## **State of New Mexico**

Energy, Minerals & Natural Resources Department

Form C-104

Instructions on back

Revised February 10, 1994

PO Box 1980, Hobbs, NM 88241-1980

OIL CONSERVATION DIVISION

Submit to Appropriate District Office

District III

PO Box 2088

5 Copies

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| 1000 Rio Brazo<br>District IV                                       | s Rd., Azt                                      | tec, NM 8   | 7410                                    |                              | Santa F     | e, NN                  | 1 8750                      | )4-208                   | 8        |                       |                       |                                  | l A                                 | AMENDED REPORT  |  |
|---|---|-------------|---|------------------------------|-------------|------------------------|-----------------------------|--------------------------|----------|-----------------------|-----------------------|----------------------------------|-------------------------------------|-----------------|--|
| PO Box 2088, S  |   |             |   |                              |             |                        |                             |                          |          |                       |                       |                                  | -                                   |                 |  |
| I.  | REQU  |             | OR ALI                                  |                              | LE ANI      | D AUI                  | THOR                        | IZAT                     | ION      |                       |                       |                                  |                                     |                 |  |
| Operator Name and Address   |   |             |   |                              |             |                        |                             | OGRID Number             |          |                       |                       |                                  |                                     |                 |  |
| Devon Energy Corporation (Nevada)                                   |   |             |   |                              |             |                        |                             | 3 Reason for Filing Code |          |                       |                       |                                  |                                     |                 |  |
| 20 N. Broadway Suite 1500<br>Oklahoma City, OK 73102-8260           |   |             |   |                              |             |                        |                             | CO EFFECTIVE 1-1-96      |          |                       |                       |                                  |                                     |                 |  |
| API Number  |   |             |   |                              |             | <sup>5</sup> Pool Name |                             |                          |          |                       | T                     | Pool Code                        |                                     |                 |  |
|   | )25-2056  | 55          | :                                       | Pearl Queen                  |             |                        |                             |                          |          |                       |                       |                                  | 49780                               |                 |  |
| <sup>7</sup> Property Code  |   |             |   | <sup>8</sup> Property N      |             |                        |                             |                          | ne       |                       |                       |                                  | <sup>9</sup> Well Name              |                 |  |
| 0034  |   |             |   | Mescalero Ridge Unit 35      |             |                        |                             |                          |          |                       |                       |                                  | 2                                   |                 |  |
| II "Sur   | face L  | ocation     | <u> </u>                                |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
| UI or lot no.   | Section   | Township    | Range                                   | Lot.Idn                      | Feet from   | the N                  | North/Sout                  |                          |          | from the              | East/West Line        |                                  |                                     | County          |  |
| J   | 35  | 19S         | 34E                                     | 34E                          |             | 980                    | Sou                         | th 1980                  |          | )                     | East                  |                                  | Lea                                 |                 |  |
| " Bot   | tom H   | ole Lo      | cation                                  |                              | _           |                        | _                           |                          |          |                       |                       |                                  |                                     |                 |  |
| UI or lot no.   | Section Township  13 Producing Method C Pumping |             | Range                                   | Lot.Idn                      | Feet from   | the N                  | North/Sout                  | th Line Fee              |          | Feet from the         |                       | East/West Line                   |                                     | County          |  |
| 12 Lse Code   |   |             | d Code                                  | 14 Gas Conn                  | ection Date | 15 (                   | C-129 Pen                   |                          |          | <sup>16</sup> C-129 I | Effective Date        |                                  | <sup>17</sup> C-129 Expiration Date |                 |  |
|   |   |             |   |                              |             |                        |                             |                          |          |                       |                       | <u></u>                          |                                     | <u> </u>        |  |
| III. Oil a  | nd Ga   | s Tran      | sporters                                |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
| 18 Tran   | 18 Transporter                                  |             |   | <sup>19</sup> Transporter N  |             |                        | 2                           | <sup>20</sup> POD        |          | <sup>21</sup> O/G     |                       | <sup>22</sup> POD ULSTR Location |                                     |                 |  |
| OGRID   |   |             | and Address                             |                              |             |                        | -                           | 0040010                  |          |                       | and Description       |                                  |                                     |                 |  |
| 007440  |   |             | EOTT                                    |                              |             |                        |                             | 0842910 O                |          |                       |                       | H 35-19S-34E<br>Lea Co., NM      |                                     |                 |  |
|   |   |             | P.O. Box 4666<br>Houston, TX 77210-4666 |                              |             |                        |                             |                          |          |                       |                       | Lea Co., INVI                    |                                     |                 |  |
|   |   |             |   |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
| 009171  |   |             | GPM Gas Corporation                     |                              |             |                        | 0                           | 0849230 G                |          |                       |                       | H 35-19S-34E                     |                                     |                 |  |
|   |   |             | 4001 Penbrook                           |                              |             |                        |                             |                          | _        | <i>Y</i>              |                       | Lea Co.,                         | , NN                                | Λ               |  |
|   |   |             | Odessa, TX 79762                        |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
|   |   |             |   |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
|   |   |             |   |                              |             |                        | ļ                           |                          |          |                       |                       |                                  |                                     |                 |  |
|   |   |             | ĺ                                       |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
|   |   |             |   |                              |             |                        |                             |                          |          | ]                     |                       |                                  |                                     | <u></u>         |  |
|   |   |             |   |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
|   |   |             | ].                                      |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
|   |   |             |   |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
| IV. Proc  |   | Water       |   | *****                        |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
|   | <sup>23</sup> POD                               |             |   |                              |             | 24                     | POD ULS                     | TR Loca                  | tion and | l Descriptio          | n                     |                                  |                                     |                 |  |
|   |   |             | · .                                     |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
| V. Well   | Comp  | letion I    |   |                              |             |                        |                             |                          |          | - 10                  |                       |                                  | 20                                  |                 |  |
| <sup>25</sup> Spu   | d Date  |             | 26 Ready Date                           |                              |             | <sup>27</sup> TD       |                             |                          |          | <sup>28</sup> PBTD    | '                     |                                  | - 1                                 | 29 Perforations |  |
| 30 Hole Size  |   |             | <u> </u>                                | 31 Casing & Tubing Size      |             |                        |                             | 32 Depth Set             |          |                       | 33 Sacks Cement       |                                  |                                     |                 |  |
| - Hole Size   |   |             | Casing & Tuoning Size                   |                              |             |                        |                             | 2 Option 201             |          |                       |                       |                                  |                                     |                 |  |
|   |   |             |   |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
|   | <u></u>   |             |   | <del></del>                  |             | <u></u>                |                             |                          |          |                       |                       | -                                |                                     |                 |  |
|   |   |             | <del>-  </del>                          | -                            |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
| VI. Wel   | l Test  | Data        |   |                              |             |                        |                             |                          |          |                       |                       |                                  |                                     |                 |  |
|   |   |             |   | s Delivery Date 36 Test Date |             |                        |                             | 37 Test Length 36        |          |                       | 38 Tbg                | Fbg. Pressure 39 Csg. Pressure   |                                     |                 |  |
|   |   |             |   |                              |             |                        |                             | 4 ~                      |          |                       |                       | 44.405                           |                                     | 45 Test Method  |  |
| * Choke Size  |   | ⁴¹ Oil      | <sup>41</sup> Oil                       |                              |             | <sup>42</sup> Water    |                             | 43 Gas                   |          |                       | 44 AOF 45 Test Method |                                  |                                     |                 |  |
| *I hereby cert  | ify that the                                    | rules of th | e Oil Conser                            | ation divisio                | n have been | complie                | d                           |                          |          |                       |                       |                                  |                                     |                 |  |
| with and that   |   |             |   |                              |             |                        |                             |                          |          |                       |                       | ION DI                           | VIS                                 | SION            |  |
| knowledge and belief.   |   |             |   |                              |             |                        |                             | ORIGINAL SIGNED BY       |          |                       |                       |                                  |                                     |                 |  |
| Signature: Du Defee   |   |             |   |                              |             |                        | Approved by: GARY WINK      |                          |          |                       |                       |                                  |                                     |                 |  |
| Printed Name: Kris Baxter   |   |             |   |                              |             |                        | THIC.                       |                          |          |                       |                       |                                  |                                     |                 |  |
| Title: Marketing Representative  Date: 1/5/96 Phone: (405) 235-3611 |   |             |   |                              |             |                        | Approval Date: JAN 1 7 1393 |                          |          |                       |                       |                                  |                                     |                 |  |
| Date:   |   | 1/5/9       |   |                              |             |                        | <u> </u>                    |                          | *        |                       |                       |                                  |                                     |                 |  |
| 47 If this is   | a change o                                      | f operator  | fill in the OG                          | RID number                   | and name of | f the prev             | ious opera                  | ator                     |          |                       |                       |                                  |                                     |                 |  |

Printed Name

Previous Operator Signature

Date

Title

