

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

APPLICATION OF DEVON ENERGY
PRODUCTION COMPANY, L.P. FOR
APPROVAL OF A NON-STANDARD
GAS SPACING AND PRORATION UNIT,
UNORTHODOX OIL WELL LOCATIONS,
AND COMPULSORY POOLING, CHAVES
COUNTY, NEW MEXICO.

Case No. 14,528

AFFIDAVIT OF NOTICE

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

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

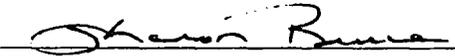
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Devon Energy Production Company, L.P.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the 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 1st day of September, 2010 by James Bruce.

My Commission Expires: 3/14/13



Notary Public

Oil Conservation Division
Case No. 14528
Exhibit No. 8A

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

July 29, 2010

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit, an unorthodox location, and compulsory pooling, filed with the New Mexico Oil Conservation Division by Devon Energy Production Company, L.P., regarding the S $\frac{1}{2}$ NE $\frac{1}{4}$ and N $\frac{1}{2}$ SE $\frac{1}{4}$ of Section 7, and the S $\frac{1}{2}$ NW $\frac{1}{4}$ and N $\frac{1}{2}$ NW $\frac{1}{4}$ of Section 8, Township 10 South, Range 29 East, N.M.P.M., Chaves County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, August 19, 2010, 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, August 12, 2010. 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

Pure Energy Group, Inc.
Suite 218
22610 U.S. Highway 281 North
San Antonio, Texas 78258

Chisos, Ltd.
670 Dona Ana Road SW
Deming, New Mexico 88030

Samedan Royalty Corporation
Suite 100
100 Glenborough Drive
Houston, Texas 77067

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:

Samedan Royalty Corporation
Suite 100
100 Glenborough Drive
Houston, Texas 77067

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

4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number (Transfer from service label) **7007 3020 0001 2489 4469**

PS Form 3811, February 2004

Domestic Return Receipt

D-607

102595-02-M-1540

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HOUSTON SPECIAL USE

Postage	\$0.61	0500
Postmark Here		
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
Total Postage & Fees	\$0.00	
	\$5.71	07/30/2010

Sent to Samedan Royalty Corporation
Suite 100
100 Glenborough Drive
Houston, Texas 77067

PS Form 3800, August 2005

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

- 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:

Chisos, Ltd.
670 Dona Ana Road SW
Deming, New Mexico 88030

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

4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number (Transfer from service label) **7007 3020 0001 2489 4452**

PS Form 3811, February 2004

Domestic Return Receipt

D-607

102595-02-M-1540

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HOUSTON SPECIAL USE

Postage	\$0.61	0500
Postmark Here		
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
Total Postage & Fees	\$0.00	
	\$5.71	07/30/2010

Sent to Chisos, Ltd.
670 Dona Ana Road SW
Deming, New Mexico 88030

PS Form 3800, August 2005

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also, complete item 4 if Restricted Delivery is desired.
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1. Article Addressed to:

Chisos, Ltd.
670 Dona Ana Road SW
Deming, New Mexico 88030

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

4. Restricted Delivery? (Extra Fee) Yes No

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PS Form 3811, February 2004

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HOUSTON SPECIAL USE

Postage	\$0.61	0500
Postmark Here		
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
Total Postage & Fees	\$0.00	
	\$5.71	07/30/2010

Sent to Chisos, Ltd.
670 Dona Ana Road SW
Deming, New Mexico 88030

PS Form 3800, August 2005

See Reverse for Instructions

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

HOUSTON SPECIAL USE

Postage	\$0.61	0500
Postmark Here		
Return Receipt Fee (Endorsement Required)	\$2.80	02
Restricted Delivery Fee (Endorsement Required)	\$2.30	
Total Postage & Fees	\$0.00	
	\$5.71	07/30/2010

Sent to Chisos, Ltd.
670 Dona Ana Road SW
Deming, New Mexico 88030

PS Form 3800, August 2005

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:

Chisos, Ltd.
670 Dona Ana Road SW
Deming, New Mexico 88030

2. Article Number (Transfer from service label) **7007 3020 0001 2489 4452**

PS Form 3811, February 2004

Domestic Return Receipt

D-607

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- Signature Agent Addressee
Shelvi Host
- Received by (Printed Name) *Shelvi Host*
- Date of Delivery *07/30/2010*
- Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) Yes No

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SAN ANTONIO

Postage	\$0.61	0500
Postmark Here	02	
Return Receipt Fee (Endorsement Required)	\$2.80	
Registered Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$5.71	07/30/2010

Sent To: Energy Group, Inc.
Suite 218
Street, Apt. No.: 22610 U.S. Highway 281 North
or PO Box No. San Antonio, Texas 78258
City, State, ZIP+4:

PS Form 3800, August 2006 See Reverse for Instructions

7007 3020 0001 2489 4445

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:

Pure Energy Group, Inc.
Suite 218
22610 U.S. Highway 281 North
San Antonio, Texas 78258

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): *W. S. [Signature]* C. Date of Delivery: *8/2*

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 No

2. Article Number (Transfer from service label): 7007 3020 0001 2489 4445

PS Form 3811, February 2004 Domestic Return Receipt *D - Lou 7* 102595-02-M-1540

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)
jamesbruce@aol.com

August 11, 2010

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an amended application for a non-standard unit, an unorthodox location, and compulsory pooling, filed with the New Mexico Oil Conservation Division by Devon Energy Production Company, L.P., regarding the S $\frac{1}{2}$ NE $\frac{1}{4}$ and N $\frac{1}{2}$ SE $\frac{1}{4}$ of Section 7, and the S $\frac{1}{2}$ NW $\frac{1}{4}$ and N $\frac{1}{2}$ NW $\frac{1}{4}$ of Section 8, Township 10 South, Range 29 East, N.M.P.M., Chaves County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, September 2, 2010, 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, August 26, 2010. 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

Pure Energy Group, Inc.
Suite 218
22610 U.S. Highway 281 North
San Antonio, Texas 78258

Chisos, Ltd.
670 Dona Ana Road SW
Deming, New Mexico 88030

Samedan Royalty Corporation
Suite 100
100 Glenborough Drive
Houston, Texas 77067

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:

Pure Energy Group, Inc.
 Suite 218
 22610 U.S. Highway 281 North
 San Antonio, Texas 78258

2. Article Number

7007 3020 0001 2489 4629

(Transfer from service #

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15-40

Dev. low

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* Agent Addressee
- B. Received by (Printed Name) *SILVESTRE* C. Date of Delivery *8/18*
- 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:

Samedan Royalty Corporation
 Suite 100
 100 Glenborough Drive
 Houston, Texas 77067

2. Article Number

7007 3020 0001 2489 4643

(Transfer from service #

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15-40

Dev. low

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* Agent Addressee
- B. Received by (Printed Name) *ACCONAZZEL* C. Date of Delivery *8/18/0*
- 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

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

Sent To Samedan Royalty Corporation
 Suite 100
 100 Glenborough Drive
 Houston, Texas 77067

Street, Apt. No., or PO Box No.
 City, State, ZIP+4

Postmark Here
 10210

PS Form 3800, August 2005

See Reverse for Instructions

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

Sent To Pure Energy Group, Inc.
 Suite 218
 22610 U.S. Highway 281 North
 San Antonio, Texas 78258

Street, Apt. No., or PO Box No.
 City, State, ZIP+4

Postmark Here
 87501

PS Form 3800, August 2005

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:

Samedan Royalty Corporation
 Suite 100
 100 Glenborough Drive
 Houston, Texas 77067

2. Article Number

(Transfer from service #

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15-40

Dev. low

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* Agent Addressee
- B. Received by (Printed Name) *ACCONAZZEL* C. Date of Delivery *8/18/0*
- 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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* Agent Addressee
- B. Received by (Printed Name) *ACCONAZZEL* C. Date of Delivery *8/18/0*
- 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

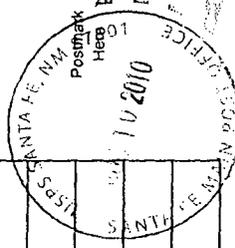
102595 6829 2000 0001 2489 4643

102595 6829 2000 0001 2489 4643

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7007 3020 0001 2489 4636

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



Sent to
 Street, Apt. No.,
 or PO Box No. Chisos, Ltd.
 City, State, ZIP+4 670 Dona Ana Road SW 88030
 Deming, New Mexico

PS Form 3800, August 2005 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: Chisos, Ltd. 670 Dona Ana Road SW Deming, New Mexico 88030		A. Signature <input checked="" type="checkbox"/> Agent B. Received by (Printed Name) <input type="checkbox"/> Addressee 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
2. Article Number (Transfer from service label) 7007 3020 0001 2489 4636		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
PS Form 3811, February 2004 Domestic Return Receipt		102595-02-M-1540	

Dev. 604