

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator Name and Address Devon Energy Corporation (Nevada) 20 N. Broadway Suite 1500 Oklahoma City, OK 73102-8260		² OGRID Number 006137	
		³ Reason for Filing Code CO EFFECTIVE 1-1-96	
⁴ API Number 30-025-20302	⁵ Pool Name Pearl Queen		⁴ Pool Code 49780
⁷ Property Code 003479	⁸ Property Name Mescalero Ridge Unit 35		⁹ Well Name 1

II ¹⁰ Surface Location

UI or lot no. I	Section 35	Township 19S	Range 34E	Lot.Idn	Feet from the 1980	North/South Line South	Feet from the 560	East/West Line East	County Lea
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¹¹ Bottom Hole Location

UI or lot no.	Section	Township	Range	Lot.Idn	Feet from the	North/South Line	Feet from the	East/West Line	County
¹² Lse Code	¹³ Producing Method Code Pumping		¹⁴ Gas Connection Date		¹⁵ C-129 Permit Number		¹⁶ C-129 Effective Date		¹⁷ C-129 Expiration Date

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ POD	²¹ O/G	²² POD ULSTR Location and Description
007440	EOTT P.O. Box 4666 Houston, TX 77210-4666	0842910	O	H 35-19S-34E Lea Co., NM
009171	GPM Gas Corporation 4001 Penbrook Odessa, TX 79762	0849230	G	H 35-19S-34E Lea Co., NM

IV. Produced Water

²³ POD	²⁴ POD ULSTR Location and Description
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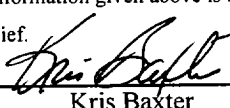
V. Well Completion Data

²⁵ Spud Date	²⁶ Ready Date	²⁷ TD	²⁸ PBTD	²⁹ Perforations
³⁰ Hole Size	³¹ Casing & Tubing Size	³² Depth Set	³³ Sacks Cement	

VI. Well Test Data

³⁴ Date New Oil	³⁵ Gas Delivery Date	³⁶ Test Date	³⁷ Test Length	³⁸ Tbg. Pressure	³⁹ Csg. Pressure
⁴⁰ Choke Size	⁴¹ Oil	⁴² Water	⁴³ Gas	⁴⁴ AOF	⁴⁵ Test Method

I hereby certify that the rules of the Oil Conservation division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature: 

Printed Name: Kris Baxter

Title: Marketing Representative

Date: 1/5/96

OIL CONSERVATION DIVISION

ORIGINAL SIGNED BY

GARY WINK

FIELD REP. II

Approved by:

Title:

Approval Date: JAN 11 1996

Phone: (405) 235-3611

⁴⁷ If this is a change of operator fill in the OGRID number and name of the previous operator

Previous Operator Signature	Printed Name	Title	Date
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