Oklahoma Corporation Commission Oil & Gas Conservation Division Post Office Box 52000 Oklahoma City, Oklahoma 73152-2000

Oklahoma City, Oklahoma 73 Rule 165: 10-3-25

1. API No.: 35083241100000
2. OTC Prod. Unit No.: 083-212942
3. Date of Application: April 01, 2014

4. Application For (check one)

- 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 PRODUCTION CO LP OTC/OCC No. 20751 333 W SHERIDAN AVE DEC 34.428 OKLAHOMA CITY, OK 73102-5010 Phone 4052353611 Fax 4052287518 Phone 4052353611 Fax 4052287518 6. Lease Name/Well No. BULLING 17-19N-2W 1WMH 7. Location within Sec. (1/4 1/4 1/4 1/4) NE SW SW SW 19N 2W County LOGAN Sec. 8 Rge. Twp.

8. The Following Facts are Submitted

ype of production (oil or	gas)	Oil	Method of production (f	Method of production (flowing or art. lift)				
_atest test data by zone (oil, gas, and water)	O:18-G:376- W:5020	460 PSI					
Spacing O	rder	Incre	eased Density	Location Exception				
Order Number	Unit Size	Order Num	ber Unit Size	Order Number	Unit Size			
06958	640			607521				

Spacing Order	Increase	ed Density	Location I	Exception
Latest test data by zone (oil, gas, and water)	same as Woodford	Wellhead or bottomhole	pressure	460 PSI
Type of production (oil or gas)	Oil	Method of production (f	lowing or art. lift)	Art. Lift
Name of common source of supply	MISSISSIPPIAN	Top and bottom of pay	section (perforations)	9883 - 10115

Spacing (Order	Increased Dens	sity	Location Exception			
Order Number	Unit Size	Order Number	Unit Size	Order Number	Unit Size		
606958	640			607521			

If 4A, 4B, or 4D above, and size of units under 8G above are not the same, have the different allocations been addressed?

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

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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 Folowin		
	u	1.

Α.	Cor	relati	on	log sectio	n (p	orosity.	, resistivity	/, O	r gamma ray) wit	:h top	and	bottom of	per	forated	l interva	ls marl	ked.
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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 X No

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.

 Brenda Baker
 brenda.baker@dvn.com
 Regulatory Specialist
 405.228.7598

 Signature
 Title
 Phone (AC/NO)

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