

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

**APPLICATION OF DEVON ENERGY PRODUCTION
COMPANY, L.P TO EXPAND THE BURTON FLAT DEEP
UNIT, EDDY COUNTY, NEW MEXICO.**

Case No. 15,077

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 interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their last known 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 NMAC 19.15.4.9 and 19.15.4.12.C.


James Bruce

SUBSCRIBED AND SWORN TO before me this 22nd day of January, 2014 by James Bruce.

My Commission Expires 10-22-14



OFFICIAL SEAL
KERRIE C. ALLEN
Notary Public
State of New Mexico


Notary Public

Oil Conservation Division
Case No. 4 15077
Exhibit No. 4

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

December 26, 2013

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application to expand the Burton Flat Deep Unit, Eddy County, New Mexico, filed with the New Mexico Oil Conservation Division by Devon Energy Production Company, L.P.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, January 23, 2014, 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 owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter 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, January 16, 2014. 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 A

EXHIBIT

A

Bureau of Land Management
620 East Greene
Carlsbad, New Mexico 88220

Commissioner of Public Lands
Oil, Gas and Minerals Division
Commissioner of Public Lands
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

Sieb Resources
P.O. Box 1107
Richmond, TX 77046

Redfern Enterprises, Inc.
P.O. Box 2127
Midland, TX 79702-2127

Claremont Corporation
P.O. Box 549
Claremore, OK 74017

Javelina Partners,
616 Texas Street
Fort Worth, TX 76102-4612

Zorro Partners, Ltd.
616 Texas Street
Fort Worth, TX 76102-4612

Mary Hudson Ard
222 West 4th, #4-5
Fort Worth, TX 76102

GW Holdings, Inc.
P.O. Box 1659
Midland, TX 79702

Davoil, Inc.
P.O. Box 122269
Fort Worth, TX 76121-2269

Energen Resources, Inc.
605 Richard Arrington, Jr. Blvd. North
Birmingham, AL 35203-2707

J & L Resources
310 Morton Street, Suite 160
Richmond, TX 77469

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OFFICIAL USE

Postage	\$ 0.46	0500
Certified Fee	\$3.10	
Return Receipt Fee (Endorsement Required)	\$2.55	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.11	



Sent To: J & L Resources
 310 Morton Street, Suite 160
 Richmond, TX 77469

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:

GW Holdings, Inc.
 P.O. Box 1659
 Midland, TX 79702

2. Article Number
 (Transfer from service label)

7012 3050 0000 6871 6332

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*

☒ Agent
☐ Addressee

B. Received by (Printed Name): *[Signature]*

C. Date of Delivery: 1-6-14

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

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:

J & L Resources
 310 Morton Street, Suite 160
 Richmond, TX 77469

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*

☒ Agent
☐ Addressee

B. Received by (Printed Name): *[Signature]*

C. Date of Delivery: DEC 31 2013

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
 (Transfer from service label)

7012 3050 0000 6871 6301

PS Form 3811, February 2004

Domestic Return Receipt

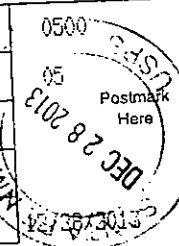
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Postage	\$ 0.46	0500
Certified Fee	\$3.10	
Return Receipt Fee (Endorsement Required)	\$2.55	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.11	



Sent To: GW Holdings, Inc.
 P.O. Box 1659
 Midland, TX 79702

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

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

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MIDLAND, TX 79702-2127

Postage	\$	\$0.46
Certified Fee		\$3.10
Return Receipt Fee (Endorsement Required)		\$2.55
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$6.11



Sent To: Redfern Enterprises, Inc.
 P.O. Box 2127
 Midland, TX 79702-2127
 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:

Zorro Partners, Ltd.
 616 Texas Street
 Fort Worth, TX 76102-4612

2. Article Number: 7012 3050 0000 6871 6356
 (Transfer from service tag)

PS Form 3811, February 2004

Domestic Return Receipt D

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☒ Agent ☐ Addressee

B. Received by (Printed Name): *Stan E. Gilberg* C. Date of Delivery: *12/19*

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

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:

Redfern Enterprises, Inc.
 P.O. Box 2127
 Midland, TX 79702-2127

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name): *ELAINE LOVE* C. Date of Delivery: *1-6-14*

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

2. Article Number: 7012 3050 0000 6871 6387
 (Transfer from service tag)

PS Form 3811, February 2004

Domestic Return Receipt

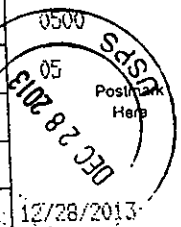
102595-02-M-1540

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FORT WORTH, TX 76102-4612

Postage	\$	\$0.46
Certified Fee		\$3.10
Return Receipt Fee (Endorsement Required)		\$2.55
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$6.11



Sent To: Zorro Partners, Ltd.
 616 Texas Street
 Fort Worth, TX 76102-4612
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

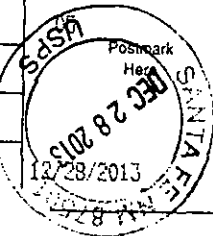
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HOUSTON, TX 77046

OFFICIAL USE

Postage	\$	\$0.46	0500
Certified Fee		\$3.10	
Return Receipt Fee (Endorsement Required)		\$2.55	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$6.11	



Sent To: Sieb Resources
 P.O. Box 1107
 Richmond, TX 77046

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:

Javelina Partners,
 616 Texas Street
 Fort Worth, TX 76102-4612

2. Article Number

(Transfer from service label)

7012 3050 0000 6871 6363

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Stacy E. Gilbert*

☒ Agent

☐ Addressee

B. Received by (Printed Name)

Stacy E. Gilbert

C. Date of Delivery

DEC 30 2013

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

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:

Sieb Resources
 P.O. Box 1107
 Richmond, TX 77046

2. Article Number

(Transfer from service label)

7012 3050 0000 6871 6394

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *James P. Schubert*

☒ Agent

☐ Addressee

B. Received by (Printed Name)

James P. Schubert

C. Date of Delivery

DEC 1-2-14

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

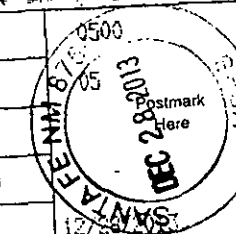
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FORT WORTH, TX 76102

OFFICIAL USE

Postage	\$	\$0.46	0500
Certified Fee		\$3.10	
Return Receipt Fee (Endorsement Required)		\$2.55	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$6.11	



Sent To: Javelina Partners,
 616 Texas Street
 Fort Worth, TX 76102-4612

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

City, State, ZIP+4

PS Form 3800, August 2006

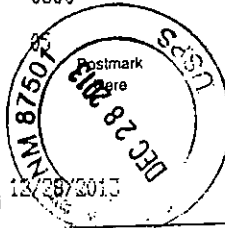
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FORT WORTH, TX 76102 SPECIAL USE

Postage	\$	\$0.46	0500
Certified Fee		\$3.10	
Return Receipt Fee (Endorsement Required)		\$2.55	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$4.11	



Sent To: Mary Hudson Ard
 222 West 4th, #4-5
 Fort Worth, TX 76102
 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:

Energizer Resources, Inc.
 605 Richard Arrington, Jr. Blvd. North
 Birmingham, AL 35203-2707

2. Article Number
 (Transfer from service label)

7012 3050 0000 6871 6318

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

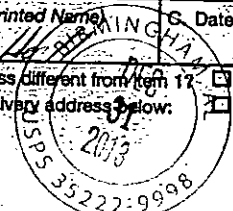
A. Signature
 X *Willie Hall* ☐ Agent ☒ Addressee

B. Received by (Printed Name) *Willie Hall* C. Date of Delivery *12/28/2013*

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



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:

Mary Hudson Ard
 222 West 4th, #4-5
 Fort Worth, TX 76102

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Willie Hall* ☐ Agent ☒ Addressee

B. Received by (Printed Name) *Willie Hall* C. Date of Delivery *12/31/2013*

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

2. Article Number
 (Transfer from service label) 7012 3050 0000 6871 6349

PS Form 3811, February 2004

Domestic Return Receipt

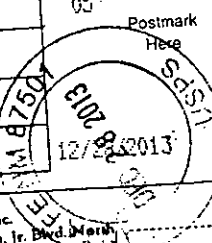
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BIRMINGHAM, AL 35203 SPECIAL USE

Postage	\$	\$0.46	0500
Certified Fee		\$3.10	05
Return Receipt Fee (Endorsement Required)		\$2.55	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$6.11	



Sent To: Energizer Resources, Inc.
 605 Richard Arrington, Jr. Blvd. North
 Birmingham, AL 35203-2707
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7012 3050 0000 6871 6325

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Postage \$0.46
 Certified Fee \$3.10
 Return Receipt Fee (Endorsement Required) \$2.55
 Restricted Delivery Fee (Endorsement Required) \$0.00
 Total Postage & Fees \$6.11

Postmark
 DEC 28 2013
 05:00

Sent To: David, Inc.
 P.O. Box 122269
 Fort Worth, TX 76121-2269

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:
 Commissioner of Public Lands
 Oil, Gas and Minerals Division
 Commissioner of Public Lands
 310 Old Santa Fe Trail
 Santa Fe, New Mexico 87501

2. Article Number: 7012 3050 0000 6871 6400
(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Rohade Lones*
☐ Agent
☒ Addressee

B. Received by (Printed Name): *Robert Sanchez*
 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

SENDER: COMPLETE THIS SECTION

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- 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:
 David, Inc.
 P.O. Box 122269
 Fort Worth, TX 76121-2269

2. Article Number: 7012 3050 0000 6871 6325
(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Ron Caffrey*
☒ Agent
☐ Addressee

B. Received by (Printed Name): *Ron Caffrey*
 C. Date of Delivery: *12-31-13*

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

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 Certified Fee \$3.10
 Return Receipt Fee (Endorsement Required) \$2.55
 Restricted Delivery Fee (Endorsement Required) \$0.00
 Total Postage & Fees \$6.11

Postmark
 DEC 28 2013
 05:00

Sent To: Commissioner of Public Lands
 Oil, Gas and Minerals Division
 Commissioner of Public Lands
 310 Old Santa Fe Trail
 Santa Fe, New Mexico 87501

PS Form 3800, August 2006 See Reverse for Instructions

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OFFICIAL USE

Postage	\$ 0.46
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 6.11



Sent To: Bureau of Land Management
 620 East Greene
 Carlsbad, New Mexico 88220
 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:

Bureau of Land Management
 620 East Greene
 Carlsbad, New Mexico 88220

2. Article Number

(Transfer from service label)

7012 3050 0000 6871 6417

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☒ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Signature: [Signature] Date: 12/28/13

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