

Oklahoma Corporation Commission  
Oil & Gas Conservation Division  
Post Office Box 52000  
Oklahoma City, Oklahoma 73152-2000  
Rule 165: 10-3-25

Form 1023

1. API No.: 35083241530000  
2. OTC Prod. Unit No.: 083-212092  
3. Date of Application: December 11, 2013

4. Application For (check one)

- ☒ A. Commingled Completion in the Wellbore (165:10-3-39)  
B. Commingled Completion at the Surface (165: 10-3-39)  
C. Multiple (Dual) Completion (165: 10-3-36)  
D. Downhole Multiple Choke Assembly (165: 10-3-37)

5. Operator Information

DEVON ENERGY PRODUCTION CO LP

OTC/OCC No. 20751

333 W SHERIDAN AVE DEC 34.428

OKLAHOMA CITY, OK 73102-5010

Phone 4052353611

Fax 4052287518

6. Lease Name/Well No. DIEHL 11-18N-2W 1WH

7. Location within Sec. (1/4 1/4 1/4 1/4) SE NE NE NE Sec. 14 Twp. 18N Rge. 2W County LOGAN

8. The Following Facts are Submitted

Name of common source of supply WOODFORD Top and bottom of pay section (perforations) 5943 - 10617  
Type of production (oil or gas) Oil Method of production (flowing or art. lift) ART LIFT  
Latest test data by zone (oil, gas, and water) O: 72 G:323 W: 1535 Wellhead or bottomhole pressure 38 PSI

Spacing Order

Order Number	Unit Size
616416	640

Increased Density

Order Number	Unit Size

Location Exception

Order Number	Unit Size
616941	

Name of common source of supply SYLVAN Top and bottom of pay section (perforations) 7918 - 8349  
Type of production (oil or gas) Oil Method of production (flowing or art. lift) ART LIFT  
Latest test data by zone (oil, gas, and water) combined with woodford Wellhead or bottomhole pressure 38 PSI

Spacing Order

Order Number	Unit Size
616416	640

Increased Density

Order Number	Unit Size

Location Exception

Order Number	Unit Size
616941	

If 4A, 4B, or 4D above, and size of units under 8G above are not the same, have the different allocations been addressed? Yes X No

9. List all the operators with mailing addresses within 1/2 mile, producing from the above listed zones.

10. The operators listed above have been notified and furnished a copy of this application. If no, an affidavit of mailing must be filed no later than five (5) days after submission of this application. Yes X No

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**11. Classification of well (see OAC 165:10-13-2):** Oil

**12. Attach the Following:**

A. Correlation log section (porosity, resistivity, or gamma ray) with top and bottom of perforated intervals marked.		
B. Diagrammatic sketch of the proposed completion of the well.		
C. Plat showing the location of all wells within 1/2 mile producing from the zones listed above.		
D. If 4B, 4C, or 4D above, a Form 1024, Packer Setting Report, and a Form 1025 Packer Leakage Test.		
E. If 4A, 4B, or 4D above, and size of units under 8G above are not the same, have the different allocations been addressed?	Yes _____	No X _____

I herby certify that I am authorized to submit this application which was prepared by me or under my supervision. The facts and proposals made herein are true, correct, and complete to the best of my knowledge and belief.

CRISTY KENNEDYE

REGULATORY ANALYST

405/5524753

*Signature*

*Title*

*Phone (AC/NO)*

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