Form 3160-5 (February 2005)

Subsequent Report

UNITED STATES OCD-ARTES !!

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No 1004-0137

Expires March 31, 2007

5 Lease Serial No

Temporarily Abandon

NM-025778-A & NM-12210
6 If Indian, Allottee or Tribe Name

SUNDRY	NOTICES AND REPORTS ON WELLS
Do not use this	form for proposals to drill or to re-enter an
bandoned well.	Use Form 3160-3 (APD) for इस्ट्रिक व्यवस्था

	=			
SUBM	IT IN TRIPLICATE – Othe	er instructions on page 2.	7 If Unit of CA/Ag	reement, Name and/or No.
1 Type of Well		JAN 0 7 201	0	
Oil Well	Well Other	NINACCD ADTE	8. Well Name and N	lo. see below
2 Name of Operator Devon Energy Production Co., LP		NMOCD ARTE	9. API Well No	see below
3a. Address 3b Phone No (include area code) 20 North Broadway 0KC, OK 73102 (405)-552-7802			'	or Exploratory Area Atoka, North Gas (85290)
4 Location of Well <i>(Footage, Sec , T.</i> Sec 20 & 21-T18S-R31E (See Below)	,R.,M, or Survey Description	n)	11. Country or Paris	sh, State Eddy County, NM
12 CHE	CK THE APPROPRIATE B	OX(ES) TO INDICATE NATURE	OF NOTICE, REPORT OR OT	THER DATA
TYPE OF SUBMISSION		TYP	E OF ACTION	
✓ Notice of Intent	Acidize	Deepen	Production (Start/Resume)	Water Shut-Off
[V] Notice of Intent	Alter Casing	Fracture Treat	Reclamation	Well Integrity
Subsequent Demont	Casing Repair	New Construction	Recomplete	Other Lease Commingle,

Water Disposal Final Abandonment Notice Convert to Injection Plug Back 13 Describe Proposed or Completed Operation Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA Required subsequent reports must be filed within 30 days following completion of the involved operations If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection)

Plug and Abandon

Devon Energy Production Co., LLP respectfully requests approval for lease commingle and off lease sales and measurement of gas hydrocarbon production from the following wells:

Keohane Etal Fed 1: API # 30-015-22131 Sec 21-T18S-R31E Lease NM-025778-A Shugart; Atoka, North Gas (85290) CA NM 72013 Littlefield EM Fed 1: API # 30-015-21996 Sec 20-T18S-R31E Lease NM-12210 Shugart; Atoka, North Gas (85290) CA NM 71976

Each location has its' own tank battery and EFM. A common gas sales meter associated with a DCP central delivery point (CDP) is located in Sec 20-T18S-R31E just east of the Littlefield EM Fed 1. Waste is not induced and no correlative rights are impaired.

Working, royalty, and overriding interest owners have been notified via certified mail (see attached).

Change Plans

SEE ATTACHED FOR CONDITIONS OF APPROVAL

Off Lease Measurement

& Gas Sales

14 I hereby certify that the foregoing is true and correct Name (Printed/Typed)/	
Stephanie A. Ysasaga///	Title Sr. Staff Engineering Technician
Signature	Date 11/23/2009
// THIS SPA	CE FOR FEDERAL OR STATE OFFICE USE
Approved by	
'/s/ JD Whitlock Jr	Title 6/2/2010
Conditions of approval, if any, are attached Approval of this notice that the applicant holds legal or equitable title to those rights in the entitle the applicant to conduct operations thereon	

C Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Instructions on page 2)



APPLICATION FOR LEASE COMMINGLING & OFF-LEASE MEASUREMENT AND OFF LEASE SALES APPROVAL

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

Lease commingling proposal for Keohane & Littlefield leases:

Devon Energy Production Company, LP is requesting approval for lease commingle, off-lease storage and off-lease measurement of hydrocarbon gas production from the Shugart; Atoka, North Gas (85290) from the following wells:

Federal Lease NMNM-025778-A

Well Name	Location	API#	Pool 85290	MCFPD	BTU
Keohane Etal Fed 1	NWSW Sec 21-T18S-R31E	30-015-22131	Shugart; Atoka, North C	Gas 4591	1231

Federal Lease NM-12210

Well Name	Location	API#	Pool 85290	MCFPD	BTU
Littlefield EM Fed 1	NWSE Sec 20-T18S-R31E	30-015-21996	Shugart; Atoka, North Gas	1730	1160

A map (Exhibit A) is enclosed showing the Federal leases and well locations in Section 20 and 21 of T18S R31E. The ownership in the Keohane and Littlefield leases are not identical; all affected working interest, royalty and overriding royalty owners have been notified of this proposal (Exhibit B).

Gas metering:

The gas hydrocarbon production from the Keohane Etal Fed I and Littlefield EM Fed I will be the only hydrocarbon being lease commingled, measured and sold off-lease. Each location has its' own facility located in the NWSW and NWSE of Section 21 and 10 (respectively) in T18S, R31E on Federal Leases NMNM-025778-A and NM-12210 in Eddy County, New Mexico (see facility diagrams). Each location has it own EFM to verify gas rates. A common gas sales meter associated with a DCP central delivery point (CDP) is located in Sec 20-T19S-R31E just east of the Littlefield EM Fed 1(see Exhibit C). The BLM's interest in both wells is the same. Waste is not induced and no correlative rights are impaired.

These meters will be calibrated on a regular basis per API, NMOCD and BLM specifications. ROW has been obtained according to Exhibit C to transport gas production to the DCP CDP. The BLM and OCD will be notified of any future changes in the facilities.

Process and Flow Descriptions:

Please see attached diagrams for the proposed Keohane Etal Fed 1 and Littlefield EM Fed 1 batteries. The flow of produced fluids is shown in detail on Exhibit D along with a description of each vessel.

The commingling of production is in the interest of conservation and waste and will result in the most effective, economic means of producing the reserves in place from the affected wells and will not result in reduced royalty or improper measurement of production. The proposed commingling will reduce operating expenses as well as reduce the surface facility footprint and overall emissions.

Devon Energy Production Company, LP understands the requested approval will not constitute the granting of any right-of-way or construction rights not granted by the lease instrument. Additionally, Devon Energy Production Co., LP will submit within 30 days, an application for right-of-way approval to the BLM and NMOCD section in your office, if we have not already done so.

, Y 1					
DATE IN	SUSPENSE	ENGINEER	LOGGED IN ,	TYPE	APP NO

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] [PMX-Pressure Maintenance Expansion] [WFX-Waterflood 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] Location - Spacing Unit - Simultaneous Dedication NSL NSP SD Check One Only for [B] or [C] Commingling - Storage - Measurement [B] CTB PLC PC OLS OLM DHC [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 Working, Royalty or Overriding Royalty Interest Owners [A] Offset Operators, Leaseholders or Surface Owner [B] [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 For all of the above, Proof of Notification or Publication is Attached, and/or, [E] [F] Waivers are Attached SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE [3] OF APPLICATION INDICATED ABOVE. **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is accurate and complete to the best of my knowledge. I also understand that no action will be taken on this application until the required information and notifications are submitted to the Division. Note: Statement must be completed by an individual with managerial and/or supervisory capacity. Stephanie A Ysasaga Sr Staff Engineering Technician 11/23/2009 Print or Type Name Signature Date Stephanie.Ysasaga@dvn.com

e-mail Address

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

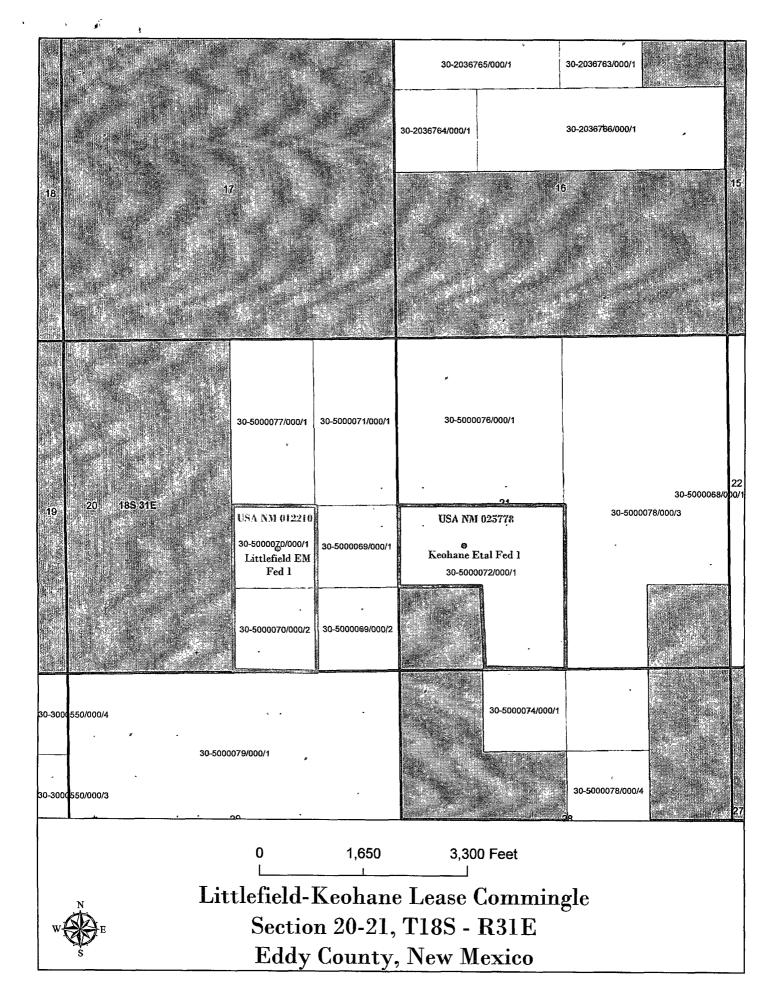
OIL CONSERVATION DIVISION

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)					
	Devon Energy Production Co., LP				
OPERATOR ADDRESS: 20 North	DPERATOR ADDRESS: 20 North Broadway, Ste 1500				
APPLICATION TYPE:					
☐ Pool Commingling ☐ Lease Commingli	ng ☐Pool and Lease Co	mmingling \(\square\) Off-Lease	Storage and Measur	rement (Only if not Surface	e Commingled)
LEASE TYPE: Fee					
Is this an Amendment to existing Orde	r? ∏Yes ⊠No If	"Yes", please include t	the appropriate C	Order No.	
Have the Bureau of Land Management ⊠Yes □No	(BLM) and State Land	d office (SLO) been not	utted in writing (of the proposed comin	mgmg
		OL COMMINGLIN ts with the following in			
	Gravities / BTU of	Calculated Gravities /		Calculated Value of	
(1) Pool Names and Codes	Non-Commingled	BTU of Commingled		Commingled	Volumes
	Production	Production		Production	,
		_			
				_	
				_	
(2) Are any wells producing at top allow	ables? Yes No		1		
 (2) Are any wells producing at top allow (3) Has all interest owners been notified (4) Measurement type. ☐Metering (5) Will commingling decrease the value 	by certified mail of the pr Other (Specify)		Yes No be why commingl	ing should be approved	
	` '	SE COMMINGLIN ts with the following in			
(1) Pool Name and Code. Shugart; Atoka		is with the following h	mor mation		
(2) Is all production from same source of)			
(3) Has all interest owners been notified b		posed commingling?	⊠Yes □N	lo	
(4) Measurement type. Metering [_ Other (Specify)				
	(C) POOL and	LEASE COMMIN	IGLING		
	Please attach shee	ts with the following in	nformation		
(1) Complete Sections A and E					
	D) OFF LEACE CO	COD A CD: J NATE A	CHIDDRAGRAGA		
		FORAGE and MEA ets with the following			
(1) Is all production from same source of		<u> </u>			
(2) Include proof of notice to all interest					
(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		ions Include lease number	ers if Federal or St	ate lands are involved	
(3) Lease Names, Lease and Well Numb					
Lhambu and first had the	to two and as well-to to the	hoot of man large de de	d baleaf		
I hereby certify that the information above	s true and complete to the	e dest of my knowledge an	ia peliel		
SIGNATURE: Sr. Staff Engineering Technician DATE 11/23/2009				1/23/2009	
TYPE OR PRINT NAME Stephanie A Ysasaga TELEPHONE NO.: (405)-552-7802					
E-MAIL ADDRESS:Stephanie. Ysas	/ga@dvn.com				

Submit 3 Cépies To Appropriate District Office	State of New Me Energy, Minerals and Natu		Form C-103 May 27, 2004_
<u>District I</u> 1625 N. French Dr., Hobbs, NM 88240	Ellergy, Millerais and Natu	iai Resources	WELL API NO.
District II	OIL CONSERVATION	DIVISION	30-015-31020 & 30-015-31876
1301 W. Grand Ave., Artesia, NM 88210 District III	1220 South St. Fran		5. Indicate Type of Lease FED STATE FEE FEE
1000 Rio Brazos Rd., Aztec, NM 87410 District IV	Santa Fe, NM 87		6. State Oil & Gas Lease No.
1220 S. St Francis Dr , Santa Fe, NM			2002
87505 SUNDRY NOT	ICES AND REPORTS ON WELLS		7. Lease Name or Unit Agreement Name
	SALS TO DRILL OR TO DEEPEN OR PLU CATION FOR PERMIT" (FORM C-101) FO		
PROPOSALS.)		жэсн	See Below 8. Well Number
1. Type of Well: Oil Well	Gas Well Other		8. Wen (vulliber
2. Name of Operator	Donato di sa Camarana I D		9. OGRID Number 6137
3. Address of Operator	Production Company, LP		10. Pool name or Wildcat
20 North Broadway Oklahoma Ci	ity, Oklahoma 73102-8260 (40	5) 552-7802	See Below
4. Well Location (See Below)			
	feet from the line an		
	wnship Range		y County New Mexico
	11. Elevation (Show whether DR, n/a	(M.D., M., O.M., etc.)	
Pit or Below-grade Tank Application 0			
	raterDistance from nearest fresh w		·
Pit Liner Thickness: mil			
12. Check A	Appropriate Box to Indicate N	ature of Notice,	Report or Other Data
NOTICE OF IN	ITENTION TO:	SUB	SEQUENT REPORT OF:
PERFORM REMEDIAL WORK		REMEDIAL WOR	
TEMPORARILY ABANDON	CHANGE PLANS	1	LLING OPNS. P AND A
PULL OR ALTER CASING OTHER: LEASE COMMINGLE, (MULTIPLE COMPL DEFI FASE GAS	CASING/CEMENT	ГЈОВ
SALES & MEASUREM	ENT	OTHER:	
			d give pertinent dates, including estimated date
of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.			
•			
Devon Energy Production Co., LLP hydrocarbon production from the following		ease commingle and	off lease sales and measurement of gas
* Keohane Etal Fed 1: API # 30)-015-22131 Sec 21-T18S-R31E L	ease NM-025778-A	Shugart; Atoka, North Gas (85290)
	30-015-21996 Sec 20-T18S-R31E		
Each location has its' own tank hatte	ery and FEM A common gas sales	meter associated wit	th a DCP central delivery point (CDP) is
located in Sec 20-T18S-R31E just ea			
Working, royalty, and overriding int	erect owners have been notified via	certified mail (see s	attached)
working, royalty, and overriding int	crest owners have been notified via	certified man (see a	mached).
1.2			
			e and belief. I further certify that any pit or below- or an (attached) alternative OCD-approved plan .
SIGNATURE /	TITLE_S	Sr. Staff Engineering	g Technician DATE11/23/2009
Type or print name Stephanie A.	Ysasaga E-mail address: Ste	enhanie Vsasaga@d	vn.com Telephone No. (405) 552-7802
For State Use Only	Junian address. Ste	phanie, i sasagatou	
APPROVED BY:	TITLE		DATE
Conditions of Approval (if any):			



Marbob Energy Corporation P O Box 227 Artesia, NM 88211-0227 7008-1140-0004-6108-9199

Katherine Mary Scott 809 Sheridan Street Altoona, PA 16602 7008-1140-0004-6108-9182

Mary Elizabeth Baish Westin 220 Fran Street Lilly, PA 15938 7008-1140-0004-6108-9175

Margaret B Masters 47 Oakwood Drive Wormlysburg, PA 17043 7008-1140-6108-9168

Ralph Albert Shugart Trust c/o Michael McCannon Elizabeth Shugart Duncan Trustee 501 S Cherry St, Ste 570 Denver, CO 80246-1327 7008-1140-0004-6108-9151

Patsy Ann Iverson Page 1155 Muirlands Vista Way La Jolla, CA 92037 7008-1140-0004-6108-9144

Robert W Kent P O Box 131524 Houston, TX 77219-1524 7008-1140-0004-6108-8260

Michael R McGuire 8815 Mendocino CT NE Albuquerque, NM 87122 7008-1140-0004-6108-8253

Mary Ellen Johnston 2715 North Kentucky, #16 Roswell, NM 88201-5868 7008-1140-0004-6108-8246

Iverson III Inc c/o Steve Iverson 3454 S Zunis Tulsa, OK 74105 7008-1140-0004-6108-8239

P A I Incorporated c/o Paul D Iverson Jr 4437 Northwest 32 Place Oklahoma City, OK 73112 7008-1140-0004-6108-8222

Nortex Corporation 1415 Lousiana, Ste 3100 Houston, TX 77002 7008-1140-0004-6108-8215

S J I Jr 1990 Trust c/o Pamela Burke Succ Trustee P O. Box 10508 Midland, TX 79702 7008-1140-0004-6108-8208

W W I 1990 Trust
Pamela Burke Succ Trustee
P.O Box 10508 Mıdland, TX 79702
7008-1140-0004-6108-8192

P 1 P 1990 Trust P O Box 10508 Midland, TX 79702 7008-1140-0004-6108-8185 Higgins Trust Inc. c/o William P. Edwards P O Box 6905 Thomasville, GA 31758 7008-1140-0004-6108-8178

Minerals Management Service Royalty Management Program P O Box 5810 Denver, CO 80217 7008-1140-0004-6108-8161

Rojo Inc P O Box 1120 Roswell, NM 88201 7008-1140-0004-6108-8154

Garel Ray/Myrtle Myra Westfall Rev Trust, Myrtle Myra Westfall/Sandra Westfall Shank Co-Tisutee 704 Bullock Artesia, NM 88210 7008-1140-0004-6108-8147

George Westall P O Box 70 Ruidoso Downs, NM 88346 7008-1140-0004-6108-8130

Margaret H Naylor Rev Trust - Zia Trust Inc Trustee 4131 Camino Coyote, Ste A Las Cruces, NM 88001 7008-1140-0004-6108-8123

Van S Welch II 2207 Fairway Drive Duncan, OK 73533 7008-1140-0004-6108-8116

Canadian Kenwood Company a Limited Partnership 730 2nd Avenue, Ste 1300 Minneapolis, MN 55402 7008-1140-0004-6108-8109

Mark James Frost P.O Box 1120 Roswell, NM 88202-1120 7008-1140-0004-6108-8093

Marianne Keohane Frost P.O Box 1120 Roswell, NM 88202-1120 7008-1140-0004-6108-8086

M F Pearsall 59 Main Street 11-2 Cranberry Knoll Dennis, MA 02638 7008-1140-0004-6108-8079

Sue Saunders Graham P.O Box 987 Roswell, NM 88202 7008-1140-0004-6108-8062

John Michael Frost P.O Box 1120 Roswell, NM 88202-1120 7008-1140-0004-6108-8055

Theresa Ann Frost 8672 NE 123rd Place Kırkland, WA 98034-6030 7008-1140-0004-6108-8048

The Toles Company LLC – Perry S Toles P O. Box Drawer 1300 Roswell, NM 88202 7008-1140-0004-6108-8031 Estate of T R Parker, Justin B George & William G Parker Co Personal Reps 221 Stewart Ave, Ste 301 Medford, OR 97501 7008-1140-0004-6108-9496

Michael Irvin Welch 8610 Kenosha Drive Lubbock, TX 79423 7008-1140-0004-6108-9489

Wendell T Welch P.O Box 8428 Nikinski, AK 99635-8428 7008-1140-0004-6108-9472

Sanders Thomas Welch 12701 Smokey Road La Mesa, NM 88044 7008-1140-0004-6108-9465

Phoebe Jane Welch IV P O Box 495 La Mesa, NM 88044 7008-1140-0004-6108-9458

Billie Lewis & Becky Rankin Jtwros 1748 Terrace Circle Caca Grande, 85222 7008-1140-0004-6108-9441

Carolyn N Iverson Separate Property P O Box 10508 Midland, TX 79702-7508 7008-1140-0004-6108-9434

Fidelity Exploration & Prod Co P O. Box 5602 Bismarck, ND 58506-5602 7008-1140-0004-6108-9427

Alvin M Iverson Jr. Trust Peter Martin Iverson Successor Trustee 5073 S 76 East Ave, Apt D Tulsa, OK 74145-6232 7008-1140-0004-6108-9410

S J Iverson III P O Box 4095 Midland, TX 79704 7008-1140-0004-6108-9403

Claire Iverson 2005 Kidwell Street Dallas, Texas 75214 7008-1140-0004-6108-9397

James Gary Welch 15714 Winding Moss Drive Houston, Texas 77068 7008-1140-0004-6108-9380

Marion Welch Pendergrass 2705 Gaye Drive Roswell, NM 88201 7008-1140-0004-6108-9373

Robert Welch Gillespie 186 Sierra View Pasadena, CA 91105 7008-1140-0004-6108-9366

Bryan W Welch 1764 S Paige Creek Place Tucson, AZ 85748 7008-1140-0004-6108-9359 Becky Welch Panack c/o Edward Jones Acct # 60014636-1-8 P O. Box 52516 Mesa, AZ 85208 7008-1140-0004-6108-9342

Stacy Welch Green HC I Box 565 Elgin, AZ 85611 7008-1140-0004-6108-9335

Phoebe Wclch 20350 Marsh Creek Road Brentwood, CA 94513-4808 7008-1140-0004-6108-9328

Eileen Mary Kunkel Rev Living Trust Eileen Mary Kunkel Trustee 46183 State Hwy 74, Apt 19 Palm Dessert, CA 92260 7008-1140-0004-6108-9311

Claire Ann Iverson Rev Living Trust Pamela J Burke Successor Trustee P.O. Box 10508 Midland, TX 79702 7008-1140-0004-6108-9304

Siegfried James Iverson III Rev Trust Pamela J Burke Sucessor Trustee P.O Box 10508 Midland, TX 79702 7008-1140-0004-6108-9298

Elyse Saunders Patterson Trusts Inv LLC P O Box 3480 Oil & Gas Dept Omaha, NE 68103-0480 7008-1140-0004-6108-9281

TIG Properties LP – Iverson Exploration Inc Gen Partner Andrews S Iverson Pres P O Box 10508 Midland, TX 79702 7008-1140-0004-6108-9274

Suzanne M Harrington 261 River Birch Circle Mooresville, NC 28115 7008-1140-0004-6108-9267

Jewell D Iverson Rev Trust, Richard R Sullivan, Trustee Intervivos Trust U/T/A09/22/81 4870 South Lewis, Suite 200 Tulsa, OK 74105 7008-1140-0004-6108-9250

lverson Family Inter-Vivas Test Dateed 10/22/92-Peter C & Billie H Iverson Co-Trustees 206 Bell Meade Circle Eufaula, OK 74432-2071 7008-1140-0004-6108-9243

Jeanette Y Keohane P.O Box 51722 Albuquerque, NM 87181 7008-1140-0004-6108-9236

Betty Baish Strohmeyer Estate James S Strohmeyer Frgn Pr 5311 E 5th Street Tucson, AZ 85711-2331 7008-1140-0004-6108-9229

Donald S Iverson 3454 S Zunis Ave Tulsa, OK 74105-2727 7008-1140-0004-6108-9212

Maurice M Pippin P O Box 12972 Odessa, TX 79768-2972 7008-1140-0004-6108-9205 Energen 1994 Pennzoil 20 North Broadway Oklahoma City, OK 73102 7008-1140-0004-6108-8024

18 31 Inc. P O Box 1120 Roswell, NM 88202-1120 7008-1140-0004-6108-8017

2. Article Number 7008 1140 0004 6108 9380 (Transfer from service label)	rchandise Yes
PS Form 3811, February 2004 Domestic Return Receipt 102598	5-02-M-1540
■ Print your name and address on the reverse	No {
4. Restricted Delivery? (Extra Fee)	res .
2. Article Number 7008 1140 0004 6108 8222	
PS Form 3811, February 2004 Domestic Return Receipt 102595	5-02-M-1540
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: Van S Welch II 2207 Fairway Drive Duncan, OK 73533 3. Service Type Certified Mail Express Mail	/-5 'es
☐ Registered ☐ Return Receipt for Mer ☐ Insured Mall ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Y	
2. Article Number (Transfer from service label). 7008 1140 0004 6108 8116	

TO Complete Name of Co. 10 At 11		
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature X Drawld S H. S Add	
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.	B Received by (Printed Name) C. Date of D. D. Is delivery address different from Item 1? Yes	elivery
1. Article Addressed to:	If YES, enter delivery address below:	
Donald S Iverson 3454 S Zunis Ave Tulsa, OK 74105-2727	3. Service Type	
3 1103 2727	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merch ☐ Insured Mail ☐ C.O.D.	
2. Article Number	4. Restricted Delivery? (Extra Fee) 口 Yes	
(naisiet noth service laber) 1 1111 111	### 102595-02	-M-154
John John John John John John John John		
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Signature	
 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. 	B. Received by (Printed Name) C. Date of D	
1. Article Addressed to:	D. Is delivery address different from item 11? ☐ Yes If YES, enter delivery address below: ☐ No	
Energen 1994 Pennzoil 20 North Broadway Oklahoma City, OK 73102	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merch Insured Mail C.O.D.	andis
	4. Restricted Delivery? (Extra Fee)	
2. Article Number	1140 0004 6108 8024	
(Transfer from service label)		
(nansier nom service label)	leturn Recelpt 102595-02	?-M-154
PS Form 3811, February 2004 Domestic Re SENDER: COMPLETE THIS SECTION	complete this section on Delivery	2-M-154
PS Form 3811, February 2004 Domestic Reservice 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,	leturn Recelpt 102595-02	nt ressec
PS Form 3811, February 2004 Domestic Research Sender: 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.	COMPLETE THIS SECTION ON DELIVERY A. Signature X Bol Kendey Landard	nt ressec
PS Form 3811, February 2004 Domestic Reserved 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.	COMPLETE THIS SECTION ON DELIVERY A. Signature X Bull Canada B. Received by (Printed Name) C. Date of During the printed Name of During the During the printed Name of During the Du	nt ressectivery
PS Form 3811, February 2004 Domestic Resident Sender: Complete Items 1, 2, and 3. Also complete Items 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: Marion Welch Pendergrass 2705 Gaye Drive Roswell, NM 88201	COMPLETE THIS SECTION ON DELIVERY A. Signature X Bol Result 1 Age B. Received by (Printed Name) C. Date of D Is delivery address different from item 1? Yes If YES, enter-delivery address below: No 3. Service Type Certified Mail Express Mail	nt ressee elivery

SENDER: COMPLETE THIS SECTION	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 	A Signature X Jin Strohmeye Agent Addressee
so that we can return the card to you. Attach this card to the back of the mailpier or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes
1. Article Addressed to:	D. Is delivery address different from item 1?
Betty Baish Strohmeyor Estate Betty Baish Strohmeyor Fren Pr Tucson, AZ 8571,1,2331	
1. Article Addressed to: 1. Article Addressed to: Betty Baish Strohmeyor Fren Pr. AZ 85711.2331 Betty Baish Strohmeyor Tucson, AZ 85711.2331 Baines S. Strohmeyor Tucson, AZ 85711.2331 Street Tucson, AZ 85711.2331	3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
2 Addio Number	7
(Transfer from service label)	008 1740 0004 P108 4554
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-154
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:	A. Signature X. Agent A. Signature X. Agent Addressee B. Received by (Printed Name) D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
George Westall P.O. Box 70 Ruidoso Downs, NM 88346	3. Service Type Certified Mail Registered Insured Mall C.O.D. Express Mall Return Receipt for Merchandlse C.O.D.
2. Article Number	
PS Form 3811, February 2004 Domestic Ret	
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■ 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: Phoebe Jane Welch IV	A. Signature A.
P.O. Box 495 La Mesa, NM 88044	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
2. Article Number 700A	4. Restricted Delivery? (Extra Fee)
(Transfer from service label)	

SENDER: COMPLETE THIS SECTION	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 mailplece, or on the front if space permits. 	A. Signature X
Article Addressed to:	D. Is delivery address different from item 1?
Robert W Kent P.O. Box 131524 Houston, TX 77219-1524	3. Service Type Certified Mail
2. Article Number 7008 1	7740 0004 6709 9560
PS Form 3811, February 2004 Domestic Re	sturn 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 mailplece, or on the front if space permits.	A. Signature X. Bulling Lewis Addressee B. Received by (Printed Name) D. Is delivery address different from item 1?
Billie Lewis & Becky Rankin Jtwros 1748 Terrace Circle Caca Grande, 85222	If YES, enter delivery address below: ☐ No 3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
2. Article Number 7008	4. Restricted Delivery? (Extra Fee) ☐ Yes 1140 0004 6108 9441
PS Form 3811, February 2004 Domestic Re	turn 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 mor on the front if space permits. 1. Article Addressed to:	A. Signature A. Signature A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 17 / ☐ Yes If YES, enter delivery address below: ☐ No
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 mor on the front if space permits. 1. Article Addressed to: Palm Pessent CA Fileen Mary Kunkel Prustee Opann Pessent CA Fileen Mary Kunkel Prustee Opann Pessent CA April Palm	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)
	L40 0004 6108 9311
	eturn Receipt 102595-02-M-1540

	(ストリルカン・ス・メント) 大松 はぎり かい おうじ しょういんきょうし
 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 X Agent Addres B. Received by (Printed Name) Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Patsy Ann Iverson Page 1155 Muirlands Vista Way La Jolla, CA 92037	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchand
	4. Restricted Delivery? (Extra Fee)
Number 7008 11	,40 0004 6308 9 <u>1,</u> 44
811, February 2004 Domestic Ret	turn Receipt 102595-02-M-1
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:	A. Signature X. Agent Addres B. Received by (Printed Name) D. Is delivery address different from ten in ?2 (1) (2) (1) (1) (2) (1) (2) (1) (2) (1) (2) (1) (2) (2) (1) (2) (2) (2) (2) (2) (2) (2) (2) (2) (2
Robert Welch Gillespie 186 Sierra View Pasadena, CA 91105	3. Service Type .
2. Article Number	
☐ (Transfer from service label) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	0004 6108 9366 '
PS Form 3811, February 2004 Domestic Ret	
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(Transfer from service label)	COMPLETE THIS SECTION ON DELIVERY A. Signature A. Agent Address
PS Form 3811, February 2004 Domestic Ret 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: Margaret B Masters 47 Oakwood Drive Wormlysburg, PA 17043	COMPLETE THIS SECTION ON DELIVERY A. Signature A. Signature A. Agent Address B. Received by (Printed Name) C. Date of Deliv D. ALS MAX IV EM If YES, enter delivery address below: No 3. Service Type Certified Mail Express Mail
PS Form 3811, February 2004 Domestic Ret 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: Margaret B Masters 47 Oakwood Drive Wormlysburg, PA 17043	A Signature A Signature A Signature A Received by (Printed Name) C. Date of Delivery Address B. Received by (Printed Name) C. Date of Delivery Address B. Received by (Printed Name) C. Date of Delivery Address If YES, enter delivery address below: No 3. Service Type Certified Mail Registered Return Receipt for Merchandl Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)

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SENDER: COMPLETE THIS SECTION	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, 	A. Signature X
or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Nortex Corporation 1415 Lousiana, Ste 3100	Jh 213
Houston, TX 77002	3. Senice Type Certified Mail
2. Article Number	4. Restricted Delivery? (Extra Fee) ☐ Yes
(Harister Horri Scrifted label)	1140 0004 6108 8215
PS Form 3811, February 2004 Domestic Re	turn Receipt 102595-02-M-1540
SENDED COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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so that we can return the card to you. Attach this card to the back of the mailplece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery THE WESTIM, JR. 11-24-09
1, Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
Mary Elizabeth Baish Westin 220 Fran Street Lilly, PA 15938	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)
2. Article Number	
(Transfer from service label)	
PS Form 3811, February 2004 Domestic Re	eturn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION	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:	A. Signature X
Michael Irvin Welch 8610 Kenosha Drive DOM S7 Lubbock, TX 79425	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise

SENDER: COMPLETE THIS SECTION	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 	A Signature X Agent D Agent
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 ma" or on the front if space permits. 1. Article Addressed to: 1. Article Addressed to: Care Ray Myrae Mestan Review Restant Shank Care Ray Myrae Myselfan Nyn 88210 Care Ray Myrae Myselfan Nyn 88210	B. Received by (Printed Name) C. Date of Delivery (173) Is delivery address different from item 1? Difes
1. Article Addressed to:	If YES, enter delivery address below:
Garel Ray Myrite Myra Westfall Shank Nyra Westfall Shank Artosia, Nyra Reliock Nyra Westfall Shank To A Bullock	
Ray Myrk Saldrisa, 1	3. Service Type
Carel Wezgek	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
10 th	4. Restricted Delivery? (Extra Fee) ☐ Yes
	L40 0004 6108 8147
PS Form 3811, February 2004 Domestic Ref	turn 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.	COMPLETE THIS SECTION ON DELIVERY A. Signarure X Addressee
Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery 1. 23.69 D. Is delivery address different from item 1? Yes
Article Addressed to:	D. Is delivery address different from item 1?
Sanders Thomas Welch 12701 Smokey Road La Mesa, NM 88044	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7008 13	40 0004 6108 9465
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY A. Signature
item 4 if Restricted Delivery is desired. Print your name and address on the reverse	X Agent Addressee
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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item ?
Elyse Saunders Patterson Trusts Inv LLC P.O. Box 3480 Oil & Gas Dept	101 2 M M 3
Omaha, NE 68103-0480	3. Service Type Certified Mail Registered Results And Control Control Results And Control
·	4. Restricted Delivery? (Extra Fee) ☐ Yes
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	B. Recaived by (Printed Name) C. Date of Delivery
Attach this card to the back of the mailpiece, or on the front if space permits.	Pat GreenWADE 11/30/09
1. Article Addressed to:	D. Is delivery address different from Item 1?
John Michael Frost	
P.O. Box 1120 Roswell, NM 88202-1120	3. Service Type ☐ Certifled Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label)	1140 0004 6108 8055
PS Form 3811, February 2004 Domestic Ref	turn Receipt 102595-02-M-154
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
Print your name and address on the reverse so that we can return the card to you.	B. Received by (Printed Name) C. Date of Deliver
Attach this card to the back of the mailpiece, or on the front if space permits.	Pat Greenwall 11/30/09
Article Addressed to:	D. Is delivery address different from item 1?
Mark James Frost P.O. Box 1120 Roswell, NM 88202-1120	3. Service Type Certified Mail Registered Return Receipt for Merchandise
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PS Form 3811, February 2004 Domestic Ref SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	4. Restricted Delivery? (Extra Fee) Yes 140 0004 6108 8093 turn Receipt 102595-02-M-154 COMPLETE:THIS SECTION ON DELIVERY A. Signature Y. A. A. Signature
(Transfer from service label) PS Form 3811, February 2004 Domestic Ref 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,	4. Restricted Delivery? (Extra Fee) Yes 140 0004 6108 8093 turn Receipt 102595-02-M-154 COMPLETE:THIS SECTION ON DELIVERY A. Signature Agent Addresse B. Received by (Printed Name) C. Date of Delivery
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(Transfer from service label) PS Form 3811, February 2004 Domestic Ref 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,	4. Restricted Delivery? (Extra Fee) Yes 14 0 0 0 4 6 1 0 8 0 9 3 turn Receipt 102595-02-M-154 COMPLETE THIS SECTION ON DELIVERY A. Signature Addresse B. Received by (Printed Name) C. Date of Deliver A. Signature C. Date of Deliver
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(Transfer from service label) PS Form 3811, February 2004 Domestic Ref 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 malipiece, or on the front if space permits. 1. Article Addressed to: Wendell T Welch P.O. Box 8428 Nikinski, AK 99635-8428	4. Restricted Delivery? (Extra Fee) Yes 4. Restricted Delivery address eliminates and service Type 5. Restricted Delivery? (Extra Fee) Yes 6. Pate of Delivery Addresse different from Item 1? Yes 6. If YES, enter delivery address below: No 7. No 7. No 8. Service Type 7. Certified Mail Express Mall

item 4 if Restricted Delivery is desired.	plete	A Signature
■ Print your name and address on the re		X Yan Durle Addressee
so that we can return the card to you.		B. Received by (Printed Name) C. Date of Delivery
Attach this card to the back of the mail or on the front if space permits.	ilbie.	YAM BURKE 124-08
4 Addisonal to	a Inc Go	. Is delivery address different from Item 1?
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SENDER: COMPLETE THIS SECTION	经海边"	COMPLETE THIS SECTION ON DELIVERY
,		A Signature
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Print your name and address on the re	everse	X Yam Duly Addressee
so that we can return the card to you. Attach this card to the back of the ma		B. Received by (Printed Name) C. Date of Delivery
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Article Addressed to:		D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
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Carolyn N Iverson Separate Pr	coperty	
P.O. Box 10508 Midland, TX 79702-7508	'	3. Service Type
Wildland, 17 79702-7308		☐ Certified Mail ☐ Express Mail
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		4. Restricted Delivery?-(Extra Fee) ☐ Yes
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(Transfer from service label) PS Form 3811, February 2004 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also comitem 4 if Restricted Delivery is desired. Print your name and address on the service was can return the card to your service.	Domestic Re	4. Restricted Delivery? (Extra Fee) Yes 14
PS Form 3811, February 2004 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also comitem 4 if Restricted Delivery is desired Print your name and address on the so that we can return the card to you. Attach this card to the back of the major on the front if space permits. 1. Article Addressed to: SILIT 1990 Trust clo Pamela Burnella Ruster of Pamela Burnella Ruster of Pamela Ruster of Pamela Ruster of Ruster of Pamela Ruster of	Domestic Re	4. Restricted Delivery? (Extra Fee) Yes 14
(Transfer from service label) PS Form 3811, February 2004 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also comitem 4 if Restricted Delivery is desired. Print your name and address on the service was can return the card to your service.	Domestic Re pplete i. everse ailpiece, ke Succ Trus	4. Restricted Delivery? (Extra Fee) Yes 14

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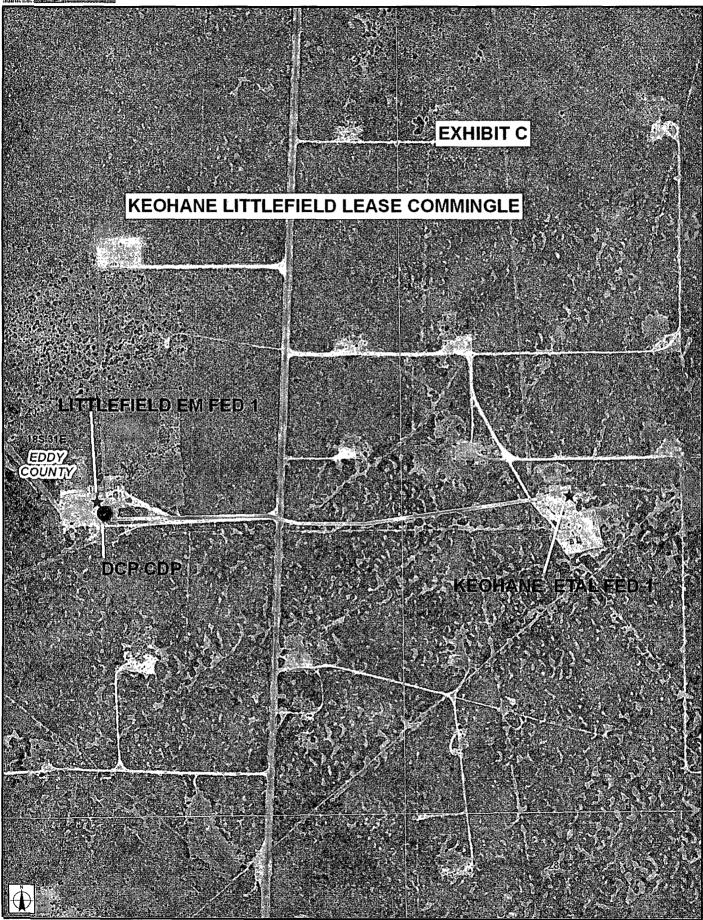
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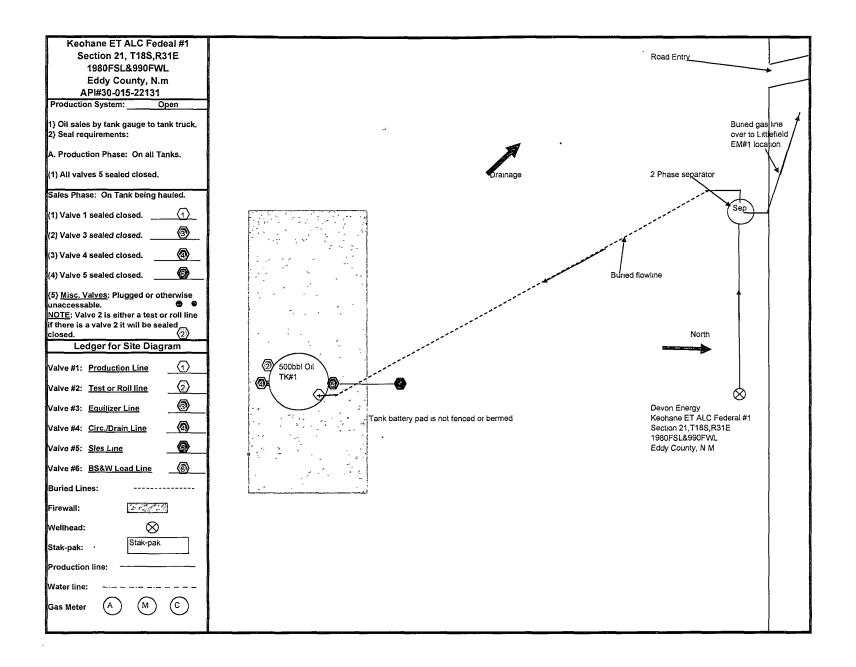
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. Article Addressed to: 	A Signature A Agent Addressee B Received by (Printed Name) C. Date of Delivery 12-20 1. D. Is delivery address different from item 1? Yes If YES, enter delivery address below:
(Transfer from service label)	3. Service Type Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes 10004 6108 9342
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: Maurice M Pippin	A. Signature X A. Signature Addressee B. Received by (Printed Name) D. Is delivery address different flammen 1? If YES, enter delivery address below 6 6 6 No.
P.O. Box 12972 Odessa, TX 79768-2972	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
(Transfer from service label)	eturn 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.	A. Signature A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? If YES, enter delivery address below:
Phoebe Welch 20350 Marsh Creek Road Brentwood, CA 94513-4808	3. Service Type Certified Mail
2. Article Number 7008 1.	140 0004 6108 9328

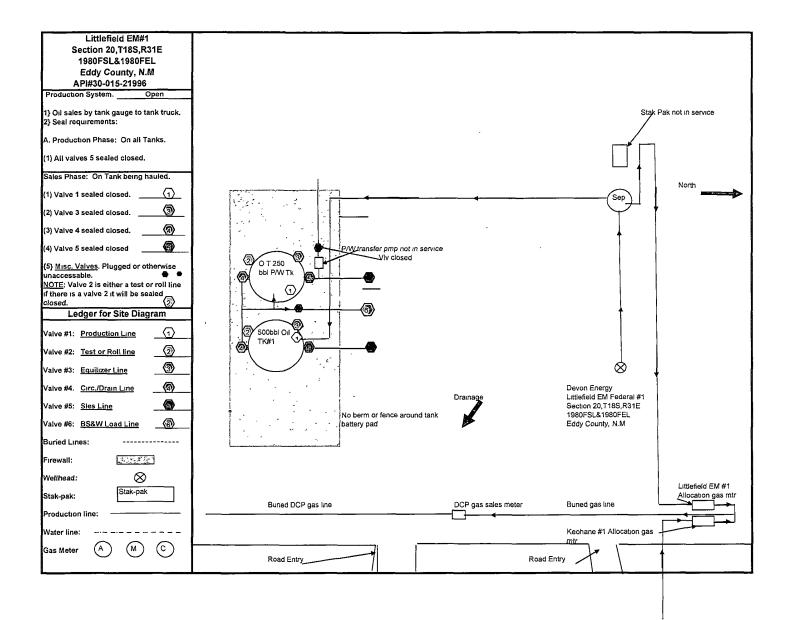


Devon GIS Intranet Mapping









OFF LEASE PRODUCTION - EDDY COUNTY											
	01/01/09	02/01/09	03/01/09	04/01/09	05/01/09	06/01/09	07/01/09	08/01/09	09/01/09		
Well Name	Sum Est Gas	Sum Est Gas	Sum Est Gas								
KEOHANE ET AL C FED COM #1	4,213.	4,536.	4,664.	3,278.	3,789.	4,366.	4,5 <u>4</u> 7.	4,552.	4,591		
LITTLEFIELD EM COM #1	2,007.	1,952.	2,146.	2,028.	2,101.	1,612.	1,482.	1,512.	1,730		

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Laboratory Services, Inc. 2609 West Marland

Hobbs, New Mexico 88240

Telephone: (505) 397-3713

FOR.

Devon Energy

P. O. Box 250

Artesiá, New Mexico 88211-0250

SAMPLE:

Sta. #677-33-003

IDENTIFICATION Littlefield EM

COMPANY:

Devon Energy

LEASE: PLANT:

SAMPLE DATA. DATE SAMPLED: ANALYSIS DATE: PRESSURE - PSIA

SAMPLE TEMP. °F

ATMOS, TEMP. °F

9/18/08 10:40 am 9/19/08

29 82

GAS (XX)

LIQUID ()

SAMPLED BY:

Jared Pittman/AFM

ANALYSIS BY:

Vickie Sullivan

REMARKS:

H2S = 0

COMPONENT ANALYSIS

COMPONENT		MOL PERCENT	GPM
Hydrogen Sulfide Nitrogen Carbon Dioxide Methane Ethane Propane	(H2S) (N2) (CO2) (C1) (C2) (C3)	0.000 0.459 0.527 86.345 7.635 3.014	2.037 0.829
I-Butane N-Butane I-Pentane N-Pentane Hexane Plus	(IC4) (NC4) (IC5) (NC5) (C6+)	0.327 0.768 0.182 0.210 0.533	0.107 0.242 0.066 0.076 0.231
		100.000	3,588

BTU/CU.FT. - DRY 1160 AT 14.650 DRY 1156 AT 14.650 WET 1136 1162 AT 14.73 DRY AT 14.73 WET 1142

SPECIFIC GRAVITY -CALCULATED

MEASURED

0.664

MOLECULAR WT. 19.2475



Laboratory Services, Inc.

2609 West Marland Hobbs, New Mexico 88240

Telephone: (575) 397-3713



FOR:

Devon Energy

P.O. Box 250

Artesia, New Mexico 88211-0250

SAMPLE:

Sta. #67733002

IDENTIFICATION Koehane C Fed. #1

COMPANY:

Devon Energy

LEASE: PLANT:

SAMPLE DATA: DATE SAMPLED: 12/31/08 10:45 am ANALYSIS DATE:

1/7/09

41.2

GAS (XX) SAMPLED BY: LIQUID ()

PRESSURE - PSIG SAMPLE TEMP. °F

51.8

ANALYSIS BY:

David Powell/AFM Vicki McDaniel

ATMOS. TEMP. °F

REMARKS:

COMPONENT ANALYSIS

		MOL	
COMPONENT		PERCENT	GPM
Hydrogen Sulfide	(H2S)		
Nitrogen	(N2)	2.072	
Carbon Dioxide	(CO2)	0.225	
Methane	(C1)	80.067	
Ethane	(C2)	9.283	2.477
Propane	(C3)	4.585	1.260
I-Butane	(IC4)	0.669	0.218
N-Butane	(NC4)	1.398	. 0.440
l-Pentane	(IC5)	0.426	0.155
N-Pentane	(NC5)	0.384	0.139
Hexane Plus	(C6+)	0.891	0.387
		100.000	5.076
BTU/CU.FT DRY	/ 1 231	l	MOLECULAR WT. 20,9454
AT 14.650 DRY	1227	7	
AT 14.650 WET	1205	5	
AT 14.73 DRY	1233	3	
AT 14.73 WET	1212	2	•
SPECIFIC GRAVIT	V _	•	

SPECIFIC GRAVITY ~

CALCULATED **MEASURED**

0.721

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تستست		MO/YR OWNER SQ	PROPERT BURDEN	Y NAME NAME	DESCRIPTION	INFLATED INTEREST		PAY STAT	WP CRT	RT CD	LAST DATE CHANGED	LEASE INTEREST
	530810-001 AA	11/98 KEOHAN	VE ET AL	C FED COM	MASTER DOI 100%	: 11/01/98						
		46615	CONSOL	P A I INCORPORAT % PAUL D IVERSON 4437 NORTHWEST 3 OKLAHOMA CITY 73-1383274	N JR	.00019530	3-ORR	PA			1/12/05	.00019530
		47176	CONSOL	NORTEX CORPORATI 1415 LOUISIANA S HOUSTON 74-1400550		.05742180	1-WI	PA			1/12/05	.05742180
		49453	CONSOL	S J I JR 1990 TF PAMELA J BURKE S P O BOX 10508 MIDLAND 75-6408039		.00096540	3-ORR	PA			1/12/05	.00096540
		49454	CONSOL	W W I 1990 TRUST PAMELA J BURKE S P O BOX 10508 MIDLAND 75-6408040		.00152297	3-ORR	PA			7/25/06	.00152297
		49455	CONSOL	P I P 1990 TRUST PAMELA J BURKE S P O BOX 10508 MIDLAND 75-6408042	SUCCESSOR TTEE	.00152297	3-ORR	PA			7/25/06	.00152297
		50649 1	CONSOL	HIGGINS TRUST IN % WILLIAM P EDWA P O BOX 6905 THOMASVILLE 85-6009063		.00065250	3-ORR	PA			7/25/06	.00065250
		53612	CONSOL	MINERALS MANAGEME ROYALTY MANAGEME PO BOX 5810 DENVER 84-0848646		.12500000	2-ROY	GF			7/25/06	.12500000
		55297	CONSOL	ROJO INC P O BOX 1120 ROSWELL 85-0172015	NM 88201-	.00130690	3-ORR	PA			7/25/06	.00130690
		55298	CONSOL	GAREL RAY& MYRTL REV TRUST, MYRTL &SANDRA WESTALL 704 BULLOCK ARTESIA 585-03-2025	E MYRA WESTALL	.00021000	3-ORR	PA			7/25/06	.00021000

30												10,13,03
PROPERTY DECK	MO/YR OWNER SQ		Y NAME NAME	DES	CRIPTION	INFLATED INTEREST	TYPE	PAY STAT	EX CL		LAST DATE CHANGED	LEASE INTEREST
530807-001 AA	11/98 LITTLE	FIELD E	M COM 1	MAS	TER DECK		CMH					
	53612	CONSOL	MINERALS MANAGEME ROYALTY MANAGEME PO BOX 5810 DENVER 84-0848646	NT P		.12500000	2-ROY	GF			7/25/06	.12500000
	55297	CONSOL	ROJO INC P O BOX 1120 ROSWELL 85-0172015	NM	88201-	.00174250	3-ORR	PA			7/25/06	.00174250
	55298	CONSOL	GAREL RAY& MYRTL REV TRUST, MYRTL &SANDRA WESTALL 704 BULLOCK ARTESIA 585-03-2025	E MY SHAN	RA WESTALL	.00028000	3-ORR	PA ·			7/25/06	.00028000
	55299	CONSOL	GEORGE WESTALL P O BOX 70 RUIDOSO DOWNS 525-03-1270	NM	88346-	`.00042000	3-ORR	PA			7/25/06	.00042000
	60211	CONSOL	MARGARETT H NAYL ZIA TRUST INC TT 4131 CAMINO COYO LAS CRUCES 85-6117969	eé te s		.00034750	3-ORR	PA			7/25/06	.00034750
	63754	CONSOL	VAN S WELCH II 2207 FAIRWAY DR DUNCAN 585-01-2222	OK		.00137500	1-WI	PA			7/25/06	.00137500
	63754	CONSOL	VAN S WELCH II 2207 FAIRWAY DR DUNCAN 585-01-2222	OK	73533-	.00013937	3-ORR	PA			7/25/06	.00013937
	178272	CONSOL	VAN P WELCH JR 2259-C VIA PUERT LAGUNA WOODS 572-44-2701		92653-	.00137500	1-WI	PA			7/25/06	.00137500
	178272	CONSOL	VAN P WELCH JR 2259-C VIA PUERT LAGUNA WOODS 572-44-2701		92653-	.00013937	3-ORR	PA			7/25/06	.00013937

Bureau of Land Management Carlsbad Field Office 620 East Greene Street Carlsbad, New Mexico 88220 575-234-5972

Off-Lease Measurement, Sales and Surface Commingling

Conditions of Approval

Approval of surface commingling and off-lease sales and/or measurement is subject to the following conditions of approval:

- 1. This agency shall be notified of any change in sales method or location of sales point.
- 2. This agency shall be notified of any spill or discharge as required by NTL-3A.
- This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
- 4. This approval is subject to like approval by the New Mexico Oil Conservation Division.
- 5. Additional wells and/or leases require additional commingling approvals.
- 6. This approval does not constitute right-of-way approval for any off-lease activities. Within 30 days, an application for right-of-way approval must be submitted to the Realty Section if not already done.
- 7. Approval for combining production from various sources is a privilege which is granted to lessees for the purpose of aiding conservation and extending the economic life of leases. Applicants should be cognizant that failure to operate in accordance with the provisions outlined in the Authorized Officer's conditions of approval and/or subsequent stipulations or modifications will subject such approval to revocation.
- 8. All above-ground structures not subject to safety requirements shall be painted by the holder to blend with the natural color of the landscape. The paint used shall be color which simulates "standard Environmental Colors" Shale Green, Munsell Soil Color No. 5Y 4/2.