

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
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 CORPORATION (NEVADA)

3. Address and Telephone No.
20 NORTH BROADWAY, SUITE 1500, OKLAHOMA CITY, OKLAHOMA 73102 (405) 235-3611

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Section 9-T21S-R26E (please see below)

5. Lease Designation and Serial No. NM0400877
6. If Indian, Allottee or Tribe Name N/A
7. If Unit or CA, Agreement Designation N/A
8. Well Name and No. (please see below)
9. API Well No. (please see below)
10. Field and Pool, or Exploratory Area Catclaw Draw, East (Delaware)
11. County or Parish, State Eddy Cnty, NM

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>Commingling at surface</u>
<input type="checkbox"/> Subsequent Report	<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
<input type="checkbox"/> Final Abandonment Notice	

(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.)*

Devon Energy Corporation (Nevada) is requesting approval for surface commingling and off-lease storage and measurement of hydrocarbon production from the following wells.

Devon Federal #3
2310' FNL & 2160' FEL
Unit G, Section 9-T21S-R26E
Eddy Cnty, NM

Cactus "9B" Federal #2
990' FNL & 2310' FEL,
Unit B, Section 9-T21S-R26E
Eddy Cnty, NM

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

Signed Candace R. Graham

Title CANDACE R. GRAHAM
ENGINEERING TECH.

Date 7/18/97

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any: _____

Title _____

Date _____

Devon Ener.
0480017

Devon
Cofclaw-Fed.



Cit. Serv
HBP
L-7010
3634

Devon

Devon
Cactus-St.

Devon

0400877

Inexco
12-1-77
HBC
3606

(So. Pat. Expl.)
K-5261 19a

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

So. Pat.
Expl.
9-21-75
K-5261
2085
HBC

Devon
Ener.
HBP
K-5721

Inexco
12-1-77
3606
HBC
W/2

Chi Oper.)
Oxy-St.

Dev. Disc.

Devon Ener.
L-7010

Devon
Cactus-St.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

Cit. Serv.
L-7010
UWC Disc.
F258

Inexco
(Fed.)
State

Wiser-
Francis
111907
Devon
31096

Kaiser-
Francis
A.M. Fed.
(8.6 Mil)
U.S.

OXY

L-7010
State

So. Pat

K-5261
Devon Ener.
Wiser-St.
State

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
6687 HBC
State

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
K-5721
State

U.S.

Devon Ener.
HBC
84

Inexco
HBC
10554478

Devon
L-6705

Devon
Cactus
St.

(Oxy)

2-BT
3.1 Mil.

Devon
Cactus-Fed.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
K-4473
7117



Devon Ener.
HBC
86233

L-539

Devon
Cactus
St.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
L-2922
2713
HBC

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
0400877

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
3606

15

Devon Ener.
Wiser-St.
K-5721



Devon (ARCo)

(ARCo) K-4334
Atoka Disc
Atoka 2.2 Mil.
Morr. 2 Mil.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
L-6705
K-4334
6527
HBC

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
K-4473
7117
U.S.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

State

State

Devon Ener.
Wiser-St.

L-2922
2713
HBC

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
10-20-74
Reserves
4-1-82
LG-13
HBC
State

21

26
State

Mewbourne Oil
4-1-2002
V-5061
18125
State

(Devon Ener.)
Hallwood Pet.

49.75%
K-4193

GLMOEG,
etal

14-1-82
LG-13
HBC

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.
K-4193
7500
HBC

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

Devon Ener.
Wiser-St.

Perry

Perry
3-1-200
98151
45500

Peppertree Ltd
Tenneco, etal
9-1-82
16624
HBC
Rifle Range
U.S.

(Hanagan)
Ocotillo Hills
W.C. Disc
Morr. 6.5 Mil.

State

GLMOEG,
etal

6-1-74
6-1-74
0265356
HBC

Hanagan
Pet.

6-1-74
6-1-74
0265356
HBC

Hanagan
Pet.

Hanagan
Pet.

Hanagan
Pet.

Hanagan
Pet.
6-1-74
0265356

22

U.S.
Pearl Berg

Peppertree Ltd
Hanagan Pet

Hunt Oil

Mobil
Hunt Oil

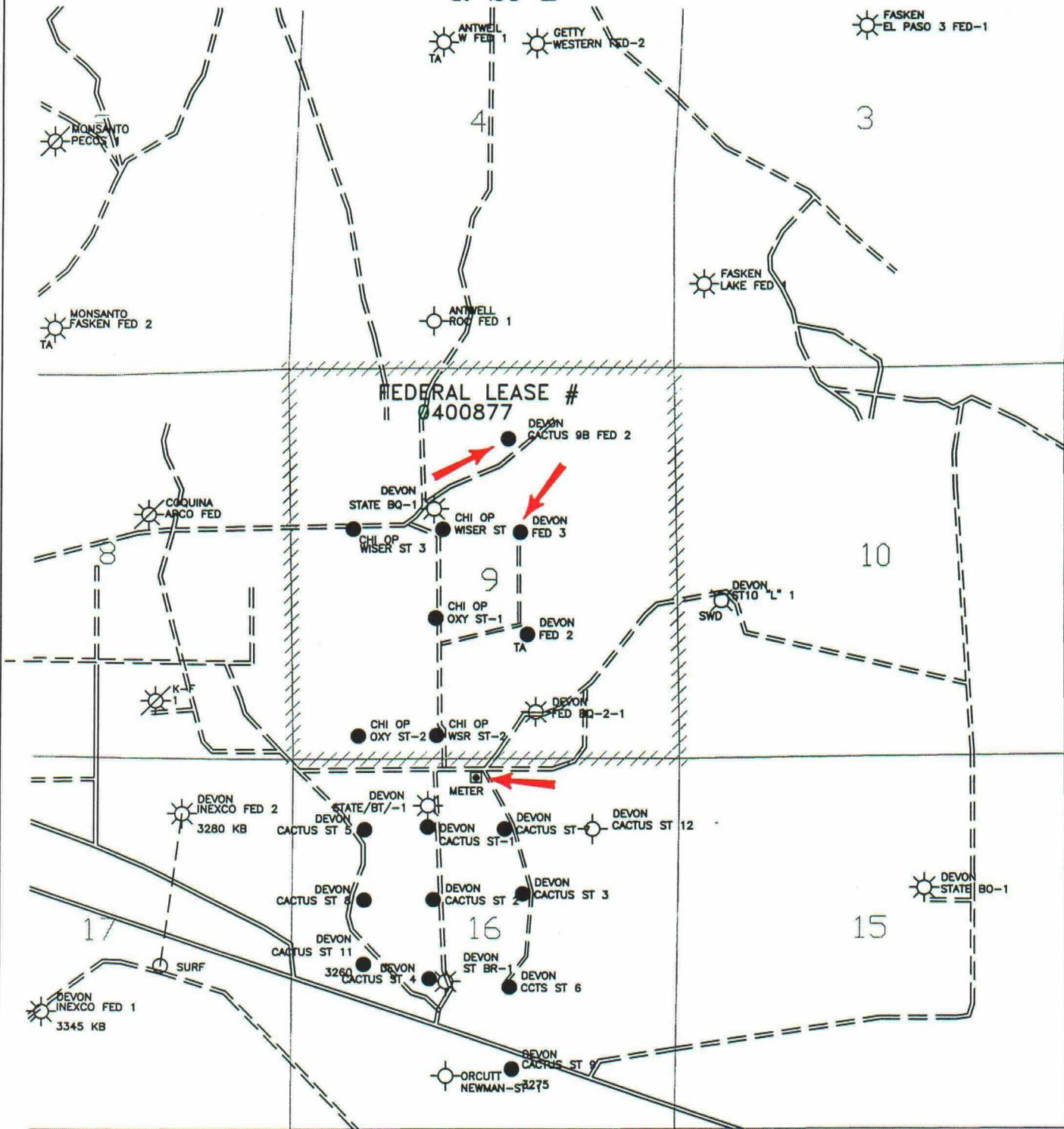
Mobil
Hunt Oil

Mobil
Hunt Oil

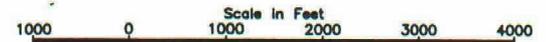
Mobil
Hunt Oil

Yates

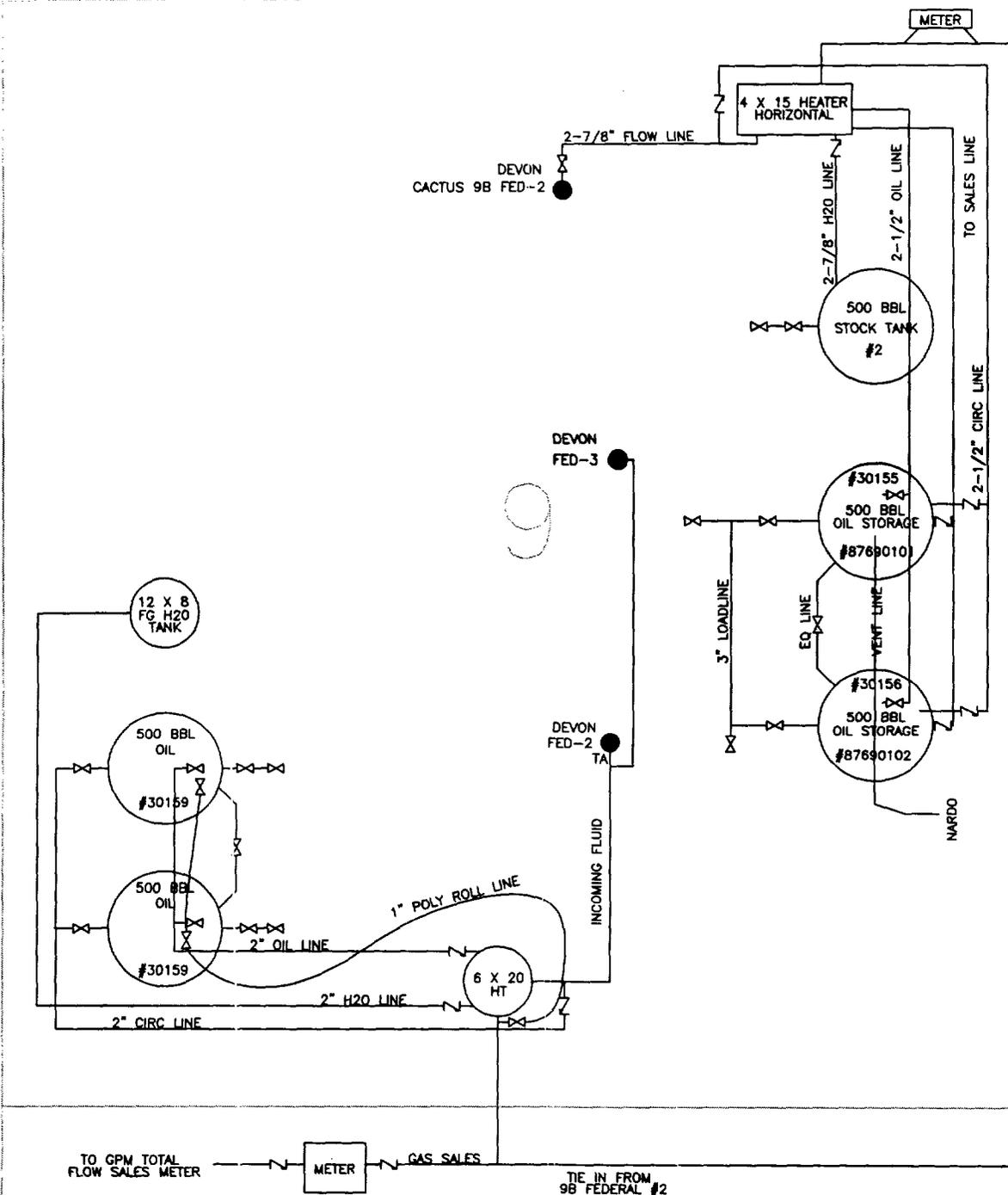
R 26 E



CATCLAW AREA
EDDY COUNTY, NEW MEXICO



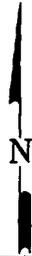
R 26 E



T
21
S

- Z CHECK VALVE
- X SEALABLE VALVE

16



CATCLAW-DRAW AREA
EDDY COUNTY, NEW MEXICO

9B FED. #2 & DEVON FED. BATT
OFF LEASE MEASUREMENT
EQUIPMENT DIAGRAM

9B FED-1B	

WF

July 21, 1997

Working Interest Owners

Re: Intent to Commingle Gas Production
Delaware Pool
Devon Federal #3
Cactus "9B" Federal #2
Sec. 9-T21S-R26E
Eddy County, New Mexico

Gentlemen:

This is to inform you, per BLM regulations, of our intention to surface commingle gas production from the referenced pool. We have attached a copy of our application to the BLM and wish to call your attention to a few items. First, please note that the legal locations of all wells included in this commingling are itemized. Second, please note the planned method of allocating gas production from each of the wells. We have also notified the NMOCD of our intentions in this matter.

We anticipate commingled gas sales of about 220 MCFD. If you need additional information, please advise.

Sincerely,

DEVON ENERGY CORPORATION



Walter M. Frank
District Engineer

Intent to Commingle Gas Production
Delaware Pool wells
Sec. 9-T21S-R26E
Eddy County, New Mexico
July 21, 1997
Page 2

WIO Address List

	Certified Mail No.
BONNEVILLE FUELS CORP (PARTICIPATE) ATTN DAVE SPELMAN 1550 LINCOLN SUITE 1800 DENVER CO 80264	Z 447 031 379
OXY USA INC ATTN ERMA GALINDO PO BOX 50250 MIDLAND TX 79710	Z 447 031 380
DAVID FARMER PO BOX 1173 MIDLAND TX 79702	Z 447 031 381
TOM E JOHNSON PO BOX 1707 MIDLAND TX 79702	Z 447 031 382
RIVERHILL ENERGY CORP C/O COASTAL MANAGEMENT PO BOX 970412 DALLAS TX 75397-0412	Z 447 031 383
ST MARY LAND & EXPL CO 1776 LINCOLN STREET SUITE 1100 DANVER CO 80203	Z 447 031 384
SANTA FE ENERGY OPERATING PARTNERS 550 WEST TEXAS SUITE 1330 MIDLAND TX 79701	Z 447 031 385

Devon Fed 3 & Cactus 9B-2 (7-22-97) Auth. to commingle at surf

Is your RETURN ADDRESS completed on the reverse side?

SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: <p style="text-align: center;">OXY USA, INC. Attn: Erma Galindo P.O. Box 50250 Midland, TX 79710</p>		4a. Article Number <p style="text-align: center;">Z 447 031 380</p>	
		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
5. Received By: (Print Name)		7. Date of Delivery	
6. Signature: (Addressee or Agent) <p style="text-align: center;">X</p>		8. Addressee's Address (Only if requested and fee is paid)	

Thank you for using Return Receipt Service.

PS Form 3811, December 1994 Domestic Return Receipt

Devon Fed 3 & Cactus 9B-2 (7-22-97) Auth. to Commingle at surf

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3. Article Addressed to: <p style="text-align: center;">Bonneville Fuels Corp. Attn: Dave Spelman 1660 Lincoln, Suite 1800 Denver, CO 80264</p>		4a. Article Number <p style="text-align: center;">Z 447 031 379</p>	
		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
5. Received By: (Print Name)		7. Date of Delivery	
6. Signature: (Addressee or Agent) <p style="text-align: center;">X</p>		8. Addressee's Address (Only if requested and fee is paid)	

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Devon Fed 3 & Cactus 9B-2 (7-22-97) Auth to commingle @ surface

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3. Article Addressed to: <p style="text-align: center;">DAVID FARMER PO BOX 1173 MIDLAND TX 79702</p>		4a. Article Number <p style="text-align: center;">Z 447 031 381</p>	
		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
5. Received By: (Print Name)		7. Date of Delivery	
6. Signature: (Addressee or Agent) <p style="text-align: center;">X</p>		8. Addressee's Address (Only if requested and fee is paid)	

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	3. Article Addressed to: RIVERHILL ENERGY CORP C/O COASTAL MANAGEMENT PO BOX 970412 DALLAS TX 75397-0412		4a. Article Number Z 447 031 383	
	5. Received By: (Print Name)		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
	6. Signature: (Addressee or Agent) X		7. Date of Delivery	
		8. Addressee's Address (Only if requested and fee is paid)		

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

Devon Fed 3 & Cactus 8B-2 (7-22-97) Auth to commingle @ surface

Is your RETURN ADDRESS completed on the reverse side?	SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
	3. Article Addressed to: TOM E JOHNSON PO BOX 1707 MIDLAND TX 79702		4a. Article Number Z 447 031 382	
	5. Received By: (Print Name)		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
	6. Signature: (Addressee or Agent) X		7. Date of Delivery	
		8. Addressee's Address (Only if requested and fee is paid)		

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Domestic Return Receipt

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Devon Fed 3 & Cactus 9B-2 (7-22-97) Auth. to commingle @ surface

Is your RETURN ADDRESS completed on the reverse side?

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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

**SANTA FE ENERGY OPERATING
550 WEST TEXAS SUITE 1330
MIDLAND TX 79701**

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X

4a. Article Number
Z 447 031 385

4b. Service Type
 Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

Domestic Return Receipt

Devon Fed 3 & Cactus 9B-2 (7-22-97) Auth. to commingle at surf

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
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I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

**ST MARY LAND & EXPL CO
1776 LINCOLN STREET STE 1100
DENVER CO 80203**

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X

4a. Article Number
Z 447 031 384

4b. Service Type
 Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery

8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

Domestic Return Receipt