

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

AM OIL CONS COMMISSION *clst*
Drawer DD
Artesia, NM 88201
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 OPERATING CORPORATION

3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405)552-4527

4. Location of Well (Footage. Sec., T., R., M., or Survey Description)
686' FNL & 654' FWL, Sec. 4-17S-31E

5. Lease Designation and Serial No.
LC-o29426-B

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

7. If Unit or CA, Agreement Designation
N/A

8. Well Name and No.
H. E. West "B" # 74

9. API Well No.
30-015- **28264**

10. Field and Pool, or Exploratory Area
Grayburg Jackson Q, SR, GB, SA

11. County or Parish, State
Eddy County, 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 Spud, TD'd, set csg & change name
	<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.)*

Spud well @ 2:00 p.m., 10/11/95.

Ran 8 5/8" surface csg as follows: 12 jts 8 5/8", 24#, J-55, 8rd ST&C, 508.14'. Csg shoe @ 521'.

Cemented csg as follows: 190 sxs PSL "C" + 6% gel + 2% CaCl₂ + 1/4 lb/sk celloflake, wt 12.7 lbs/gal, yield 1.86 cft/sk. Tailed in w/200 sxs Class "C" + 2% CaCl₂, wt 12.7 lbs/gal, yield 1.52 cft/sk.

Circ'd cmt to surface.

Reached TD of 4075' @ 5:45 a.m., 10/18/95.

Ran 5 1/2" production csg as follows: top - 86 jts 5 1/2", 15.5#, J-55, 8rd LT&C, 3690'; marker jt - 1 jt 5 1/2", 15.5#, J-55, 8rd LT&C, 18.51'; bottom - 9 jts 5 1/2", 15.5#, J-55, 8rd LT&C, 18.51'. Csg shoe @ 4074', float collar @ 4028'.

Cemented csg as follows: 650 sxs PSL "C" + 4% gel + 5 lbs/sk salt + 1/4 lb/sk cello-seal, wt 13 lbs/gal, yield 1.76 cft/sk. Tailed in w/400 sxs Class "H" + 10% gyp + 1/4 lb/sk cello-seal, wt 14.5 lbs/gal, yield 1.52 cft/sk. Circ'd cmt to surface.

Change name of well from: West "B" #74

to: H. E. West "B" #74

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

Signed Karen Byers Title KAREN BYERS ENGINEERING TECHNICIAN

(This space for Federal or State office use)

Date 10/26/95

Approved by _____
Conditions of approval, if any: _____

Title _____

Date 10/26/95