State of New Mexico

Energy, Minerals & Natural Resources Department

Form C-104 Revised February 10, 1994

Instructions on back

PO Box 1980, Hobbs, NM 88241-1980 District II

1000 Rio Brazos Rd., Aztec, NM 87410

PO Drawer DD, Artesia, NM 88211-0719

OIL CONSERVATION DIVISION PO Box 2088

Submit to Appropriate District Office

District III

Santa Fe, NM 87504-2088

5 Copies

District IV

AMENDED REPORT

PO Box 2088, Santa Fe, NM 87504-2088			<u></u>
I. REQUEST FOR A	ALLOWABLE AND AUTHORIZAT	ION TO TRAN	SPORT
Operator Name and Address Devon Energy Corporation (Nevada)		² OGRID Number 6137	
20 N. Broadway Suite 1500 Oklahoma City, OK 73102-826	50	³ Reason for Filing Code CO eff. date 11-01-95	
API Number 30-025-05112	⁵ Pool Name Denton Devonian		⁴ Pool Code 16910
⁷ Property Code 3526	[°] Property Name Whitman, Lee "B"		⁹ Well Number 7

II **Surface Location** UI or lot no. Section Township Range Lot.Idn Feet from the North/South Line Feet from the East/West Line County 0 23 148 37E 330 South East Lea **Bottom Hole Location** UI or lot no. Section Township Lot.Idn Feet from the North/South Line Feet from the East/West Line County Lse Code Producing Method Code Gas Connection Date C-129 Permit Number C-129 Effective Date C-129 Expiration Date Oil and Cas Transporter

Transporter OGRID	Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
138648	Amoco Pipeline (ICT) 502 N. West Avenue Levelland, TX	851610	0	O-23-14S-37E Lea Co., NM
11447	J. L. Davis 211 N. Colorado Midland, TX 79701	851730 85163D		O-23-14S-37E Lea Co., NM

IV. Produced Water POD ULSTR Location and Description **Well Completion Data** [∞] Spud Date Ready Date ²⁷ TD 28 PBTD Perforations 30 Hole Size 31 Casing & Tubing Size 2 Depth Set 3 Sacks Cement VI. Well Test Data

⁴⁰ Choke Size	⁴ Ōil	42 Water	43 Gas		1	
			l Gas		" AOF	* Test Method
	the Oil Conservation division					
ith and that the information give	OIL CONSERVATION DIVISION					
nowledge and belief,	2 1.		10	iginal moneo	TOP CONTRACT	(TON
ignature: The H	ch		Approved by:	Libiani Alliani Libiani		CION
rinted Name: Kris Baxte	ŕ		Title:	<u> </u>		
	Representative		Approval Date:		000	C 0 4000
ate: 10/12/95	Phone: 405-23	5-3611				- 3 k 3 -
If this is a change of operato	r fill in the OGRID number a	nd name of the previ	ious operator			
Previous Operate	or Signature	Pr	inted Name		Title	Date