Bureau of Land Management Carlsbad Resource Area Headquarters P.O. Box 1778 Carlsbad, New Mexico 88220

RE: Hearing on Application of Dennis Langlitz for Authority to Inject

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•	Saladar Unit No. 007	30-015-10468	N-33-20S-28E
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The wells are located eight (8) miles northeast of Carlsbad in Eddy County, New Mexico. I am seeking authorization to inject into the Yates Formation.

The hearing on the application will be conducted on October 16, 2008 at 8:15 a.m. at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505.

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Should you have any questions about the application, contact me at 1425 S. Country Club Circle, Carlsbad, NM 88220, 575.361.8259.

Sincerely,

Mr. Trent Nielson P.O. Box 685 Carlsbad, New Mexico 88221-0685

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Devon Energy Corp. 20 N. Broadway, Suite 1500 Oklahoma City, OK 78102

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Sincerely,

CML Exploration LLC P.O. Box 890 Snyder, TX 79550

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BPH Petroleum Co., Inc. 1360 Post Oak Blvd., Suite 500 Houston, TX 77056-3020

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Mewbourne Oil Co. P.O. Box 5270 Hobbs, NM 88241

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Cimerex Energy Co. 15 E. 5th Street, Suite 1000 Tulsa, OK 74103

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Chesapeake Operating, Inc. P.O. Box 18496 Oklahoma City, OK 73154-0496

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Sincerely,

Exxon Mobil Corp. P.O. Box 4358

Houston, TX 77210-1792

Attn: Dolores O. Howard, Sr. Regulatory Sepc.

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Dear Ms. Howard:

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Sincerely,

Merit Energy Co. 13727 Noel Road, Suite 500 Dallas, TX 75240

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Tom Brown, Inc. P.O. Box 2608 Midland, TX 79702

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Yates Petroleum Corp. 105 South 4th Street Artesia, NM 88210

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5 Form 3811, February 2004	Domestic Return Receipt 102595-02	3811, February 2004	Domestic Return Receipt 102595-02-

COMPLETE THIS SECTION ON DELIVERY (Signature	18 1	D. Is delivery address different from item 1? C.) Yes If YES, enter delivery address below: C.) No	3. Service Type VI Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D. 4. Restricted Delivery? (Extra Fee) □ Yes	H996	rn Receipt 102595-02-M-1540	COMPLETE THIS SECTION ON DELIVERY	A. Signature X	D. Is delivery address different from fleim 1? ☐ Yes If YES, enter delivery address below: ☐ No.	3. Service Type ☐ Certified Mall ☐ Express Mall ☐ Registered ☐ Return Recelpt for Merchandise ☐ Insured Mall ☐ C.O.D.	4. Restricted Delivery? (Extra Fee)	In Receipt 102595-02-M-1540
ANDER: GOMPLETE THIS SECTION Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.	 Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	1. Article Addressed to: 5.9 BINE ROYALLY TRUST		2. Article Numl 7007 2580 0002 8258	PS Form 3811, February 2004 Domestic Return Receipt	SENDIER, COMPLETE THIS SECTION	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailplece, or on the front if snace permits.	1. Article Addressed to: DAVIS BLOS LLC.		2. Artic 7007 2680 0002 8258 °	PS Form 3811, February 2004 Domestic Return Receipt