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

1. API No.: 35119240910000

2. OTC Prod. Unit No.: 119-212134

3. Date of Application: January 13, 2014

4. Application For (check one)

- \underline{X} 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 PRODU	JCTION CO LP							C	TC/OCC N	lo. 20751
333 W SHERIDAN AVE DI	EC 34.428									
OKLAHOMA CITY, OK 73	102-5010									
Phone	4052353611									
Fax	4052287518									
6. Lease Name/Well No.	KATZ 3-20N-3E	1MH								
7. Location within Sec. (1	1/4 1/4 1/4 1/4)	NW SW SW SW	Sec.	2	Twp.	20N	Rge.	3E	County	PAYNE

8. The Following Facts are Submitted

Name of common source of supply Type of production (oil or gas)	MISSISSIPPIAN Oil	IPPIAN Top and bottom of pay section (perforations) Method of production (flowing or art. lift)		4718 - 9265 ART. LIFT
Latest test data by zone (oil, gas, and water)	O: 2 G:14 W:2466	Wellhead or bottomhole	pressure	55 PSI
Spacing Order	Increased Density		Location	n Exception

Order Number	Unit Size	Order Number	Unit Size	Order Number	Unit Size
605007	640			610978	

Name of common source	e of supply	WOODFORD	DODFORD Top and bottom of pay sect		4882 - 5048	
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: 2 G:14 W:2466	Wellhead or bottomhole pressure		55 PSI	
Spacing Order		Increased Density		Location	Exception	
Order Number	Unit Size	Order Number	Order Number Unit Size Or		Unit Size	
605007	640			610978		

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	Yes	X No	
filed no later than five (5) days after submission of this application.			

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

12. Attach the Folowing:

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.			l
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	Х	No
			I

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	cristy.kennedye@dvn.com	REG. COMPL.	405/5524753
Sig	nature	Title	Phone (AC/NO)

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