</sup> POD		<sup>21</sup> O/G	1		ULSTR Location Description		
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Dalla				las, TX 75207											
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137 D 1						,									
IV. Prod	uced V	ater				<del></del>	24				-	<del></del>			
	852650						POD U	LSTR Location	and D	escription					
V. Well (	Comple	tion D	ata		· · · · · · · · · · · · · · · · · · ·							<del></del>			
25 Spud Date		²⁵ Rea	dy Date		27 TD		28 P	BTD		<sup>29</sup> Perforatio	ns		<sup>30</sup> DHC, DC, MC	_	
31	31 Hole Size		Т		2 Casing & 7	Tubing Size		33	Danth S	epth Set		34 Sacks Cement			
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	Test D	ata			-	<del></del>			***		i				
			Gas Del	Delivery Date 37 Test Date				38 Test Length		39 -	Гbg. Pre	<sup>40</sup> Csg. Pressure	;		
41 Choke Size			42 (	<sup>42</sup> Oil <sup>43</sup> Water			4 Gas		45 AOF		OF	46 Test Method			
I hereby certify t	hat the rule	s of the ()	il Conse	rvation div	vision have be	en complied		<del></del>					.1	_	
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rinted Name:		Seve M	cNally	y //			Approved by: ORIGINAL SIGNED BY TIM W. GUM Title: DISTRICT II SUPERVISOR							_	
itle: District Mana				nger U			<del> </del>	Approval Date: MAR 3 0 2000						-	
oate: 3/20/				hone:	(405) 23:					<u>√ √ ∠(</u>	<del>'UU</del>				
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