

CASE NO. 23799

**APPLICATION OF MEWBOURNE OIL COMPANY
TO AMEND ORDER NO. R-22796 FOR COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO**

EXHIBIT LIST

PART I

1. Landman's Affidavit
 - 1-A: Order No. R-22796
 - 1-B: Land Plat and C-102s
 - 1-C: Tract Maps and Ownership Lists
 - 1-D: Summary of Contacts and Proposal Letter
 - 1-E: AFE's

PART II

2. Application and Proposed Notice
3. Affidavit of Mailing
 - 1-A: Notice Letter
4. Certified Notice Spreadsheet
5. Affidavit of Publication

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

**APPLICATION OF MEWBOURNE OIL COMPANY
TO AMEND ORDER NO. R-22796 FOR COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.**

Case No.

23799**APPLICATION**

Mewbourne Oil Company applies for an order amending Order No. R-22796 to pool additional uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S $\frac{1}{2}$ of Section 21 and the S $\frac{1}{2}$ of Section 20, Township 20 South, Range 27 East, N.M.P.M., Eddy County, New Mexico, and approval of a non-standard spacing and proration unit, and in support thereof, states:

1. Applicant is an interest owner in the S $\frac{1}{2}$ of Section 21 and the S $\frac{1}{2}$ of Section 20 (containing 640 acres), and has the right to drill a well or wells thereon.
2. Applicant proposes to drill (a) the Wine Mixer 21/20 B3IL Fed. Com. Well No. 1H, with a first take point in the NE $\frac{1}{4}$ SE $\frac{1}{4}$ of Section 21 and a last take point in the NW $\frac{1}{4}$ SW $\frac{1}{4}$ of Section 20, and (b) the Wine Mixer 21/20 B3PM Fed. Com. Well No. 1H, with a first take point in the SE $\frac{1}{4}$ SE $\frac{1}{4}$ of Section 21 and a last take point in the SW $\frac{1}{4}$ SW $\frac{1}{4}$ of Section 20.

The wells will be dedicated to a non-standard unit comprised of the S $\frac{1}{2}$ of Section 21 and the S $\frac{1}{2}$ of Section 20.

3. Applicant has in good faith sought to obtain the voluntary joinder of all other mineral interest owners in the S $\frac{1}{2}$ of Section 21 and the S $\frac{1}{2}$ of Section 20 for the purposes set forth herein.

4. Although applicant attempted to obtain voluntary agreements from all mineral interest owners to participate in the drilling of the wells or to otherwise commit their interests to

EXHIBIT 2

the wells, certain interest owners have failed or refused to join in dedicating their interests. Therefore, applicant seeks an order pooling all uncommitted mineral interest owners in the Bone Spring formation underlying S $\frac{1}{2}$ of Section 21 and the S $\frac{1}{2}$ of Section 20, pursuant to NMSA 1978 §70-2-17.

5. Upon approval of the application, applicant requests that Order Nos. R-22296 and R-22297 be vacated.

6. The pooling of all mineral interest owners in the Bone Spring formation underlying the S $\frac{1}{2}$ of Section 21 and the S $\frac{1}{2}$ of Section 20, and approval of the non-standard spacing and proration unit, will prevent the drilling of unnecessary wells, prevent waste, and protect correlative rights.

WHEREFORE, applicant requests that, after notice and hearing, the Division enter its order:

- A. Pooling all mineral interest owners in the Bone Spring formation (Avalon; Bone Spring/Pool Code 96381) underlying the S $\frac{1}{2}$ of Section 21 and the S $\frac{1}{2}$ of Section 20;
- B. Approving the non-standard spacing and proration unit;
- C. Designating applicant as operator of the wells;
- D. Considering the cost of drilling, completing, testing, and equipping the wells, and allocating the cost among the wells' working interest owners;
- E. Approving actual operating charges and costs charged for supervision, together with a provision adjusting the rates pursuant to the COPAS accounting procedure; and
- F. Setting a 200% charge for the risk involved in drilling, completing, testing, and equipping the wells in the event a working interest owner elects not to participate in the wells.

Respectfully submitted,

James Bruce

James Bruce
Post Office Box 1056
Santa Fe, New Mexico 87504
(505) 982-2043

Attorney for Mewbourne Oil Company

Application of Mewbourne Oil Company to amend Order No. R-22796 for compulsory pooling, Eddy County, New Mexico. Mewbourne Oil Company seeks an order amending Order No. R-22796 to pool additional uncommitted mineral interest owners in the Bone Spring formation underlying a non-standard horizontal spacing unit comprised of the S/2 of Section 21 and the S/2 of Section 20, Township 20 South, Range 27 East, NMPM. The unit will be dedicated to (a) the Wine Mixer 21/20 B3IL Fed. Com. Well No. 1H, with a first take point in the NE/4SE/4 of Section 21 and a last take point in the NW/4SW/4 of Section 20, and (b) the Wine Mixer 21/20 B3PM Fed. Com. Well No. 1H, with a first take point in the SE/4SE/4 of Section 21 and a last take point in the SW/4SW/4 of Section 20. Also to be considered will be the cost of drilling, completing, testing, and equipping the wells and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the wells, and a 200% charge for the risk involved in drilling, completing, testing, and equipping the wells. The unit is located approximately 7 miles southeast of Lakewood, New Mexico.

STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION

APPLICATION OF MEWBOURNE OIL COMPANY
TO AMEND ORDER FOR COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.

Case No. 23799

SELF-AFFIRMED STATEMENT OF NOTICE

COUNTY OF SANTA FE)
) ss.
STATE OF NEW MEXICO)

James Bruce deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Mewbourne Oil Company.
3. Mewbourne Oil Company has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the applications filed herein.
4. Notice of the applications was provided to the interest owners, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules.

I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 5 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date: 4/15/23



James Bruce

EXHIBIT

3

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbrue@aol.com

September 11, 2023

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company (Case No. 23799). In this case Mewbourne Oil Company seeks an order amending Order No. R-22796 to pool additional uncommitted mineral interest owners in the Bone Spring formation underlying a non-standard horizontal spacing unit comprised of the S/2 of Section 21 and the S/2 of Section 20, Township 20 South, Range 27 East, NMPM. The unit will be dedicated to the Wine Mixer 21/20 B3IL Fed. Com. Well No. 1H and the Wine Mixer 21/20 B3PM Fed. Com. Well No. 1H.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, October 5, 2023. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. You are not required to attend this hearing, but as an owner of an interest who may be affected by the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date. A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than five business days before the hearing date. This statement may be filed online with the Division at ocd.hearings@emnrd.nm.gov, and should include: The name of the party and his or her attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate time the party will need to present his or her case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Mewbourne Oil Company

EXHIBIT 3 : A

Iva B. Rascoe Pallerine 500 S. Sepulveda Blvd, Suite 101 Manhattan Beach, CA 90266-6945	
Harvey Y. Rascoe 1159 W. Ivesbrook St Lancaster, CA 93534-2212	

B.L. Young 1816 Calle De Suenos Las Cruces, New Mexico 88001-4305	
A. Susan Martin 2201 Baylor Ave. Roswell, New Mexico 88203-2429	
Barry J. Schwade 6309 Excelsior Blvd Apt 9 Minneapolis, MN 55416-2726	
W.H. Moorhead PO Box 1768 Gallup, New Mexico 87305	
Jeannie Traner 5305 Fairmont Circle Austin, Texas 78745-2755	
C.B. Glover 2242 Baywood Dr Biloxi, MS 39532-4102	
Robert Daniels 1606 S. Pennsylvania Ave. Roswell, New Mexico 88203-5432	

EXHIBIT

A

Bertha Daniels PO Box 5 San Ysidro, New Mexico 87053-0005	
Cye M. Smith 6 Autumn Ln Ewing, NJ 08638-2318	
Frances L. Willard 5695 Barberry Ct Frederick, MD 21703-7193	
Anna Mae Schiller 444 N. Crescent Heights Blvd., Apt N Los Angeles, California 90048-2206	
Helen Elizabeth Layer 1940 Glendale Judicial Los Angeles, CA 90041	
J.W. Dunlap, and his wife Maura K. Dunlap 165 S. Main St SPC 64 Red Bluff, CA 96080-3850	
Charles S. Watkins 5803 Abelia Rd Jacksonville, FL 32209-2482	
Charles Q. Clark 7831 Wagon Mound Ct NW Albuquerque, New Mexico 87120-2870	
Marjorie E. Bee PO Box 104 Panguitch, UT 84759-0104	
Meta Cordes 1127 Michigan Ave Napoleon, OH 43545-1127	

H.F. Proebstel 5133 Mink Street SW Pataskala, OH 43062-8861	
Margie M. McElleroy 641 Seitz Dr Salina, Kansas 67401-3773	
Emma J. Allen 2421 Barbee St Houston, Texas 77004-5235	
Oscar Smith 2047 SE Monroe St Stuart, Florida 34997-5886	

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		<input type="checkbox"/> Addressee
B. Received by (Printed Name) <u>C.B. Glover</u> C. Date of Delivery <u>9-17-22</u>		
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If YES, enter delivery address below:		
<u>C.B. Glover</u> <u>2242 Baywood Dr</u> <u>Biloxi, MS 39532-4102</u>		

3. Service Type	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/>

1 Article **7020 0090 0000 0862 569** 1 Delivery

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B. Received by (Printed Name) <u>Charles S. Watkins</u> C. Date of Delivery <u>9-15-22</u>		
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If YES, enter delivery address below:		
<u>Charles S. Watkins</u> <u>5803 Abelia Rd</u> <u>Jacksonville, FL 32209-2482</u>		

3. Service Type	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
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B. Received by (Printed Name) <u>Charles S. Watkins</u> C. Date of Delivery <u>9-15-22</u>		
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
If YES, enter delivery address below:		
<u>Charles S. Watkins</u> <u>5803 Abelia Rd</u> <u>Jacksonville, FL 32209-2482</u>		

3. Service Type	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
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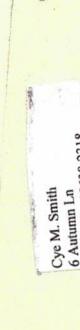
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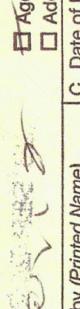
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<p>1. Article Addressed to:</p> <div style="display: flex; align-items: center;"> <div style="flex: 1;">   Cye M. Smith 6 Autumn Ln Ewing, NJ 08638-2318 </div> <div style="flex: 1; margin-left: 10px;"> <p>RECEIVED MAIL BRANCH CITY OF NEW YORK 2023</p> <p>CDP 23 2023</p> </div> </div>		
<p>2. Article Number (<i>Transfer from service label</i>)</p> <p>7015 1520 0000 6842 1073 (over \$500)</p> <p>MX Domestic Return Receipt</p>		
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		

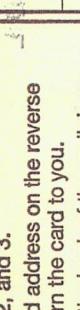
COMPLETE THIS SECTION ON DELIVERY

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B. Received by (Printed Name)			

D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below:	<input type="checkbox"/> No
<div style="text-align: center;">  CDP 23 2023 </div>	
<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Adult Signature Restricted Delivery (S) <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Restricted Delivery</p>	
<p>2. Article Number (<i>Transfer from service label</i>)</p> <p>7015 1520 0000 6842 1073 (over \$500)</p> <p>MX Domestic Return Receipt</p>	

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D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below:	<input type="checkbox"/> No
<div style="text-align: center;">  CDP 23 2023 </div>	
<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Restricted Delivery</p>	
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Manhattan Beach, CA 90266-6945

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Total Postage and Fees \$

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6309 Excelsior Blvd Apt 9
Minneapolis, MN 55416-2726

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Pataskala, OH 43062-8861

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2421 Barbee St
Houston, Texas 77004-5235

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<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To Charles Q. Clark 7831 Wagon Mound Ct NW Street and Apt. No., Albuquerque, New Mexico 87120-2870	
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<input type="checkbox"/> Return Receipt (electronic) \$ _____	
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<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To J.W. Dunlap, and his wife Maura K. Dunlap 165 S. Main St SPC 64 Street and Apt. No., or PO Red Bluff, CA 96080-3850	
City, State, ZIP+4®	

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Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To Anna Mae Schiller 444 N. Crescent Heights Blvd., Apt N Los Angeles, California 90048-2206	
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<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To B.L. Young 1816 Calle De Suenos Las Cruces, New Mexico 88001-4305 Street and Apt. No., or PO	
City, State, ZIP+4®	

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James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504



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ET25 2980 0000 0600 0202																									
2																									
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 10%;">Certified Mail Fee</td> <td>\$ 0.00</td> </tr> <tr> <td colspan="2">Extra Services & Fees (check box add fee as appropriate)</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (Hardcopy)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (Electronic)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$ _____</td> </tr> <tr> <td colspan="2">Postage</td> </tr> <tr> <td colspan="2">\$ 0.00</td> </tr> <tr> <td colspan="2">Total Postage and Fees</td> </tr> <tr> <td colspan="2">\$ 0.00</td> </tr> <tr> <td colspan="2"> Sent To Harvey Y. Rascoe 1159 W. Ivesbrook St Lancaster, CA 93534-2212 Street and Apt. No., _____ City, State, Zip+4 ® </td> </tr> </table>		Certified Mail Fee	\$ 0.00	Extra Services & Fees (check box add fee as appropriate)		<input type="checkbox"/> Return Receipt (Hardcopy)	\$ _____	<input type="checkbox"/> Return Receipt (Electronic)	\$ _____	<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____	<input type="checkbox"/> Adult Signature Required	\$ _____	<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____	Postage		\$ 0.00		Total Postage and Fees		\$ 0.00		Sent To Harvey Y. Rascoe 1159 W. Ivesbrook St Lancaster, CA 93534-2212 Street and Apt. No., _____ City, State, Zip+4 ®	
Certified Mail Fee	\$ 0.00																								
Extra Services & Fees (check box add fee as appropriate)																									
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<input type="checkbox"/> Return Receipt (Electronic)	\$ _____																								
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Postage																									
\$ 0.00																									
Total Postage and Fees																									
\$ 0.00																									
Sent To Harvey Y. Rascoe 1159 W. Ivesbrook St Lancaster, CA 93534-2212 Street and Apt. No., _____ City, State, Zip+4 ®																									
See Reverse for Instructions																									



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

CERTIFIED MAIL



7020 0090 0000 0862 5706

James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504

9/4
LN

A. Susan Martin
2201 Baylor Ave.
Roswell, New Mexico 88203-2429

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\$8.77

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9075 2980 0000 0600 0202

Certified Mail Fee	\$	2980
Extra Services & Fees (check box, add fee as appropriate)	\$	0000
<input type="checkbox"/> Return Receipt (hardcopy)	\$	0000
<input type="checkbox"/> Return Receipt (electronic)	\$	0000
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	0000
<input type="checkbox"/> Adult Signature Required	\$	0000
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	0000
Postage	\$	0600
Total Postage and Fees	\$	0202

A. Susan Martin
2201 Baylor Ave.
Roswell, New Mexico 88203-2429
Street and Apt. No., or P.O. Box
City, State, Zip+4®

PS Form 3800, April 2015 PSN 7550-02-000-9047 See Reverse for Instructions

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7020 0090 0000 0862 567b

James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504

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Certified Mail Fee

\$	Extra Services & Fees (check box and fee as appropriate)	\$
<input type="checkbox"/>	Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/>	Return Receipt (electronic)	\$ _____
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/>	Adult Signature Required	\$ _____
<input type="checkbox"/>	Adult Signature Restricted Delivery	\$ _____
Postage		\$ _____

Total Postage and Fees

\$ 2795 2980 0000 0600 0202

\$ Sent To

Jeannie Traner
5305 Fairmont Circle
Austin, Texas 78745-2755
City, State, Zip+4

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504

7015 1520 0000 6842 1042

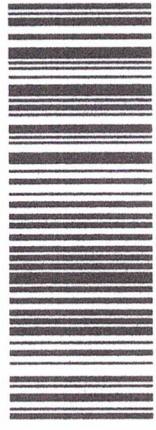
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT	
<i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com .	
OFFICIAL USE	
Certified Mail Fee	\$ 2.50
\$ Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (handcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	\$ 2.50
Total Postage and Fees	
\$ 5.00	
Sent To	
Helen Elizabeth Layer 1940 Glendale Judicial Los Angeles, CA 90041	
Street and Apt. No., or P.O. Box	
City, State, ZIP+4®	

PS Form 3800, April 2015 PSN 7550-02-000-9047
See Reverse for Instructions

James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504

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7020 0090 0000 0862 5683

09/17
6917



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OFFICIAL USE	
Certified Mail Fee	
\$	
Extra Services & Fees (check box and fee as appropriate)	
<input type="checkbox"/> Return Recip. (Hardcopy)	\$ _____
<input type="checkbox"/> Return Recip. (Electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	
\$	
Total Postage and Fees	
\$	
Sent To	
W.H. Moorhead PO Box 1768	
Street and Apt. No., or P.O. Box, Gallup, New Mexico 87305	
City, State, ZIP+4	

5895	2980	0600	0202
09/17			
See Reverse for Instructions			



ANK

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Certified Mail Fee

\$	Extra Services & Fees (check box and fee as appropriate)	\$
<input type="checkbox"/>	Return Receipt (handcopy)	\$
<input type="checkbox"/>	Return Receipt (electronic)	\$
<input type="checkbox"/>	Certified Mail Restricted Delivery	\$
<input type="checkbox"/>	Adult Signature Required	\$
<input checked="" type="checkbox"/>	Adult Signature Restricted Delivery	\$
	Postage	\$

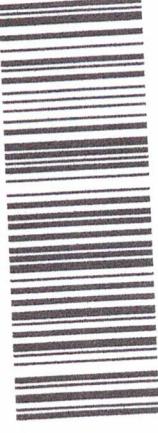
7607 2499 0000 0257 5707
Total Postage and Fees \$

Sent To Robert Daniels
Street and Apt No., Or
City, State, Zip-44

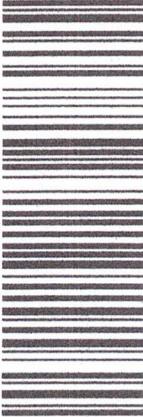
1606 S. Pennsylvania Ave.
Roswell, New Mexico 88203-5432
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See Reverse for Instructions

James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504

A-15

	 \$8.77⁰ US POSTAGE FIRST-CLASS 062513292292 87501 000138944 	A-NK AN
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE		
CERTIFIED MAIL®		
		
7015 1520 0000 6842 1004		
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT		
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<i>For delivery information, visit our website at www.usps.com.</i>		
OFFICIAL USE		
Certified Mail Fee		
<input type="checkbox"/> Extra Services & Fees (check box and fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____ Postmark Here		
Total Postage and Fees 7015 2520		
Sent To Marjorie E. Bee PO Box 104 Panguitch, UT 84759-0104		
Street and Apt. No., or P.O.		
City, State, ZIP+4®		
See Reverse for Instructions		



PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE	
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7015 1520 0000 6842 1066	
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com . OFFICIAL USE	
Certified Mail Fee \$ <input type="text"/> 9907 2489 0000 0257 5102	
Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (Hardcopy) \$ <input type="text"/> <input type="checkbox"/> Return Receipt (electronic) \$ <input type="text"/> <input type="checkbox"/> Certified Mail Restricted Delivery \$ <input type="text"/> <input type="checkbox"/> Adult Signature Required \$ <input type="text"/> <input type="checkbox"/> Adult Signature Restricted Delivery \$ <input type="text"/> Postmark Here 	
Postage \$ <input type="text"/> Total Postage and Fees \$ <input type="text"/> Sent To Frances L. Willard 5695 Barberry Ct Frederick, MD 21703-7193 Street and Apt. No., or PO City, State, Zip+4	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504



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Certified Mail Fee	
\$ 2489 0000 0257 5700	
Extra Services & Fees (check box and fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	
\$ Total Postage and Fees	
\$ 0257 5700	

Postmark
Here

Margie M. McElleroy
641 Seitz Dr
Salina, Kansas 67401-3773

944
929

PS Form 3800, April 2015 PSN 7530-02-000-9007 See Reverse for Instructions



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James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504



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\$ Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (Hardcopy) \$ _____
 Return Receipt (Electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____
Postage \$ _____

Total Postage and Fees \$ 7025 2489 0000 0025 0000

Sent To Meta Cordes
1127 Michigan Ave
Napoleon, OH 43545-1127
City, State, Zip+4 7025 2489 0000 0025 0000

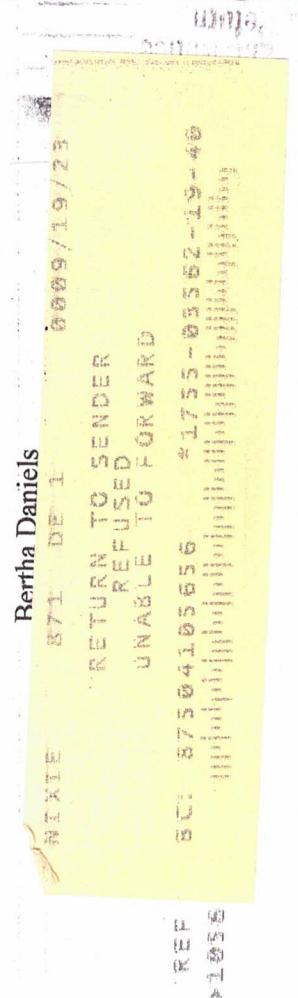
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

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OFFICIAL USE	
<small>Certified Mail Fee</small>	
Extra Services & Fees (check box and fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Total Postage and Fees	
\$	2025 2020 2015 2010 2005 2000 2000 2499 2000 2000 2000 2000 2000
Sent To Bertha Daniels PO Box 5 Street and Apt. No. off San Ysidro, New Mexico 87053-0005 City, State, ZIP+4	
<small>PS Form 3800, April 2015 GSN 7580-02-000-9047 See Reverse for Instructions</small>	

James Bruce
P.O. Box 1056
Santa Fe, New Mexico 87504



LN
09-21



CASE NO. 23799**STATUS OF CERTIFIED NOTICE**

<u>INTEREST OWNER</u>	<u>MAILING DATE</u>	<u>RECEIPT DATE</u>	<u>CARD RETURNED</u>
IVA B. RASCOE PALLERINE	9/11/23	NOT RETURNED	NO
HARVEY Y. RASCOE	9/11/23	RETURNED UNDELIVERED	NO
B.L. YOUNG	9/11/23	NOT RETURNED	NO
A. SUSAN MARTIN	9/11/23	RETURNED UNDELIVERED	NO
BARRY J. SCHWADE	9/11/23	NOT RETURNED	NO
W.H. MOORHEAD	9/11/23	RETURNED UNDELIVERED	NO
JEANNIE TRANER	9/11/23	RETURNED UNDELIVERED	NO
C.B. GLOVER	9/11/23	9/27/23	YES
ROBERT DANIELS	9/11/23	RETURNED UNDELIVERED	NO
BERTHA DANIELS	9/11/23	RETURNED UNDELIVERED	NO
CYE M. SMITH	9/11/23	9/23/23	YES
FRANCES L. WILLARD	9/11/23	RETURNED UNDELIVERED	NO
ANNA MAE SCHILLER	9/11/23	NOT RETURNED	NO
HELEN ELIZABETH LAYER	9/11/23	RETURNED UNDELIVERED	NO
J.W.DUNLAP AND MAURA K. DUNLAP	9/11/23	NOT RETURNED	NO
CHARLES S. WATKINS	9/11/23	9/15/23	YES
CHARLES Q. CLARK	9/11/23	NOT RETURNED	NO
MARJORIE E. BEE	9/11/23	RETURNED UNDELIVERED	NO
META CORDES	9/11/23	RETURNED UNDELIVERED	NO

4
EXHIBIT

H.F. PROEBSTEL	9/11/23	NOT RETURNED	NO
MAGIE M. MCCELLORY	9/11/23	RETURNED UNDELIVERED	NO
EMMA J. ALLEN	9/11/23	NOT RETURNED	NO
OSCAR SMITH	9/11/23	9/15/23	YES

Carlsbad Current Argus.

PART OF THE USA TODAY NETWORK

Affidavit of Publication

Ad # 0005828258

This is not an invoice**NOTICE**

JAMES BRUCE ATTORNEY AT LAW
POBOX 1056

SANTA FE, NM 87504

i, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof in editions dated as follows:

09/20/2023

Legal Clerk

Subscribed and sworn before me this September 20, 2023:

State of WI, County of Brown
NOTARY PUBLIC

My commission expires

KATHLEEN ALLEN
Notary Public
State of Wisconsin

Ad # 0005828258
PO #: 5828258
of Affidavits 1

This is not an invoice

EXHIBIT

5