

**STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**APPLICATION OF DEVON ENERGY PRODUCTION
COMPANY, L.P. FOR A NON-STANDARD OIL SPACING
AND PRORATION UNIT, AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

Case No. 14,992

**APPLICATION OF DEVON ENERGY PRODUCTION
COMPANY, L.P. FOR A NON-STANDARD OIL SPACING
AND PRORATION UNIT, AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

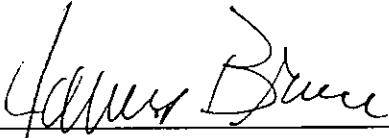
Case No. 14,993

AFFIDAVIT OF NOTICE

COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Devon Energy Production Company, L.P.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or working interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the operators or working interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rules.



James Bruce

Oil Conservation Division
Case No. _____
Exhibit No. 8

SUBSCRIBED AND SWORN TO before me this 12 day of June, 2013 by James
Bruce.

My Commission Expires: June 21, 2016

M. Krahn
Notary Public



OFFICIAL SEAL
Marcus Krahn
NOTARY PUBLIC STATE OF NEW MEXICO
My Commission Expires: June 21, 2016

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)
jamesbruc@aol.com

May 9, 2013

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of two applications for a non-standard unit, *etc.*, filed with the New Mexico Oil Conservation Division by Devon Energy Production Company, L.P., regarding wells in the SE¼ of Section 30 and the E½ of Section 31, Township 23 South, Range 29 East, N.M.P.M., Eddy County, New Mexico.

These matters are scheduled for hearing at 8:15 a.m. on Thursday, May 30, 2013, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an offset interest owner or operator to the wells, who may be affected by these applications, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting these matters at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, May 23, 2013. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Devon Energy Production Company, L.P.

EXHIBIT



EXHIBIT A

COG Operating LLC
One Concho Center
600 West Illinois
Midland, Texas 79701

Gene Pollack
524 Spring Meadows
Stephenville, TX 76401

Chase Oil Corporation
P.O. 1767
Artesia, NM 88211

Marie Ellayna Ryan
503 W. Orchard Lane
Carlsbad, NM 88220

Geraldetta Marrs
1909 Sentry Circle
Carlsbad, NM 88220

Chevron U.S.A. Inc.
15 Smith Road
Midland, TX 79705

Mid Continent Energy, Inc.
P.O. Box 8909
Tucson, AZ 85738

Lerwick I, Ltd.
Suite 1250
508 West Wall
Midland, TX 79701

Roden Participants, Ltd.
Roden Associates, Ltd.
Roden Exploration Company
Suite 740
2603 Augusta Drive
Houston, TX 77057

Cimarex Energy Co. of Colorado
Suite 600
600 North Marienfeld

Nadel and Gussman Permian, L.L.C.
Suite 508
601 North Marienfeld
Midland, Texas 79701

SENDER: 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 mailpiece, or on the front if space permits.

Article Addressed to:

Cimarex Energy Co. of Colorado
Suite 600
600 North Maricfield
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature Bonnie Russell ☐ Agent ☐ Addressee
B. Received by (Printed Name) Bonnie Russell C. Date of Delivery 5-13-13
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

7012 3050 0001 7053 9843

2. Article Number
(Transfer from service label)

Domestic Return Receipt

D NT

102595-02-M-1540

PS Form 3811, February 2004

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

CARLSBAD, NM 88220

Postage \$ \$0.66
Certified Fee \$3.10
Return Receipt Fee (Endorsement Required) \$2.55
Restricted Delivery Fee (Endorsement Required) \$0.00
Total Postage & Fees \$ \$6.31

0500

03

Postmark

MEXICO

05/09/2013

Sent To Marie Ellayna Ryan
503 W. Orchard Lane
Carlsbad, NM 88220
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7012 0470 0001 5975 3382

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

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MIDLAND, TX 79701

Postage \$ \$0.66
Certified Fee \$3.10
Return Receipt Fee (Endorsement Required) \$2.55
Restricted Delivery Fee (Endorsement Required) \$0.00
Total Postage & Fees \$ \$6.31

0500 7501-8965
Postmark
05/09/2013

Sent To Cimarex Energy Co. of Colorado
Suite 600
600 North Maricfield
Midland, TX 79701
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2008

See Reverse for Instructions

SENDER: 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Marie Ellayna Ryan
503 W. Orchard Lane
Carlsbad, NM 88220

2. Article Number
(Transfer from service label)

7012 0470 0001 5975 3382

PS Form 3811, February 2004

Domestic Return Receipt

D NT

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature Marie Ellayna Ryan ☐ Agent ☒ Addressee
B. Received by (Printed Name) Marie Ellayna Ryan C. Date of Delivery 5-13-13
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

7012 0470 0001 5975 3382

SENDER: 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 mailpiece or on the front if space permits.

Article Addressed to:

Roden Participants, Ltd.
Roden Associates, Ltd.
Roden Exploration Company,
Suite 740
2603 Augusta Drive
Houston, TX 77057

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
Ann Hubbard

B. Received by (Printed Name) *A Hubbard* C. Date of Delivery *5-16-13*

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number **7012 3050 0001 7053 9850**
(Transfer from service label)

Form 3811, February 2004

Domestic Return Receipt

D HT

102595-02-M-1540

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MIDLAND, TX 79705

Postage \$ **\$0.66** 0500

Certified Fee **\$3.10**

Return Receipt Fee (Endorsement Required) **\$2.55**

Restricted Delivery Fee (Endorsement Required) **\$0.00**

Total Postage & Fees \$ **\$6.31**

05/09/2013

Sent To **Chevron U.S.A. Inc.**
15 Smith Road
Midland, TX 79705
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Chevron U.S.A. Inc.
15 Smith Road
Midland, TX 79705

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
Alison L. Lippert

B. Received by (Printed Name) *Alison Lippert* C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number **7012 0470 0001 5975 3368**
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

D HT

102595-02-M-1540

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

HOUSTON, TX 77057

Postage \$ **\$0.66**

Certified Fee **\$3.10**

Return Receipt Fee (Endorsement Required) **\$2.55**

Restricted Delivery Fee (Endorsement Required) **\$0.00**

Total Postage & Fees \$ **\$6.31**

Sent To **Roden Participants, Ltd.**
Roden Associates, Ltd.
Roden Exploration Company
Suite 740
2603 Augusta Drive
Houston, TX 77057
Street, Apt. No., or PO Box No.
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

0586 5502 1000 0506 2102

SENDER: 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Nadel and Gussman Permian, L.L.C.
Suite 508
601 North Marienfeld
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7012 3050 0001 7053 9829

PS Form 3811, February 2004

Domestic Return Receipt

D HT

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Stacey Peck*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Stacey Peck

C. Date of Delivery

5-13-13

D. Is delivery address different from item 1?

If YES, enter delivery address below:

- ☐ Yes
☐ No

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

- ☐ Yes

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

CARLSBAD, NM 88220

Postage \$ \$0.66

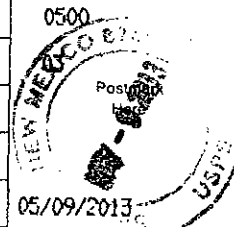
Certified Fee \$3.10

Return Receipt Fee (Endorsement Required) \$2.55

Restricted Delivery Fee (Endorsement Required) \$0.00

Total Postage & Fees \$ \$6.31

0500



Sent To

Geraldeta Marrs
1909 Sentry Circle
Carlsbad, NM 88220

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT

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For delivery information visit our website at www.usps.com

MIDLAND, TX 79701

Postage \$ \$0.66

Certified Fee \$3.10

Return Receipt Fee (Endorsement Required) \$2.55

Restricted Delivery Fee (Endorsement Required) \$0.00

Total Postage & Fees \$ \$6.31

0500



05/09/2013

Sent To

Nadel and Gussman Permian, L.L.C.
Suite 508

Street, Apt. No.,
or PO Box No. 601 North Marienfeld
Midland, Texas 79701

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Geraldeta Marrs
1909 Sentry Circle
Carlsbad, NM 88220

2. Article Number

(Transfer from service label)

7012 0470 0001 5975 3375

PS Form 3811, February 2004

Domestic Return Receipt

D HT

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *John H. Marrs*

- ☒ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?

If YES, enter delivery address below:

- ☐ Yes
☐ No

5-13

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

- ☐ Yes

SENDER: 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 mailpiece, or on the front if space permits.

Article Addressed to:

COG Operating LLC
One Concho Center
600 West Illinois
Midland, Texas 79701

Article Number
(Transfer from service label)

7012 3050 0001 7053 9836

PS Form 3811, February 2004

Domestic Return Receipt

D HT

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
X T. J. Jones ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
05/13/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

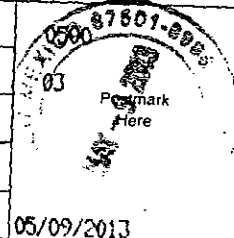
U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

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MIDLAND, TX 79701

Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 6.31



Sent To: Lerwick I, Ltd.
Suite 1250
Street, Apt. No., or PO Box No.: 508 West Wall
City, State, ZIP+4: Midland, TX 79701

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Lerwick I, Ltd.
Suite 1250
508 West Wall
Midland, TX 79701

2. Article Number

(Transfer from service label)

7012 3050 0001 7053 9867

PS Form 3811, February 2004

Domestic Return Receipt

D HT

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
X T. J. Jones ☐ Addressee

B. Received by (Printed Name): C. Date of Delivery
05/13/13

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

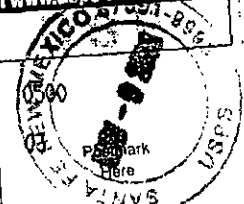
U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

MIDLAND, TX 79701

Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 6.31



Sent To: COG Operating LLC
One Concho Center
600 West Illinois
Midland, Texas 79701
Street, Apt. No., or PO Box No.:
City, State, ZIP+4:

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Chase Oil Corporation
P.O. 1767
Artesia, NM 88211

2. Article Number

(Transfer from service label)

7012 0470 0001 5975 3399

PS Form 3811, February 2004

Domestic Return Receipt

D HT

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Kathy Donaghe ☐ Agent ☒ Addressee
B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ YesU.S. Postal Service™
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CATALINA AZ 85738

Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ \$6.31

0500

03

Postmark
Here

05/09/2013

Sent To

Mid Continent Energy, Inc.
P.O. Box 8909

Street, Apt. No.,
or PO Box No.

Tucson, AZ 85738

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal Service™
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For delivery information visit our website at www.usps.com

ARTESIA NM 88211

Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ \$6.31

0500

03

Postmark
Here

05/09/2013

Sent To

Chase Oil Corporation
P.O. 1767
Artesia, NM 88211

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: 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 mailpiece, or on the front if space permits.

1. Article Addressed to:

Mid Continent Energy, Inc.
P.O. Box 8909
Tucson, AZ 85738

2. Article Number

(Transfer from service label)

7012 0470 0001 5975 3351

PS Form 3811, February 2004

Domestic Return Receipt

D HT

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Li Weston ☐ Agent ☒ Addressee

B. Received by (Printed Name)

Vicki Weston

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

English

Customer Service

USPS Mobile

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Quick Tools

Ship a Package

Send Mail

Manage Your Mail

Shop

Business Solutions

Track & Confirm

[Help](#) [Print Details](#)

YOUR LABEL NUMBER	SERVICE	STATUS OF YOUR ITEM	DATE & TIME	LOCATION	FEATURES
70120470000159753405	First-Class Mail®	Processed at USPS Origin Sort Facility	June 5, 2013, 10:26 pm	ALBUQUERQUE, NM 87101	Expected Delivery By: May 13, 2013 Certified Mail™ Return Receipt
		Depart USPS Sort Facility	June 5, 2013	ALBUQUERQUE, NM 87101	
		Processed through USPS Sort Facility	June 3, 2013, 7:22 pm	COPPELL, TX 75099	
		Processed through USPS Sort Facility	June 2, 2013, 3:04 pm	COPPELL, TX 75099	
		Depart USPS Sort Facility	June 2, 2013	COPPELL, TX 75099	
		Processed through USPS Sort Facility	June 1, 2013, 12:44 pm	COPPELL, TX 75099	
		Unclaimed	May 31, 2013, 10:33 am	STEPHENVILLE, TX 76401	
		Notice Left	May 11, 2013, 2:24 pm	STEPHENVILLE, TX 76401	
		Dispatched to Sort Facility	May 9, 2013, 4:19 pm	SANTA FE, NM 87501	
		Acceptance	May 9, 2013, 11:31 am	SANTA FE, NM 87501	

Check on Another Item

What's your label (or receipt) number?

Find

LEGAL

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Terms of Use
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For FEAR Act EEO (Data)

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For delivery information visit our website at www.usps.com	
STEPHENVILLE, TX 76401	
Postage	\$ 0.66
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 6.31
Sent To: Gene Pollack Street, Apt. No., or PO Box No.: 524 Spring Meadows City, State, ZIP+4: Stephenville, TX 76401	
PS Form 3800, August 2008 See Reverse for Instructions	

