

**devon**  
ENERGY CORPORATION

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April 25, 1997

Certified Mail No. P 619 404 381

FASKEN OIL & RANCH INTERESTS  
303 W. WALL AVE, SUITE 1900  
MIDLAND, TX 79701-5116

RE: Proposed Denton SWD #5 (formerly State "T" #1)  
Section 2-15S-37E  
Lea County, NM

Gentlemen:

We have enclosed a copy of our Application for Authorization to Inject for the above referenced proposed salt water disposal well since you operate wells within the area of review.

Please direct inquiries concerning this matter to Ernie Buttross, Jr., at (405) 552-4509.

Yours truly,

DEVON ENERGY CORP.

*Karen Byers*

Karen Byers  
Engineering Technician

Enclosures

**AAI on: Denton SWD #5**

<b>SENDER:</b> <ul style="list-style-type: none"><li>■ Complete items 1 and/or 2 for additional services.</li><li>■ Complete items 3, 4a, and 4b.</li><li>■ Print your name and address on the reverse of this form so that we can return this card to you.</li><li>■ Attach this form to the front of the mailpiece, or on the back if space does not permit.</li><li>■ Write "Return Receipt Requested" on the mailpiece below the article number.</li><li>■ The Return Receipt will show to whom the article was delivered and the date delivered.</li></ul>		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: FASKEN OIL & RANCH INTERESTS 303 W. WALL AVE., SUITE 1900 MIDLAND, TX 79701-5116		4a. Article Number <b>P 619 404 381</b>	
5. Received By: (Print Name)		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
6. Signature: (Addressee or Agent) <b>X D. Dawson</b>		7. Date of Delivery <b>4-28-97</b>	
8. Addressee's Address (Only if requested and fee is paid)			

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PS Form 3811, December 1994

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