

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

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]
[EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]

[1] **TYPE OF APPLICATION - Check Those Which Apply for [A]**

- [A] Location - Spacing Unit - Simultaneous Dedication
 NSL NSP SD

Check One Only for [B] or [C]

- [B] Commingling - Storage - Measurement
 DHC CTB PLC PC OLS OLM

- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR

- [D] Other: Specify _____

[2] **NOTIFICATION REQUIRED TO: - Check Those Which Apply, or Does Not Apply**

- [A] Working, Royalty or Overriding Royalty Interest Owners
 [B] Offset Operators, Leaseholders or Surface Owner
 [C] Application is One Which Requires Published Legal Notice
 [D] Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
 [E] For all of the above, Proof of Notification or Publication is Attached, and/or,
 [F] Waivers are Attached

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **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 and/or supervisory capacity.

_____ Marcos Ortiz Print or Type Name	_____ <i>Marcos Ortiz</i> Signature	_____ Operations Engineering Title	_____ November 7, 2007 Date
		_____ marcos.ortiz@dvn.com e-mail Address	

Case 14087

Cancelled 12/12/07

2007 NOV 30 AM 10 54
RECEIVED

2007 DEC 3 PM 12 13
RECEIVED

District I
1625 N. French Drive, Hobbs, NM 88240
District II
1301 W. Grand Ave, 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

Form C-107-B
Revised June 10, 2003

OIL CONSERVATION DIVISION
1220 S. St Francis Drive
Santa Fe, New Mexico 87505

Submit the original application to the Santa Fe office with one copy to the appropriate District Office.

APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)

OPERATOR NAME: DEVON ENERGY PRODUCTION COMPANY, LP
OPERATOR ADDRESS: 20 NORTH BROADWAY, OKLAHOMA CITY, OKLAHOMA 73102-8260
APPLICATION TYPE:

Pool Commingling Lease Commingling Pool and Lease Commingling Off-Lease Storage and Measurement (Only if not Surface Commingled)
LEASE TYPE: Fee State Federal

Is this an Amendment to existing Order? Yes No If "Yes", please include the appropriate Order No. _____
Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling
 Yes No

(A) POOL COMMINGLING
Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes
Red Lake; (Q-GB-SA) 51300 Red Lake; Glorieta-Yeso 51120 & 96836 Hawk 8 Battery	40.4 / 1623	44.5 / 1626		227 BOPD, 2012 BWPD, 567 MCFPD (Total Calcd Production)	55 BOPD, 1152 BWPD, 204 MCFPD (Current Hawk 8 Battery Prod)
Red Lake; Glorieta-Yeso 51120???	42 / 1553	40.5 / 1615			22 BOPD, 110 BWPD, 63 MCFPD (Est. Hawk 8D #46 Yeso Prod)
Red Lake; Glorieta-Yeso 51120???	42 / 1553	41.4 / 1585			150 BOPD, 750 BWPD, 300 MCFPD (Est. Condor 8 Federal #1 H Yeso Prod)

(2) Are any wells producing at top allowables? Yes No
(3) Has all interest owners been notified by certified mail of the proposed commingling? Yes No.
(4) Measurement type: Metering Other (Specify)

The common gas sales meter will be located at the Hawk 8 Battery in Unit letter 'K', Sec 8-18S-27E Federal lease #LC-070678-A. Gas from the Hawk 8 D #46 and the Condor 8 Federal #1H will be flowed up the casing and periodically measured at each well location with a portable trailer mounted gas meter. Oil and water will be produced via the tubing and go to a header system at the tank battery. Individual wells will be periodically switched into the test treater. From there, oil will go to a test tank where it can be measured, and water production will be metered. All oil will then be sold and trucked from the location. Calibration of the gas sales meter will be done per requirements in Subparagraph (b) of Paragraph (4) of Subsection B of 19.15.5.303 NMAC. Attached is a blowup section of the Hawk 8 Battery schematic showing the liquid and gas flowlines coming from the Hawk 8 D Federal 46 and the Condor 8 Federal 1 H into the liquid header. Included in the attachment is a detailed flow path for both the oil and gas production. This battery is currently set up to "periodically test" oil production from any single well and will be set up to do the same with these two wells. Hawk 8 D Federal 46: The gas will be produced from the casing side of the well through the gas line at the Hawk 8 J Federal 2 which ends up being commingled at the Hawk 8 Battery. The gas will be metered with "periodic well tests" conducted at the well through a mobile gas test trailer. Condor 8 H Federal 1 H: The gas will be produced from the casing side of the well then tied into the Hawk 8 D Federal 46 upon it's completion which will be tied into the Hawk 8 J Federal 2 ending up being commingled at the Hawk 8 Battery. The gas will also be measured with "periodic well tests" conducted at the well through a mobile gas test trailer. Attached is a schematic showing these operations. The Hawk 8 K Battery is plumbed to isolate one well from all others and individually test each well on a periodic basis through an isolated heater treater labeled "Test Heater" and an isolated tank labeled "Test Tank" shown on Exhibit I. The attached blowups previously mentioned should describe where the new well will come into the facility.

(5) Will commingling decrease the value of production? Yes No If "yes", describe why commingling should be approved

(B) LEASE COMMINGLING
Please attach sheets with the following information

(1) Pool Name and Code.

- (2) Is all production from same source of supply? Yes No
(3) Has all interest owners been notified by certified mail of the proposed commingling? Yes No
(4) Measurement type: Metering Other (Specify)

(C) POOL and LEASE COMMINGLING
Please attach sheets with the following information

- (1) Complete Sections A and E.

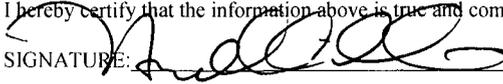
(D) OFF-LEASE STORAGE and MEASUREMENT
Please attached sheets with the following information

- (1) Is all production from same source of supply? Yes No
(2) Include proof of notice to all interest owners.

(E) ADDITIONAL INFORMATION (for all application types)
Please attach sheets with the following information

- (1) A schematic diagram of facility, including legal location.
(2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved.
(3) Lease Names, Lease and Well Numbers, and API Numbers.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE:  TITLE: Sr. Staff Engineering Technician _____ DATE: November 7, 2007

TYPE OR PRINT NAME: Norvella Adams _____ TELEPHONE NO.: 405-552-8198 _____

E-MAIL ADDRESS: norvella.adams@dvn.com _____



Devon Energy Corporation
20 North Broadway
Oklahoma City, Oklahoma 73102-8260

November 7, 2007

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

Attn: William Jones

Re: Request for Exception to Rule 303-A
Hawk 8 D Federal 46, Condor 8 Federal 1H, and Hawk 8 K Federal 4 Leases
Red Lake; (Q-GB-SA) 51300
Red Lake; Glorieta-Yeso 51120 & 96836
Section 8, Township 18 South, Range 27 East
Eddy County, New Mexico

Mr. Jones:

Devon Energy Production Company, LP, as Operator of the referenced leases, respectfully request that the Division Director grant an exception to Rule 303-A to permit the commingling of production from the attached pools and leases into a common tank battery.

Attached you will find a plat of the leases subject to this application. All production will be commingled at the Hawk 8 K Federal 4 located in the NE/4 SW/4 of Section 8, Township 18 South, Range 27 East, NMPM, Eddy County, New Mexico. A schematic of the commingling facility to be utilized is also attached.

As referenced by the attached letter, all parties owning an interest in the leases and the purchasers of the commingled production have been notified by certified mail regarding this application.

Should you have any questions, please contact the undersigned at (405) 552-8152.

Sincerely,

Devon Energy Production Company, LP

Marcos Ortiz
Operations Engineer

Enclosure

to top Abo
100/87.5

S to base SA
45.22/33.02

79.43/63.54
S to 3000'

No Interest

West Ribbon Fed #1
Devon - 0% Interest

S to base SA
86.28/69.02

S to base SA
100/75

Base of SA
to 100' above
top of Abo
100/87.0

S to 2750'
86.28/69.03

100/80 Kite 5I
S to 100'
above top
of Abo

Honda 4K Fed #3

100/84.5
less 100' above
top of Abo to
top of Miss

No Interest

S to 2750'
79.43/57.98

WRLU interval
100/80
below 2500' to
100' above Abo
100/79.5

From 1240'
to 2440'
100/80
S to 3000' ?

From 1240'
to 2440'
100/80
S to 3000' ?

S to 3000'
100/84.5

S to 2240'
100/78.12

1240' - 2440'
100/80

S to 100'
above top
of Abo
100/80

S to 3000'
100/86.5

NW/4
S to base SA
& Below Abo
to 9911'
100/75

Hawk 8D Fed #46

Condor 8 Fed #1H
100/80

Hawk 8E Fed #23

100/87.5
except SA
100/85.3

Mann Fed #1
100/80.25
N/2 320-Atoka

S-100' above Abo
240' - 2240'
100/75

100/87.5 All
except SA
100/80

S to
base SA
100%

S-100' above Abo
1240' - 2440'
100/75

S to 100'
above top Abo
100/80

Hawk 8K Fed #13

All depths
100/81.25

S to 2500'
100/80

S to 3000'
75/62.34

Hawk 8K Fed #14

All depths
100/81.25

OPL Whipsnake Fed Com #1
25% WI / 20.3125% NRI

S to 100'
above top
of Abo
100/80

Horsetail 9 F
25% WI / 20.

Hawk 8N Fed #21

Hawk 8O Fed #22

Hawk 8P Fed #16

Kaiser B 18B #11

Kaiser 18H #10

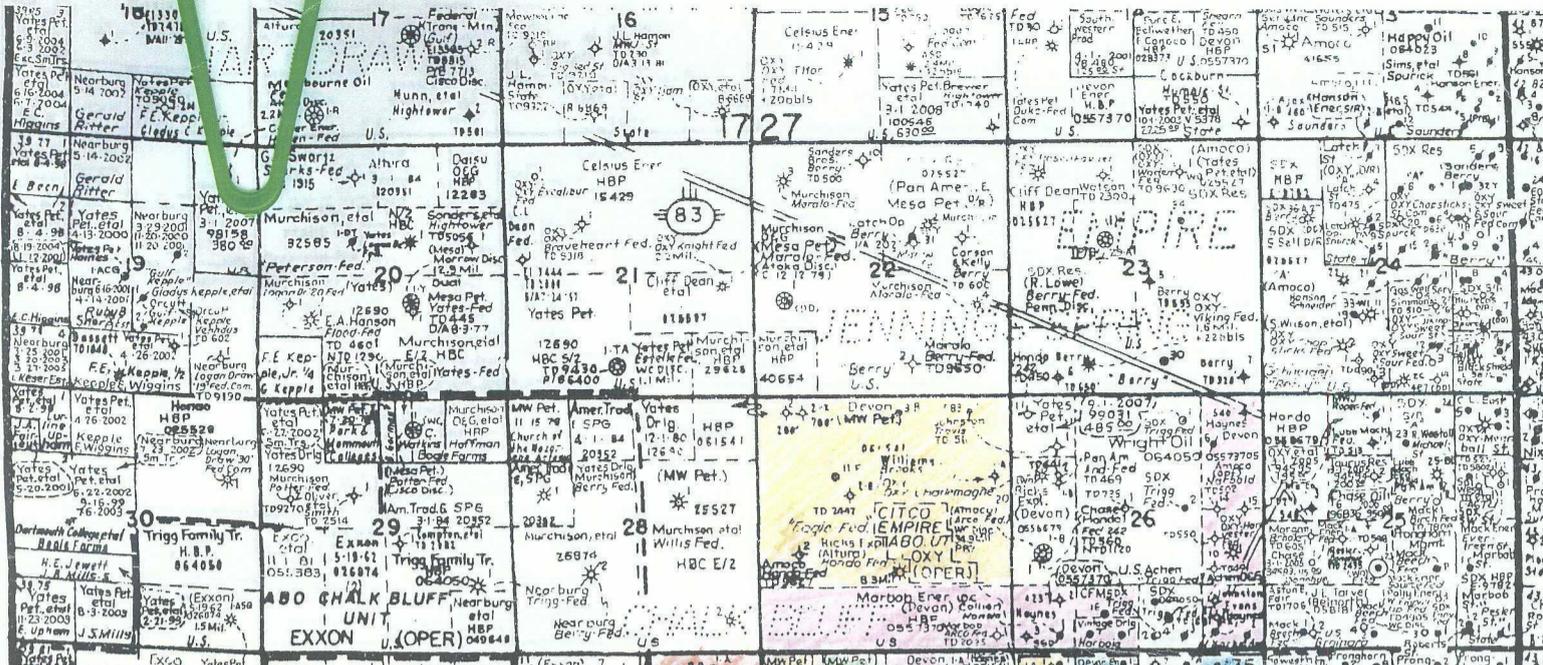
Kaiser B 18G #9

100/80

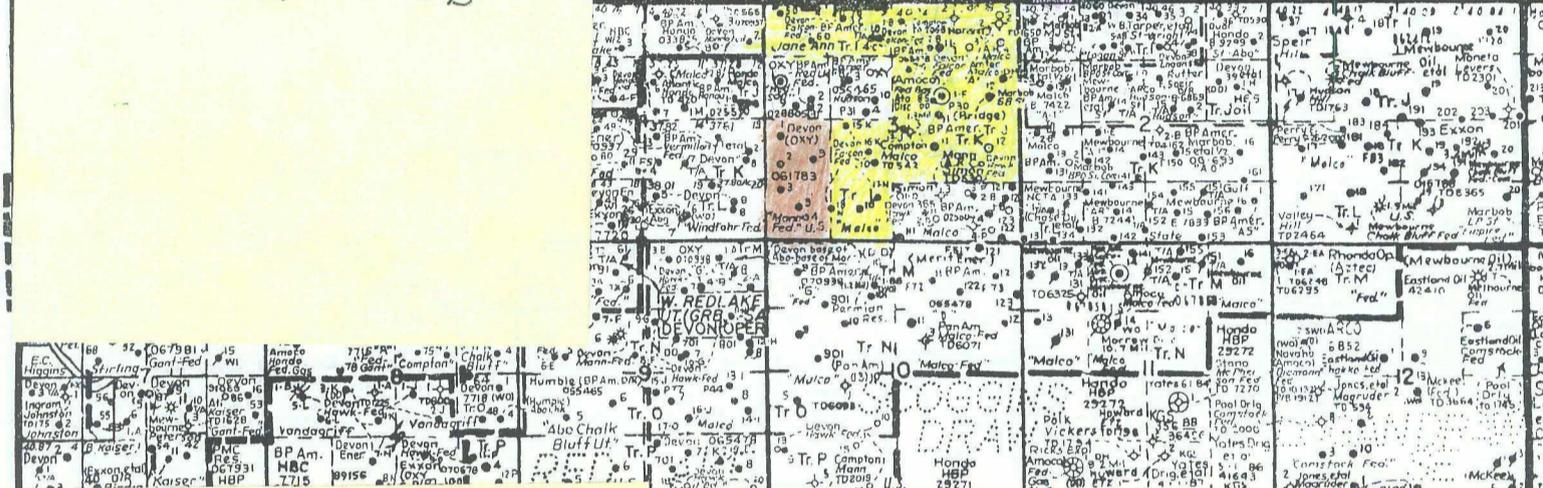
S to 100'
above top
of Abo
100/82.5

S to 100'
above top
of Abo
100/82.5

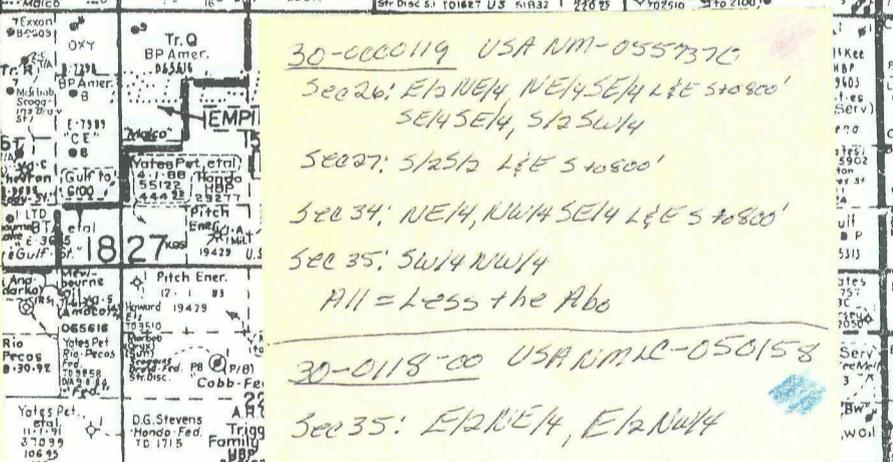
West Lake



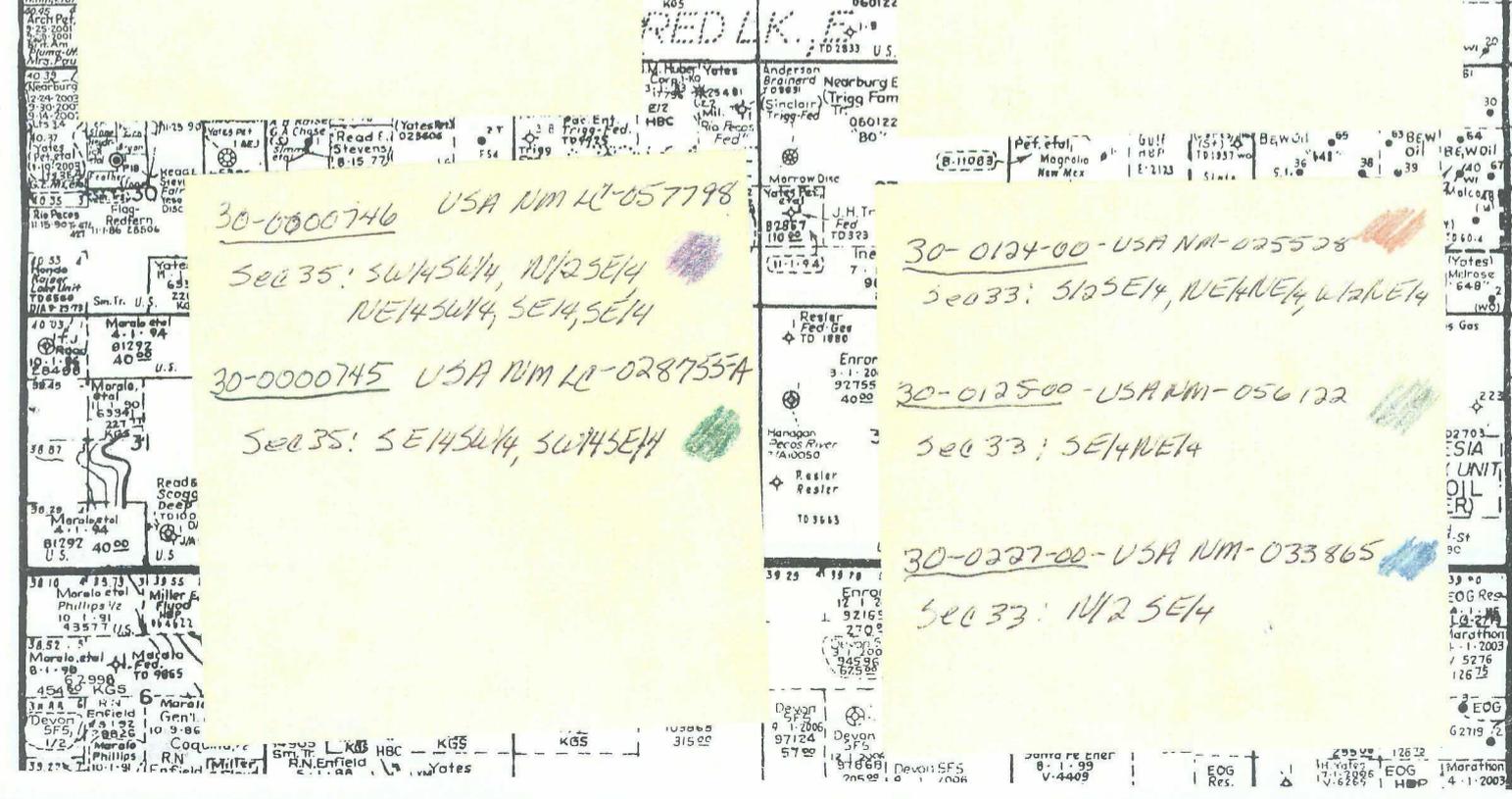
30-000135-USA NMLC-065478-B
 Sec 3: Lots 1-4, E/2 NE 1/4
 N/2 SE 1/4, E/2 SW 1/4
 30-000837-000 USA NMLC-
 Sec 3: W/2 SW 1/4 0161783-B



30-0127-00 USA NMLC-064050-A
 Sec 34: E/2 NW 1/4, NE 1/4 SE 1/4
 Sec 35: NW 1/4 SW 1/4
 30-0143-00 USA NMLC-067849
 Sec 27: N/2, N/2 S/2
 Sec 34: W/2 NW 1/4 SW 1/4
 Sec 35: NW 1/4 NW 1/4



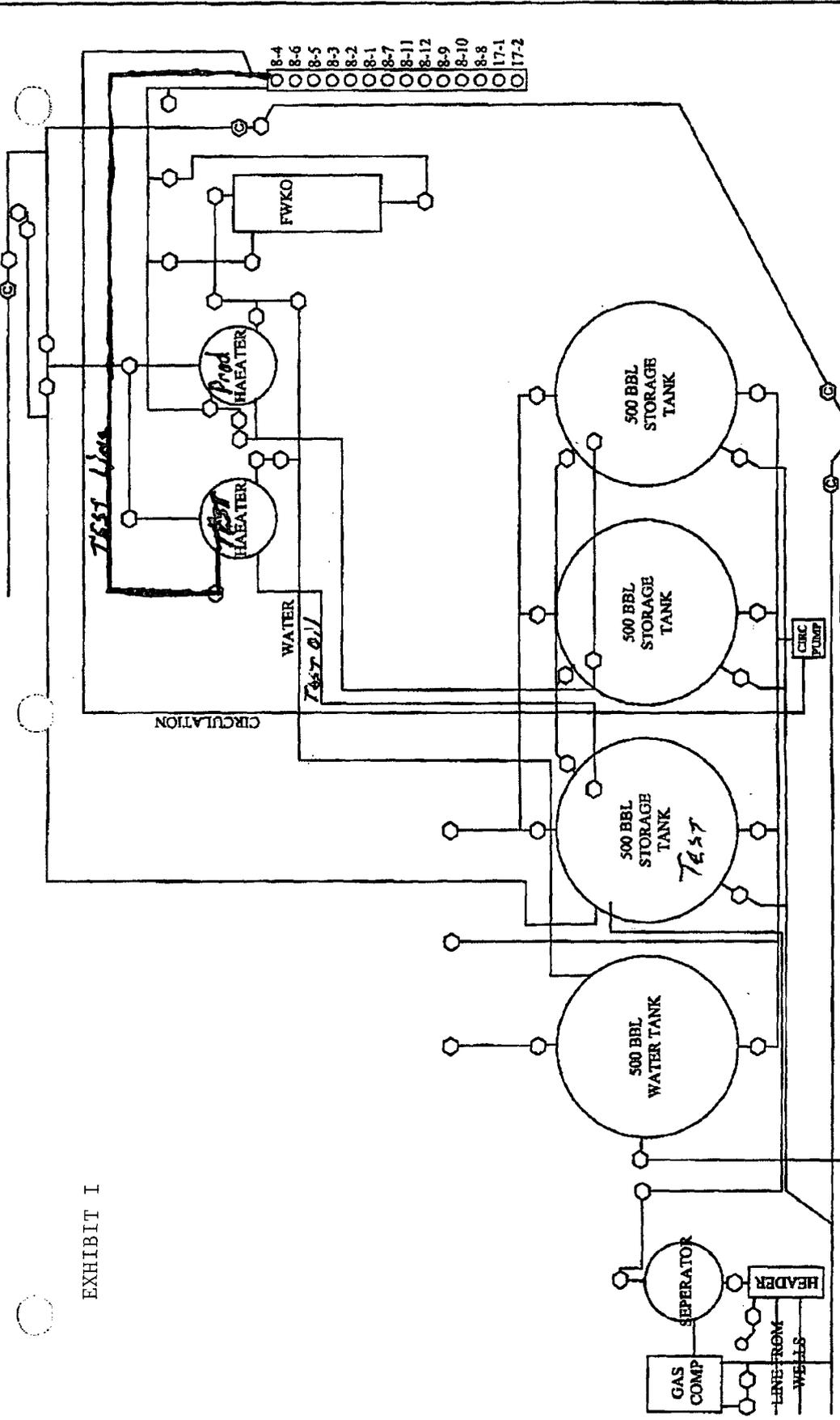
30-000119 USA NM-055737C
 Sec 26: E/2 NE 1/4, NE 1/4 SE 1/4, E/2 SE 1/4
 Sec 27: S/2 S/2, E/2 S/2, W/2 S/2
 Sec 34: NE 1/4, NW 1/4 SE 1/4, E/2 S/2
 Sec 35: SW 1/4 NW 1/4
 All = Less the Abo



30-0000746 USA NMLC-057798
 Sec 35: SW 1/4 SW 1/4, N/2 SE 1/4
 NE 1/4 SW 1/4, SE 1/4 SE 1/4
 30-0000745 USA NMLC-0287557A
 Sec 35: SE 1/4 SW 1/4, SW 1/4 SE 1/4

30-0124-00-USA NM-025528
 Sec 33: S/2 SE 1/4, NE 1/4 NE 1/4, W/2 NE 1/4
 30-0125-00-USA NM-056122
 Sec 33: SE 1/4 NE 1/4
 30-0227-00-USA NM-033865
 Sec 33: N/2 SE 1/4

EXHIBIT I



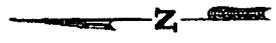
- 8-4
- 8-6
- 8-5
- 8-3
- 8-2
- 8-1
- 8-7
- 8-11
- 8-12
- 8-9
- 8-10
- 8-8
- 17-1
- 17-2



WEST RED LAKE AREA
EDDY COUNTY, NEW MEXICO

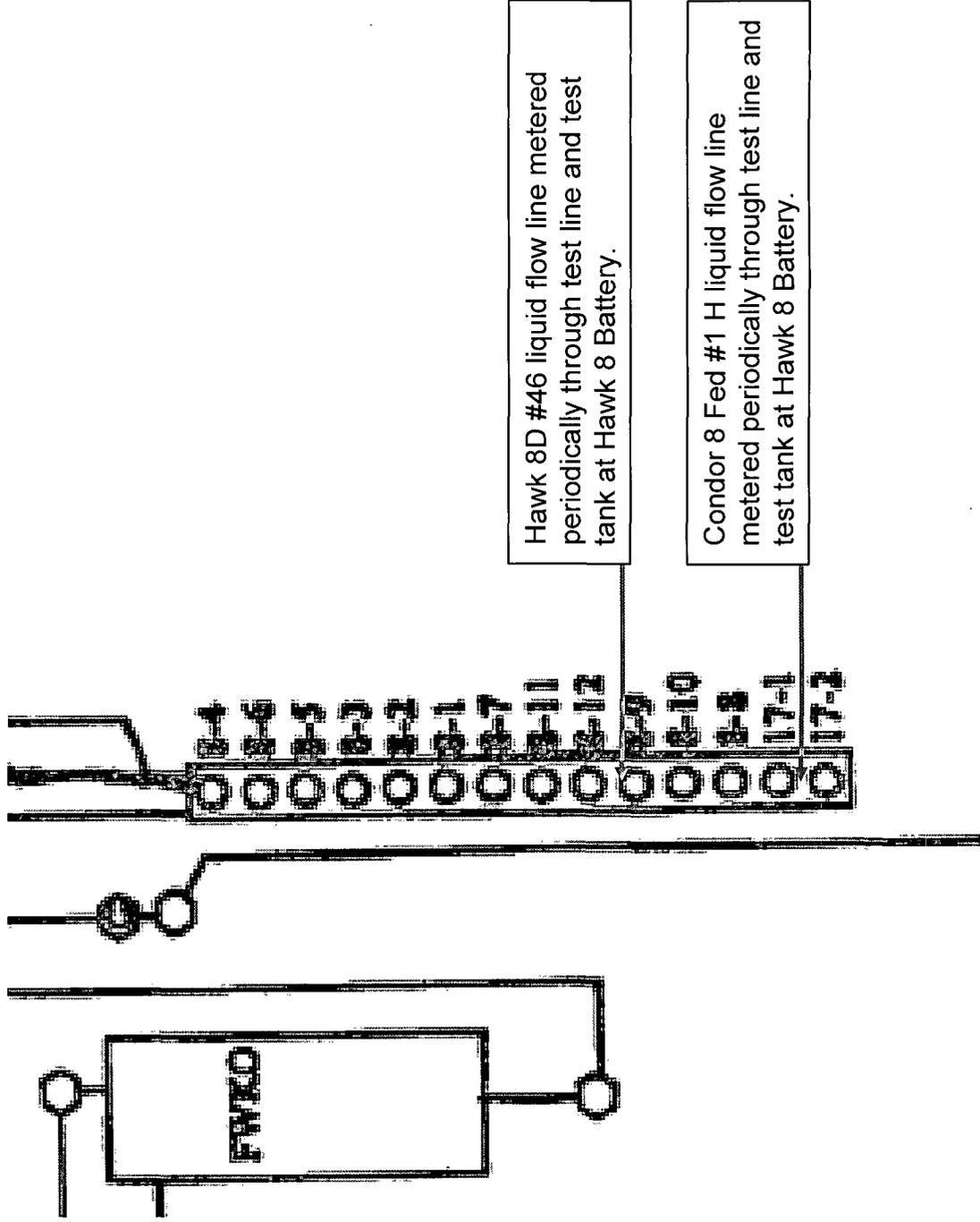
HAWK 8
TANK BATTERY
SEC 8 - T18S, R27E
1/4 1/4 NESW

FLOW DIAGRAM

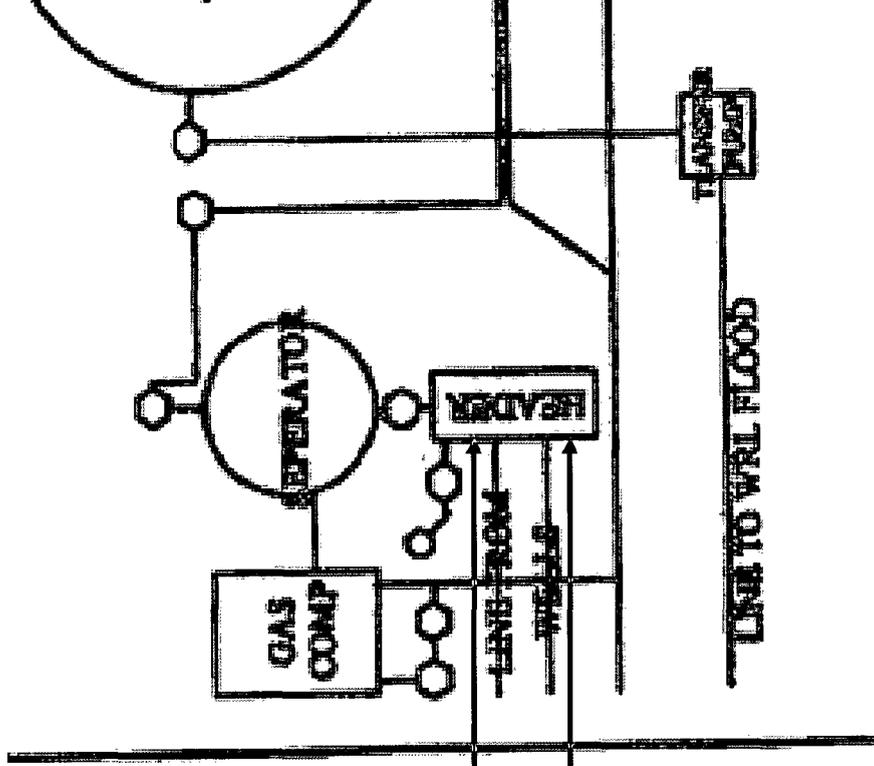


- VALVE
- ⊙ CHECK VALVE

Hawk 8 Tank Battery Blowup – Liquid Header



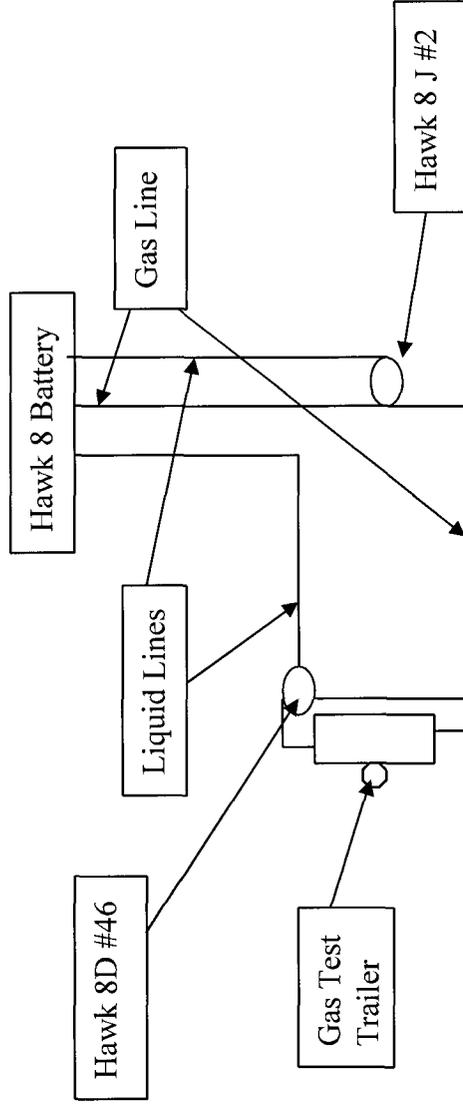
Hawk 8 Tank Battery Blowup – Gas Header



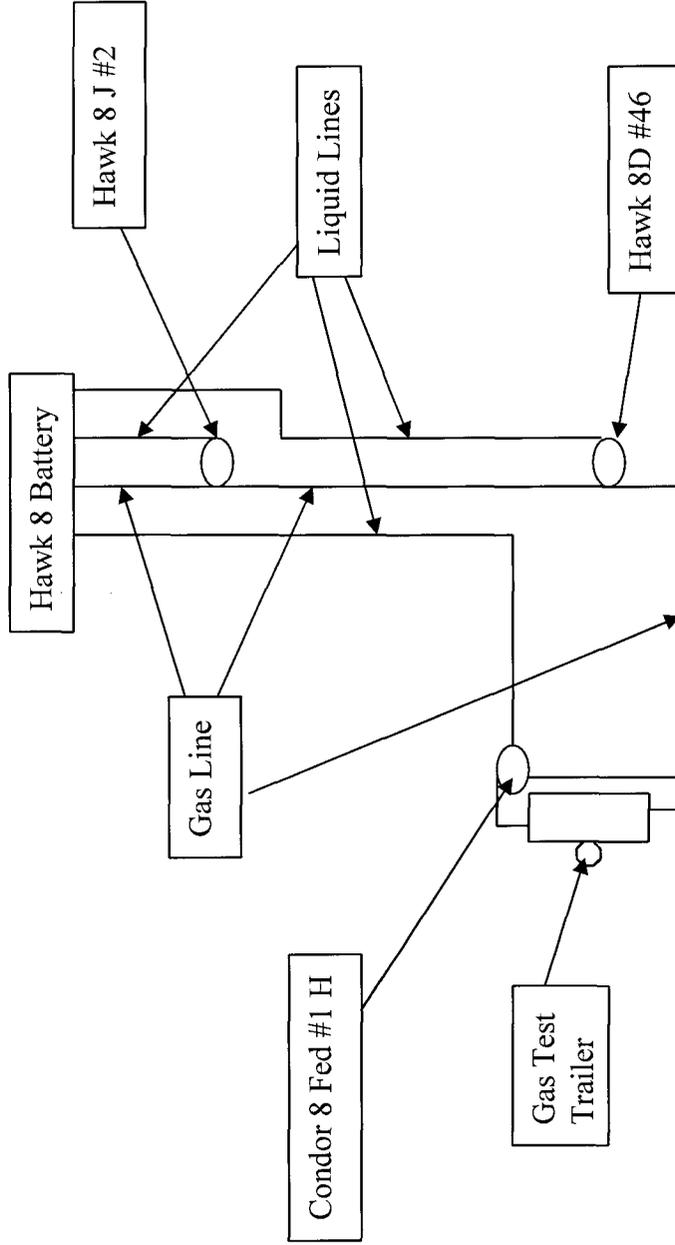
Hawk 8D #46 gas flow line metered periodically at the wellsite will be tied into the Hawk 8 J Fed #2 gas line. The Hawk 8 J Fed #2 is already plumbed into the Hawk 8 Tank Battery.

Condor 8 Fed #1 H gas flow line metered periodically at the wellsite will be tied into the Hawk 8D #46 gas line. The Hawk 8D #46 will be plumbed into the Hawk 8 Tank Battery upon completion.

Hawk 8D #46 Production Flow Paths



Condor 8 Fed #1H Production Flow Paths



Devon Energy Production Company, LP
Hawk 8 Battery
Section 8 - T18S- R27E, Unit K
Federal Lease # LC-070678-A

Wells currently producing to the Hawk 8 Battery

Hawk 17 C Federal 1 - Lease # NM-0758 - API # 30-015-29514

Hawk 17 C Federal 2 - Lease # NM-0758 - API # 30-015-29726

Hawk 8 J Federal 1 - Lease # NM-89156 - API # 30-015-29012

Hawk 8 J Federal 2 - Lease # NM-89156 - API # 30-015-29049

Hawk 8 K Federal 3 - Lease # LC-070678-A - API # 30-015-29014

Hawk 8 K Federal 4 - Lease # LC-070678-A - API # 30-015-29054

Hawk 8 L Federal 5 - Lease # LC-070678-A - API # 30-015-29015

Hawk 8 L Federal 6 - Lease # LC-070678-A - API # 30-015-29068

Hawk 8 N Federal 7 - Lease # NM-89156 - API # 30-015-29016

Hawk 8 N Federal 8 - Lease # NM-89156 - API # 30-015-29055

Hawk 8 O Federal 9 - Lease # LC-070678-A - API # 30-015-29069

Hawk 8 O Federal 10 - Lease # LC-070678-A - API # 30-015-29056

Hawk 8 P Federal 11 - Lease # NM-29273 - API # 30-015-29027

Hawk 8 P Federal 12 - Lease # NM-29273 - API # 30-015-29057

Hawk 8 K Federal 13 - Lease # LC-070678-A - API # 30-015-34337

Hawk 8 K Federal 14 - Lease # LC-070678-A - API # 30-015-34336

Hawk 8 N Federal 21 - Lease # NM-89156 - API # 30-015-34964

Well(s) proposed to produce to the Windfohr 4 Battery:

Hawk 8 D Federal 46 – Lease # NM7716 – API # 30-015-28301

Condor 8 Federal 1H – Lease # NM LC-070678-A – API # 30-015-35829

Daily Battery Summary Report

Thursday, August 09, 2007 Through Tuesday, October 09, 2007

Select By : Oil and Water Batteries

Page No : 1
 Report Number : R_230
 Print Date : 10/9/2007, 11:42:09 AM

HAWK 8 Battery Detail

Date	Oil Beg. Inv.	Oil Runs	Oil End Inv.	Oil Rcpts.	Oil Prod.	Water Beg. Inv.	Water Runs	Water End Inv.	Water Rcpts.	Water Prod.	Actual Gas Volume
8/9/2007	721.42	0.00	779.89	0.00	58.48	316.00	0.00	316.00	0.00	969.00	213.92
8/10/2007	779.89	334.39	513.93	0.00	68.43	316.00	0.00	316.00	0.00	1,030.00	212.93
8/11/2007	513.93	0.00	575.18	0.00	61.26	316.00	0.00	316.00	0.00	1,026.00	211.94
8/12/2007	575.18	0.00	633.66	0.00	58.48	316.00	0.00	316.00	0.00	967.00	209.96
8/13/2007	633.66	0.00	692.15	0.00	58.49	316.00	0.00	316.00	0.00	981.00	209.96
8/14/2007	692.15	0.00	749.25	0.00	57.10	316.00	0.00	316.00	0.00	983.00	210.95
8/15/2007	749.25	178.50	630.92	0.00	60.17	316.00	0.00	316.00	0.00	948.00	209.96
8/16/2007	630.92	174.44	511.14	0.00	54.65	316.00	0.00	316.00	0.00	772.00	210.95
8/17/2007	511.14	0.00	568.23	0.00	57.09	316.00	0.00	316.00	0.00	986.00	208.97
8/18/2007	568.23	0.00	625.32	0.00	57.09	316.00	0.00	316.00	0.00	870.00	207.98
8/19/2007	625.32	0.00	683.79	0.00	58.48	316.00	0.00	316.00	0.00	853.00	207.98
8/20/2007	683.79	337.30	401.16	0.00	54.66	316.00	0.00	316.00	0.00	1,130.00	208.97
8/21/2007	401.16	0.00	445.71	0.00	44.55	316.00	0.00	316.00	0.00	1,051.00	201.05
8/22/2007	445.71	0.00	498.62	0.00	52.91	316.00	0.00	316.00	0.00	1,053.00	189.16
8/23/2007	498.62	0.00	534.31	0.00	55.69	316.00	0.00	316.00	0.00	1,175.00	187.18
8/24/2007	534.31	0.00	601.65	0.00	47.34	316.00	0.00	316.00	0.00	949.00	188.17
8/25/2007	601.65	0.00	651.77	0.00	50.12	316.00	0.00	316.00	0.00	1,032.00	185.20
8/26/2007	651.77	0.00	699.10	0.00	47.34	316.00	0.00	316.00	0.00	898.00	185.21
8/27/2007	699.10	0.00	740.87	0.00	41.77	316.00	0.00	316.00	0.00	981.00	188.17
8/28/2007	740.87	164.52	626.03	0.00	49.67	316.00	0.00	316.00	0.00	1,064.00	188.17
8/29/2007	626.03	169.32	504.22	0.00	47.50	316.00	0.00	316.00	0.00	926.00	188.17
8/30/2007	504.22	0.00	554.35	0.00	50.13	316.00	0.00	316.00	0.00	1,337.00	187.18
8/31/2007	554.35	0.00	610.05	0.00	55.70	316.00	0.00	316.00	0.00	1,246.00	191.15
9/1/2007	610.05	0.00	667.14	0.00	57.09	316.00	0.00	316.00	0.00	1,165.00	197.00
9/2/2007	667.14	0.00	727.01	0.00	59.87	316.00	0.00	316.00	0.00	1,266.00	195.00
9/3/2007	727.01	0.00	787.57	0.00	60.56	316.00	0.00	316.00	0.00	1,350.00	195.00
9/4/2007	787.57	0.00	849.53	0.00	61.95	316.00	0.00	316.00	0.00	1,265.00	197.00
9/5/2007	849.53	0.00	898.26	0.00	48.73	316.00	0.00	316.00	0.00	1,198.00	224.00
9/6/2007	898.26	346.09	593.27	0.00	41.11	316.00	0.00	316.00	0.00	1,132.00	213.00
9/7/2007	593.27	0.00	639.22	0.00	45.94	316.00	0.00	316.00	0.00	1,402.00	203.00
9/8/2007	639.22	0.00	700.47	0.00	61.26	316.00	0.00	316.00	0.00	1,390.00	218.00
9/9/2007	700.47	0.00	740.85	0.00	40.38	316.00	0.00	316.00	0.00	1,506.00	206.00
9/10/2007	740.85	0.00	799.32	0.00	58.47	316.00	0.00	316.00	0.00	1,356.00	202.00
9/11/2007	799.32	342.57	504.89	0.00	48.13	316.00	0.00	316.00	0.00	1,475.00	221.00
9/12/2007	504.89	0.00	577.30	0.00	72.41	316.00	0.00	316.00	0.00	1,311.00	242.00
9/13/2007	577.30	0.00	642.75	0.00	65.45	316.00	0.00	316.00	0.00	1,264.00	221.00
9/14/2007	642.75	0.00	691.48	0.00	48.74	316.00	0.00	316.00	0.00	1,116.00	236.00
9/15/2007	691.48	0.00	737.43	0.00	45.95	316.00	0.00	316.00	0.00	991.00	212.00
9/16/2007	737.43	0.00	744.95	0.00	7.51	316.00	316.00	0.00	0.00	973.00	200.00
9/17/2007	744.95	0.00	792.28	0.00	47.34	0.00	0.00	0.00	0.00	1,142.00	197.00
9/18/2007	792.28	339.51	515.18	0.00	62.41	0.00	0.00	0.00	0.00	1,047.00	204.00
9/19/2007	515.18	0.00	579.92	0.00	64.74	0.00	0.00	0.00	0.00	1,258.00	216.00
9/20/2007	579.92	0.00	637.70	0.00	57.78	0.00	0.00	0.00	0.00	1,527.00	82.00
9/21/2007	637.70	0.00	691.30	0.00	53.60	0.00	0.00	0.00	0.00	1,381.00	8.00
9/22/2007	691.30	0.00	754.65	0.00	63.35	0.00	0.00	0.00	0.00	1,245.00	10.00

9/23/2007	754.65	0.00	856.10	0.00	81.45	0.00	0.00	0.00	0.00	0.00	1,327.00	14.00
9/24/2007	836.10	0.00	911.30	0.00	75.21	0.00	0.00	0.00	0.00	0.00	953.00	50.00
9/25/2007	911.30	0.00	967.70	0.00	56.40	0.00	0.00	0.00	0.00	0.00	1,128.00	101.00
9/26/2007	967.70	0.00	1,022.71	0.00	55.00	0.00	0.00	0.00	0.00	0.00	874.00	55.00
9/27/2007	1,022.71	332.35	741.45	0.00	51.09	0.00	0.00	0.00	0.00	0.00	1,220.00	0.00
9/28/2007	741.45	0.00	822.90	0.00	81.45	0.00	0.00	0.00	0.00	0.00	1,497.00	0.00
9/29/2007	822.90	0.00	855.62	0.00	32.72	0.00	0.00	0.00	0.00	0.00	1,283.00	0.00
9/30/2007	855.62	0.00	603.56	0.00	-252.05	0.00	0.00	0.00	0.00	0.00	1,505.00	0.00
10/1/2007	603.56	336.75	687.10	0.00	420.28	0.00	0.00	0.00	0.00	0.00	1,505.00	0.00
10/2/2007	687.10	0.00	751.14	0.00	64.04	0.00	0.00	0.00	0.00	0.00	1,513.00	0.00
10/3/2007	751.14	0.00	817.97	0.00	66.83	0.00	0.00	0.00	0.00	0.00	1,403.00	0.00
10/4/2007	817.97	0.00	876.45	0.00	58.47	0.00	0.00	0.00	0.00	0.00	1,349.00	0.00
10/5/2007	876.45	0.00	912.69	0.00	36.24	0.00	0.00	0.00	0.00	0.00	1,100.00	0.00
10/6/2007	912.69	341.57	617.49	0.00	46.37	0.00	0.00	0.00	0.00	0.00	611.00	0.00
10/7/2007	617.49	0.00	659.27	0.00	41.78	0.00	0.00	0.00	0.00	0.00	892.00	0.00

55.59

1,152.45

204.82



Devon Energy Corporation
20 North Broadway
Oklahoma City, Oklahoma 73102-8260

November 7, 2007

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Interest Owners

Re: Request for Exception to Rule 303-A
Hawk 8 D Federal 46, Condor 8 Federal 1H, and Hawk 8 K Federal 4 Leases
Red Lake; (Q-GB-SA) 51300
Red Lake; Glorieta-Yeso 51120 & 96836
Section 8, Township 18 South, Range 27 East
Eddy County, New Mexico

Gentlemen:

This is to advise you that Devon Energy Production Company, LP, is filing an application with the New Mexico Oil Conservation Division ("NMOCD") seeking approval to permit commingling of production from the attached leases and pools into a common tank battery.

A copy of our application submitted to the Division is attached.

Any objections or requests that a hearing should be held regarding this application must be submitted to the NMOCD within 20 days from the date of this letter.

Should you have any questions, please contact the undersigned at (405) 552-8152.

Sincerely,

Devon Energy Production Company, LP

Marcos Ortiz
Operations Engineer

Enclosure

Affidavit of Publication

State of New Mexico,
County of Eddy, ss.

April Hernandez, being first duly sworn,
on oath says:

That she is HR Manager of the Carlsbad Current-Argus, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof on the date as follows, to wit:

November 9 2007

That the cost of publication is \$ 51.74 that Payment Thereof has been made and will be assessed as court costs.

April Hernandez

Subscribed and sworn to before me this

9 day of November, 2007

Stephanie Dobson

My commission Expires on 1/25/2010

Notary Public



November 9, 2007
Legal Notice
Devon Energy Production Company, LP, 20 North Broadway, Oklahoma City, OK 73102-8260 has filed form C-107-B (Application for Pool / Lease Commingling, Diverse Ownership) with the New Mexico Oil Conservation Division, seeking administrative approval to commingle production from the Hawk 8 D Federal 46 well, the Condor 8 Federal 1 H well, and the leases currently producing to the Hawk 8 K Battery. These leases will produce from both the North east Red Lake - Gorieta Yeso Pool (51120) and the Red Lake-Queen Grayburg San Andres Pools (51300). The leases are located in the NW/4 NW/4 of Section 8, Township 18 South, Range 27 East, in the SW/4 NW/4 of Section 8, Township 18 South, Range 27 East, and NE/4 SE/4 of Section 8, Township 18 South, Range 27 East, NMPM, Eddy County, New Mexico.
All interested parties opposing the aforementioned must file objections or request for a hearing with the Oil Conservation Division, 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505, within 20 days. Additional information can be obtained by contacting [redacted] at [redacted].
Good Day, lei

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:

Michael Don Dixon
PO Box 393
Springer, OK 73458

2. Article Number
(Transfer from service label) 7006 2760 0003 6281 1254

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Michael Don Dixon* Agent Addressee

B. Received by (Printed Name) Michael Don Dixon C. Date of Delivery 11/19/07

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:

Cook Children's Medical Center
Gen Fund Foundation
c/o JP Morgan Chase Bank NA
PO Box 99084
Fort Worth, TX 76199

2. Article Number
(Transfer from service label) 7006 2760 0003 6281 1278

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *R. Estes* Agent Addressee

B. Received by (Printed Name) R. ESTES 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

- 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:

Claire Collins
3257 Rogers Ave
Forth Worth, TX 76109

2. Article Number
(Transfer from service label) 7006 2760 0003 6281 1193

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Claire Collins* Agent Addressee

B. Received by (Printed Name) Claire Collins C. Date of Delivery 11/19/07

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:

William H Collins
 6542 Nine Mile Azle Road
 Fort Worth, TX 76135

2. Article Number
(Transfer from service label)

7006 2760 0003 6281 1209

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
 X *William H Collins* Agent Addressee
- B. Received by (Printed Name) C. Date of Delivery
 William H Collins 11/13/07
- 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:

Minerals Management Services
 Royalty Management Program
 PO Box 5810
 Denver CO 80217

2. Article Number
(Transfer from service label)

7006 2760 0003 6281 1131

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
 X *[Signature]* Agent Addressee
- B. Received by (Printed Name) C. Date of Delivery
 [Signature] 11/13/07
- 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:

Donald L Clark
 PO Box 191407
 Dallas, TX 75219

2. Article Number
(Transfer from service label)

7006 2760 0003 6281 1056

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
 X *L. Clark* Agent Addressee
- B. Received by (Printed Name) C. Date of Delivery
 L. Clark 11/14/07
- 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 THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
	B. Received by (Printed Name) <i>James Hubert</i>	C. Date of Delivery <i>11/13/07</i>
1. Article Addressed to:	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
2. Article Number (Transfer from service label) 7006 2760 0003 6281 1070		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

James Hubert
 3209 Dublin Ln
 Louisville, KY 40206

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
	B. Received by (Printed Name) <i>Charlotte Ann Pier</i>	C. Date of Delivery <i>11/10/07</i>
1. Article Addressed to:	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7006 2760 0003 6281 1117		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

Charlotte Ann Pier
 4349 Bellaire Dr S #129
 Fort Worth TX 76109

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 	A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
	B. Received by (Printed Name) <i>Susan Labunski</i>	C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7006 2760 0003 6281 1087		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

Susan Labunski
 695 S Berkley Ave
 Elmhurst, IL 60126

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:

Charles R Collins
1404 Farrington Drive
Knoxville, TN 37923

2. Article Number
(Transfer from service label) 7006 2760 0003 6281 1100

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Richard D. Isbell Agent Addressee

B. Received by (Printed Name)
Richard D. Isbell

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

- 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:

Jane Ann Hudson Davis
6770 Wolf Creek Ct
Rio Rancho, NM 87144

2. Article Number
(Transfer from service label) 7006 2760 0003 6281 1261

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Suzanne Davis Agent Addressee

B. Received by (Printed Name)

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

- 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:

Robert Hubert
20218 NE 163rd Street
Woodinville, WA 98072

2. Article Number
(Transfer from service label) 7006 2760 0003 6281 1094

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Edna Hubert Agent Addressee

B. Received by (Printed Name)
Elizabeth Hubert

C. Date of Delivery
4/13

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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <i>Wayne Bohner</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	B. Received by (Printed Name) <i>Wayne Bohner</i>	C. Date of Delivery <i>11/3/07</i>
1. Article Addressed to: Salvation Army - Dallas Texas Divisional Headquarters PO Box 36607 Dallas, TX 75235	D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) <u>7006 2760 0003 6281 1223</u>		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <i>Charlotte Daugirda</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
	B. Received by (Printed Name)	C. Date of Delivery <i>11/10/07</i>
1. Article Addressed to: Charlotte Daugirda 3257 Rogers Ave Fort Worth, TX 76109	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label) <u>7006 2760 0003 6281 1124</u>		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <i>Charlotte Coleman</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
	B. Received by (Printed Name)	C. Date of Delivery <i>11/13/07</i>
1. Article Addressed to: Charlotte Coleman 1304 Great Oak Dr Pittsburg, PA 15220	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input checked="" type="checkbox"/> No	
2. Article Number (Transfer from service label) <u>7006 2760 0003 6281 1179</u>		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

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:

M Craig Clark Inc
PO Box 50635
Midland, TX 79710

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name) *William J. Clark* C. Date of Delivery *11/14/07*

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) 7006 2760 0003 6281 1049

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:

Silverado Oil & Gas LLP
PO BOX 52308
Tulsa, OK 74152

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name) *Greg Dicks* C. Date of Delivery *11/08/07*

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) 7006 2760 0003 6281 1032

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:

John W Hubert
430 W Swon
St. Louis, MO 63119

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Agent
 Addressee

B. Received by (Printed Name) *John W Hubert* 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 (Transfer from service label) 7006 2760 0003 6281 1155

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>W.P. Edwards</i>	
	B. Received by (Printed Name) <i>W.P. Edwards</i>	C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: Higgins Trust Inc c/o William P Edwards PO Box 6905 Thomasville, GA 31758		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
2. Article Number (Transfer from service label) 7006 2760 0003 6281 1230		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>K.R. Beach</i>	
	B. Received by (Printed Name) <i>Kath R Beach</i>	C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: Kathryn Beach 2301 Bennett Rd Lafayette, IN 47909		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
2. Article Number (Transfer from service label) 7006 2760 0003 6281 1162		
PS Form 3811, February 2004 Domestic Return Receipt		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee <i>Ellis Skinner</i>	
	B. Received by (Printed Name) <i>Ellis Skinner</i>	C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No
1. Article Addressed to: Linda P Clark Skinner 27217 Waterfall Hill Spicewood TX 78669		
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.		
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes		
2. Article Number (Transfer from service) 7006 2760 0003 6281 1148		
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

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:

Charles M Pier
4004 Sanguinet St
Forth Worth, TX 76107

2. Article
(Transit)

7006 2760 0003 6281 1186

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

- Agent
- Addressee

B. Received by (Printed Name)

[Handwritten Name]

C. Date of Delivery

[Handwritten Date]

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