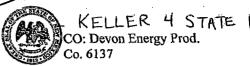
	[11	_			OTG-W
DATE IN 9,2, // SUSPENSE	ENGINEER WVJ	LOGGED IN 9.2.11	TYPE	DHC	PANO. 1124541937
		/		UF 70	
	ABOVE	THIS LINE FOR DIVISION USE ONLY	· · · · · · · · · · · · · · · · · · ·		

NEW MEXICO OIL CONSERVATION DIVISION

- Engineering Bureau -

1220 South St. Francis Drive, Santa Fe, NM 87505



ADMINISTRATIVE APPLICATION CHECKLIST 20-025-36643

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE **Application Acronyms:** [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication] [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling] [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement] [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion] [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase] [PPR-Positive Production Response] [EOR-Qualified Enhanced Oll Recovery Certification] [1] TYPE OF APPLICATION - Check Those Which Apply for [A] Location - Spacing Unit - Simultaneous Dedication □ NSL □ NSP □ SD Check One Only for [B] or [C] Commingling - Storage - Measurement [B] ☑ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☐ OLM [C] Injection Disposal - Pressure Increase - Enhanced Oil Recovery ☐ WFX ☐ PMX ☐ SWD ☐ IPI ☐ EOR ☐ PPR [D]Other Specify NOTIFICATION REQUIRED TO: - Check Those Which Apply, or Does Not Apply [2] [A] Working, Royalty or Overriding Royalty Interest Owners [B] Offset Operators, Leaseholders or Surface Owner [C] Application is One Which Requires Published Legal Notice Notification and/or Concurrent Approval by BLM or SLO
U.S Bureau of Land Menagement Commissioner of Public Lands, State Land Office D [E] For all of the above, Proof of Notification or Publication is Attached, and/or, [F]Waivers are Attached SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE [3] OF APPLICATION INDICATED ABOVE. CERTIFICATION: I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division. Note: Statement must be completed by an individual with managerial ancior supervisory capacity. Title Date Print or Type Name Signature SPENCE LAIRD e-mail Address

District I 1625 N. Franch Drive, Hobbs, NM 88240

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-107A Revised June 10, 2003

District II

1301 W. Grand Avenue, Artesia, NM 88210

District III
1000 Rio Brazos Road, Azicc, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, New Mexico 87505

APPLICATION TYPE X_Single Well
Establish Pre-Approved Pools
EXISTING WELLBORE

APPLICATION FOR DOWNHOLE COMMINGLING

X Yes No

Devon Energy Production Company, LP	20 N.	Broadway, Oklahoma City, OK 73102	1470					
Operator		Address	(C-TTV)					
NM-101610 Kel	ler 4 State 1 Unit K o	f Sec 4 T23S R35E	Lea					
Lease	Vell No. Unit Letter-S	Section-Township-Range	County					
OGRID No. 6137 Property	Code <u>29408</u> API No. <u>30-0</u>	25-36643 Lease Type:Fe	deral X State Fee					
DATA ELEMENT	UPPER ZONE	INTERMEDIATE ZONE UNITED SOUTH ROCK	LOWER ZONE					
Pool Name	Delaware OLL	Bone Spring & 1L						
Pool Code								
Top and Bottom of Pay Section (Perforated or Open-Hole Interval)	8584' - 8722' Perforated	9938' - 9952' Perforated						
Method of Production (Flowing or Artificial Lift)	Artificial Lift	Artificial Lift						
Bottomhole Pressure (Note: Pressure data will not be required if the bottom perforation in the lower zone is within 150% of the depth of the top perforation in the upper zone)	N/A	N/A						
Oil Gravity or Gas BTU (Degree API or Gas BTU)								
Producing, Shut-In or New Zone	Producing	Old Zone (reopening)						
Date and Oil/Gas/Water Rates of Last Production. (Note: For new zones with no production history, applicant shall be required to attach production	Date: 7/28/2010	Date: 9/6/2007						
estimates and supporting data.)	Rates: 4 bod 10 mcf 32 bwd	Rates: 3 bod 30 mcf 15 bwd						
Fixed Allocation Percentage	Oil Gas	Oil Gas	Oil Gas					
(Note: If allocation is based upon something other than current or past production, supporting data or explanation will be required.)	Allocation % at a later date	Allocation % at a later date	%					
	ADDITION	AL DATA						
Are all working, royalty and overriding If not, have all working, royalty and ov	royalty interests identical in all com	mingled zones?	Yes No X Yes X No					
Are all produced fluids from all commi	Are all produced fluids from all commingled zones compatible with each other? Yes X No							
Will commingling decrease the value of	Will commingling decrease the value of production? Yes No_X							
If this well is on, or communitized with, state or federal lands, has either the Commissioner of Public Lands or the United States Bureau of Land Management been notified in writing of this application? Yes X No								
NMOCD Reference Case No. applicab	le to this well:		_					
Attachments: C-102 for each zone to be commingled showing its spacing unit and acreage dedication. Production curve for each zone for at least one year. (If not available, attach explanation.) For zones with no production history, estimated production rates and supporting data. Data to support allocation method or formula. Notification list of working, royalty and overriding royalty interests for uncommon interest cases. Any additional statements, data or documents required to support commingling.								
PRE-APPROVED POOLS								
If application is to establish Pre-Approved Pools, the following additional information will be required:								
List of other orders approving downhole commingling within the proposed Pre-Approved Pools List of all operators within the proposed Pre-Approved Pools Proof that all operators within the proposed Pre-Approved Pools were provided notice of this application. Bottomhole pressure data.								
I hereby certify that the information above is true and complete to the best of my knowledge and belief.								
SIGNATURE SPUL	SIGNATURE — DATE 8/8/2011							
TYPE OR PRINT NAME	Spence Laird TE	LEPHONE NO. (<u>405</u>) <u>228</u>	<u>3-8973</u>					

Spence Laird

E-MAIL ADDRESS <u>spence.laird@dvn.com</u>

DISTRICT I 1625 N. French Dr., Hobbs, NM 86240 DISTRICT II 811 South First, Artesia, NM 86210

State of New Mexico Energy, Minerals and Natural Resources Department

Form C-102 Revised March 17, 1999

Submit to Appropriate District Office

State Lease - 4 Copies
Fee Lease - 3 Copies

DISTRICT III 1000 Rio Brazos Rd., Aztec, NM 87410

DISTRICT IV 2040 South Pacheco, Santa Fc, NM 87605

OIL CONSERVATION DIVISION

2040 South Pacheco Santa Fe, New Mexico 87504-2088.

C AMENDED REPORT

	WELL LOCATION AND ACREAGE DEDICATION PLAT API Number Pool Code Pool Name						Pool Name		··
30-025-	36643	BONE SPRING							
Property	Code	Property Name Well						Well N	umber
				K	ELLER "4" S			1	
ogrid N 6137	0.		DEV	ON ENE	Operator Nam RGY PRODUC	CTION CO., L.I	۶.	Eleva 354	
					Surface Loca	ation			
UL or lot No.	Section	Township	Range	Lot idn	Feet from the	North/South line	Peet from the	East/West line	County
K	4	23 S	35 E		1980	SOUTH	1475	WEST	LEA
			Bottom	Hole Lo	cation If Diffe	rent From Sur	face	<u> </u>	
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acre	Joint a	or Infill Co	nsolidation (Code Or	der No.				
NO ALL	OWABLE Y					ONTIL ALL INTER APPROVED BY		EEN CONSOLID	ATED
					 		i hereb	OR CERTIFICATION CONTINUES THE AMERICAN PROPERTY OF COMPANY OF CONTROL OF CON	formation

SPENCE LAIRD ANALY ST REGULATORY Title Date SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of uctual surveys made by me or under my supervison and that the same is true and correct to the best of my belief FEBRUARY 3, 2005 3556.0 353FX Date Surveyed L. JONES Signat sional Silrespor Prof

DISTRICT I 1625 N. Prench Dr., Hobbs, NM 88240 DISTRICT II 811 South First, Artesia, NM 88210

State of New Mexico

Energy, Minerals and Natural Resources Department

Form C-102 Revised March 17, 1999

Submit to Appropriate District Office

State Lease - 4 Copies Fee Lease - 3 Copies

DISTRICT III 1000 Rio Brezos Rd., Artec, NM 87410 DISTRICT IV

2040 South Pacheco, Santa Fc. NM 87605

OIL CONSERVATION DIVISION

2040 South Pacheco

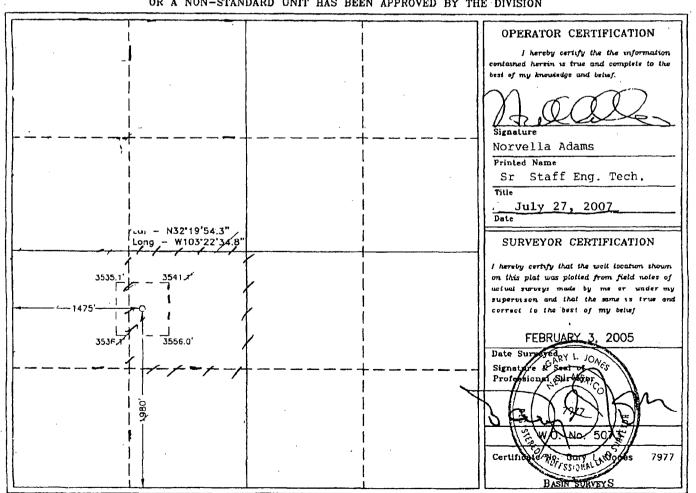
Santa Fe, New Mexico 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API 30-025-	Number 36643	97663				Pool Name Wildcat Delaware					
294	D'S	Property Name KELLER "4" STATE						Well Number			
ogrid N	0.	Operator Name Eleva DEVON ENERGY PRODUCTION CO., L.P. 354									
Surface Location											
UL or lot No.	Section	Township	Range	Lot ldn	Feet from the	North/South line	Peet from the	East/West line	County		
K	4	23 S	35 E		1980	SOUTH	1475	WEST	LEA		
			Bottom	Hole Loc	cation If Diffe	rent From Sur	face				
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	Esst/West line	County		
Dedicated Acre	s Joint o	or Infill Con	nsolidation (Code Or	l der No. <i>W</i> S	L-5678	7-A	<u> </u>	<u>L</u>		

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION





August 25, 2011

New Mexico Oil Conservation Division 1220 South St. Francis Drive Santa Fe, New Mexico 87505

Re: Downhole Commingling Keller 4 State #1 NWSW Section 4-T23S-R35E Lea County, New Mexico

Gentlemen:

I have reviewed the files of Devon Energy Production Company, L.P. regarding the ownership of the referenced well and find that the ownership of the working interest, royalty and overriding royalty interest are uniform with respect to Devon's request to downhole commingle the following pools/intervals:

Wildcat Delaware - Pool Code: 97663

Rock Lake Bone Spring South - Pool Code: 52769

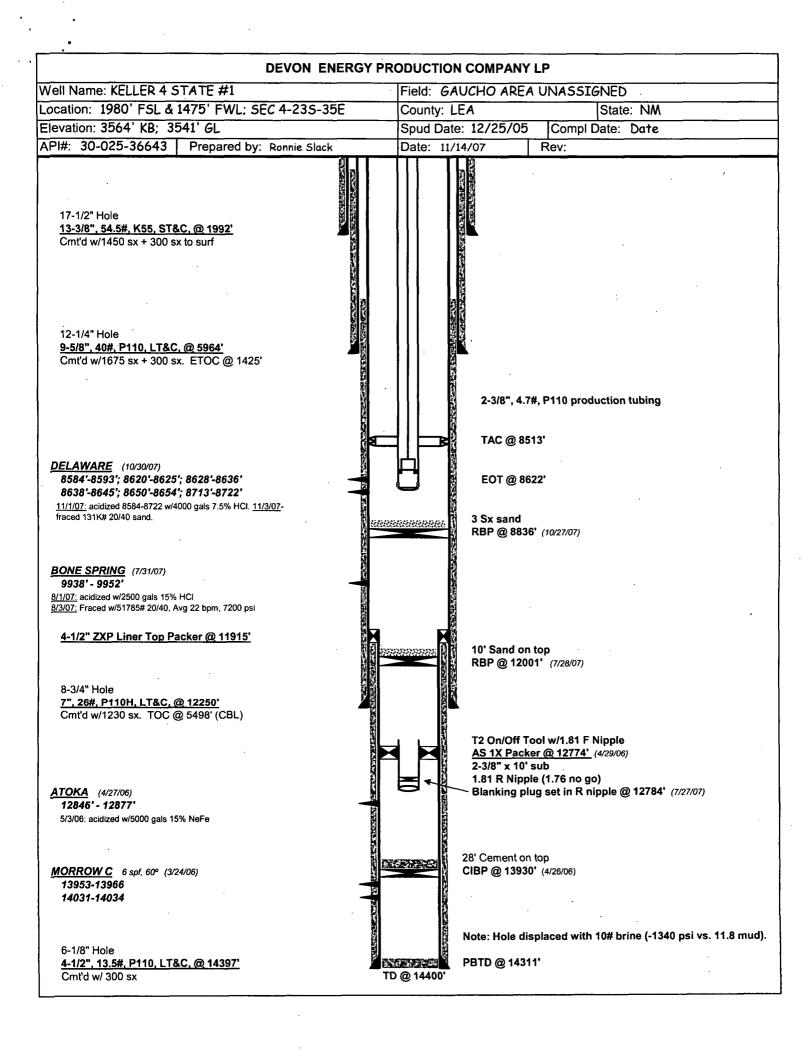
If there are any questions or if additional information is required feel free to call me at (405) 552-8040.

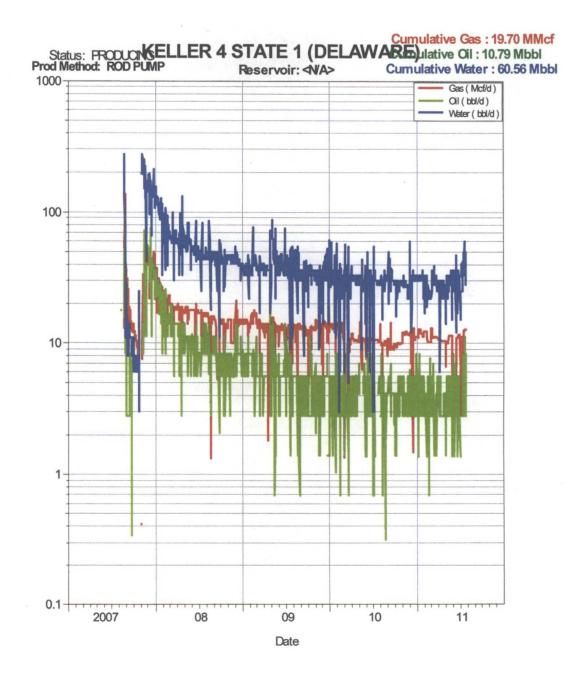
Yours very truly,

DEVON ENERGY PRODUCTION COMPANY, L.P. Katila McDonnell

Katie A. McDonnell

Landman





Well's current 30 day avg in the Delaware is 4 BO, 10 MCF, & 32 BW Delaware perfs: 8584-8722

Keller 4 State 1 - Bone Spring test numbers

```
Pmp test to battery
8-22-07 tst, 15-0-182
8-23-07, 19-13-274
8-24-07, 53-54-170
8-25-07, 45-58-179
8-26-07, 47-115-72
8-27-07, 53-136-28
8-28-07, 42-72-63
8-29-07, 8-50-11
8-30-07, 14-43-30
8-31-07, 6-32-28, well was pumped off, 100' cover over pumpl
9-1-07, 3-31-14
9-2-07, 3-31-17
9-3-07, 3-29-14
9-4-07, 3-29-14
9-5-07, 3-31-8
9-6-07, 3-26-14, shot fluid level, pumped dn, level at seat nipple. Final report
```

Average for the Bone Spring would be 3 BO, 30 MCF, & 15 BW

Bone Spring perfs: 9938 - 9952

<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240 District II 1301 W. Grand Avenue, Artesia, NM 88210 District III 1000 Rio Brazos Road, Aztec, NM 87410 District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico **Energy Minerals and Natural Resources** Department Oil Conservation Division 1220 South St. Francis Dr.

For closed-loop systems that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, submit to the appropriate NMOCD District Office.

Form C-144 CLEZ

July 21, 2008

Closed-Loop System Permit or Closure Plan Application

Santa Fe, NM 87505

(that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure)

Type of action: Permit Closure

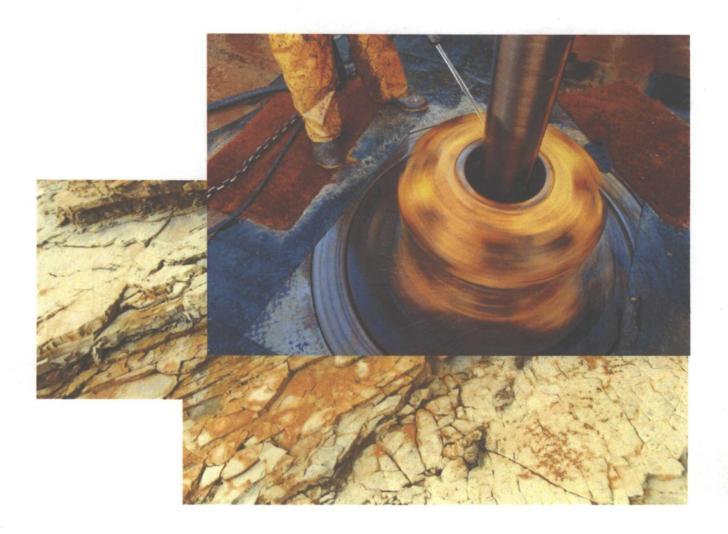
Instructions: Please submit one application (Form C-144 CLEZ) per individual closed-loop system request. For any application request other than for a closed-loop system that only use above ground steel tanks or haul-off bins and propose to implement waste removal for closure, please submit a Form C-144.

Operator: Devon Energy Production Co., LP	OGRID #: 6137				
Address: 20 North Broadway OKC, OK 73102-8260	OGIAD II.				
Facility or well name: Keller 4 State #1					
API Number: 30-025-36643 OCD					
U/L or Qtr/Qtr NESW Section 4 Township 23S					
Center of Proposed Design: Latitude Longitude	· · · · · · · · · · · · · · · · · · ·				
Surface Owner: Federal State Private Tribal Trust or Indian Allotn	•				
2. Closed-loop System: Subsection H of 19.15.17.11 NMAC Operation: Drilling a new well Workover or Drilling (Applies to activities which require prior approval of a permit or notice of intent) P&A Above Ground Steel Tanks or Haul-off Bins Signs: Subsection C of 19.15.17.11 NMAC					
12"x 24", 2" lettering, providing Operator's name, site location, and emerger	•				
Signed in compliance with 19.15.3.103 NMAC	ſ				
Closed-loop Systems Permit Application Attachment Checklist: Subsection B of 19.15.17.9 NMAC Instructions: Each of the following items must be attached to the application. Please indicate, by a check mark in the box, that the documents are attached. Design Plan - based upon the appropriate requirements of 19.15.17.11 NMAC Operating and Maintenance Plan - based upon the appropriate requirements of 19.15.17.12 NMAC Closure Plan (Please complete Box 5) - based upon the appropriate requirements of Subsection C of 19.15.17.9 NMAC and 19.15.17.13 NMAC Previously Approved Design (attach copy of design) API Number: Previously Approved Operating and Maintenance Plan API Number:					
	nd Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC)				
Previously Approved Operating and Maintenance Plan API Number: S. Waste Removal Closure For Closed-loop Systems That Utilize Above Groun Instructions: Please indentify the facility or facilities for the disposal of liquid	nd Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) Is, drilling fluids and drill cuttings. Use attachment if more than two				
Previously Approved Operating and Maintenance Plan API Number: 5. Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Instructions: Please indentify the facility or facilities for the disposal of liquid facilities are required. Disposal Facility Name: CRI Disposal Facility Name:	nd Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) Is, drilling fluids and drill cuttings. Use attachment if more than two Disposal Facility Permit Number: R9166 Disposal Facility Permit Number:				
Previously Approved Operating and Maintenance Plan API Number: 5. Waste Removal Closure For Closed-loop Systems That Utilize Above Groun Instructions: Please indentify the facility or facilities for the disposal of liquid facilities are required. Disposal Facility Name: CRI	nd Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) Is, drilling fluids and drill cuttings. Use attachment if more than two Disposal Facility Permit Number: R9166 Disposal Facility Permit Number:				
S. Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Instructions: Please indentify the facility or facilities for the disposal of liquid facilities are required. Disposal Facility Name: CRI Disposal Facility Name: Will any of the proposed closed-loop system operations and associated activities	nd Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) Is, drilling fluids and drill cuttings. Use attachment if more than two Disposal Facility Permit Number: Soccur on or in areas that will not be used for future service and operations? Itions: Itiate requirements of Subsection H of 19.15.17.13 NMAC on I of 19.15.17.13 NMAC				
Previously Approved Operating and Maintenance Plan API Number: 5. Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Instructions: Please indentify the facility or facilities for the disposal of liquid facilities are required. Disposal Facility Name: CRI Disposal Facility Name: Will any of the proposed closed-loop system operations and associated activities Yes (If yes, please provide the information below) No Required for impacted areas which will not be used for future service and operation Soil Backfill and Cover Design Specifications based upon the appropriate Re-vegetation Plan - based upon the appropriate requirements of Subsections.	nd Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) Is, drilling fluids and drill cuttings. Use attachment if more than two Disposal Facility Permit Number:				
Previously Approved Operating and Maintenance Plan API Number: 5. Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Instructions: Please indentify the facility or facilities for the disposal of liquid facilities are required. Disposal Facility Name: CRI Disposal Facility Name: Will any of the proposed closed-loop system operations and associated activities Yes (If yes, please provide the information below) No Required for impacted areas which will not be used for future service and operation of Soil Backfill and Cover Design Specifications based upon the appropriate requirements of Subsection Site Reclamation Plan - based upon the appropriate requirements of Subsection Site Reclamation Plan - based upon the appropriate requirements of Subsection Operator Application Certification:	nd Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) Is, drilling fluids and drill cuttings. Use attachment if more than two Disposal Facility Permit Number:				
Previously Approved Operating and Maintenance Plan API Number: 5. Waste Removal Closure For Closed-loop Systems That Utilize Above Ground Instructions: Please indentify the facility or facilities for the disposal of liquid facilities are required. Disposal Facility Name: CRI Disposal Facility Name: Will any of the proposed closed-loop system operations and associated activities Yes (If yes, please provide the information below) No Required for impacted areas which will not be used for future service and operation Soil Backfill and Cover Design Specifications based upon the appropriate Re-vegetation Plan - based upon the appropriate requirements of Subsection Site Reclamation Plan - based upon the appropriate requirements of Subsection Operator Application Certification: I hereby certify that the information submitted with this application is true, according to the proposed content of the prop	nd Steel Tanks or Haul-off Bins Only: (19.15.17.13.D NMAC) Is, drilling fluids and drill cuttings. Use attachment if more than two Disposal Facility Permit Number:				

OCD Approval: Permit Application (including closure plan) Closure Plan (only)					
OCD Representative Signature:	Approval Date:				
Title:	OCD Permit Number:				
8. Closure Report (required within 60 days of closure completion): Subsection K of 19.15.17.13 NMAC Instructions: Operators are required to obtain an approved closure plan prior to implementing any closure activities and submitting the closure report. The closure report is required to be submitted to the division within 60 days of the completion of the closure activities. Please do not complete this section of the form until an approved closure plan has been obtained and the closure activities have been completed. Closure Completion Date:					
9. <u>Closure Report Regarding Waste Removal Closure For Closed-loop Systems</u> Instructions: Please indentify the facility or facilities for where the liquids, drift two facilities were utilized.					
Disposal Facility Name:	Disposal Facility Permit Number:				
Disposal Facility Name:	Disposal Facility Permit Number:				
Were the closed-loop system operations and associated activities performed on or in areas that will not be used for future service and operations? Yes (If yes, please demonstrate compliance to the items below) No					
Required for impacted areas which will not be used for future service and operations: Site Reclamation (Photo Documentation) Soil Backfilling and Cover Installation Re-vegetation Application Rates and Seeding Technique					
Operator Closure Certification: I hereby certify that the information and attachments submitted with this closure report is true, accurate and complete to the best of my knowledge and belief. I also certify that the closure complies with all applicable closure requirements and conditions specified in the approved closure plan.					
Name (Print):	Title:				
Signature:	Date:				
e-mail address:	Telephone:				



Commitment Runs Deep



Design Plan
Operation & Maintenance Plan
Closure Plan
Workover Operations

SENM July 2008

I. Design Plan

Above ground steel tanks will be used for the management of all workover fluids.

II. Operations and Maintenance Plan

Devon will operate and maintain all of the above ground steel tanks involved in workover operations in a prudent manner to prevent any spills. If a leak develops, the appropriate division district office will be notified within 48 hours of the discovery and the leak will be addressed. During an upset condition the source of the spill is isolated and addressed as soon as it is discovered. Free liquids will be removed and loose topsoil will be used to stabilize the spill. The contaminated soil will be either bio-remediated or excavated and taken to an agency approved disposal facility.

III. Closure Plan

All workover fluids will go to above ground steel tanks and will be hauled by various trucking companies to an agency approved disposal facility.

Impacted areas which will not be used for future service or operations will be reclaimed and reseeded as stated in the APD.