PLC-378 [30-045-35432+18 wds] PPAG 1318931655

RECEIVED OCD

August 15, 2013

2013 AMB 16 P 3: 10 Transmitted Via UPS

Ms. Jami Bailey New Mexico Oil Conservation Division 1220 South St. Francis Drive Santa Fe, NM 87505 Mr. Dave Evans, District Manager Bureau of Land Management 6251 College Blvd., Suite A Farmington, NM 87402

Re:

Application for Escrito Trunk #1 Gathering System

Certified Mail Return Receipts for Notice to Interest Owners

San Juan County, New Mexico

Dear Ms. Bailey and Mr. Evans:

Encana Oil & Gas (USA) Inc. (Encana) submitted a request for Administrative Approval for a new gathering system, known as the Escrito Trunk #1 Gathering System (EGS), on June 28, 2013.

Encana provided notice via certified mail to the interest owners for the wells included in the application. A copy of the notice sent to the interest owners was included with the application. As promised in the application cover letter, please find attached copies of the return receipts received by Encana for notices sent to the interest owners.

Please feel free to contact me directly at 720-876-3533 with any questions or concerns.

Encana Oil & Gas (USA) Inc.

Katie Wegner

Regulatory Analyst

Enc.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X Agent Address B. Received by (Printed Nanh) C. Date of Deliv 7. Z D. Is delivery address different from item 1? Yes
Article Addressed to:	If YES, enter delivery address below:
Mazzola & Company 14624 Fenton Street Broomfield, CO 80020-6116	3. Service Type 3. Certified Mali
	Insured Mall C.C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7013 060	0 0001 7378 1437
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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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1050 17th St,. Ste 500 Denver, CO 80265-1050	3. Service Type **D Certified Mail
	☐ Insured Mall ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7013 050	0 0001 7378 1598
PS Form 3811, February 2004 Domestic Re	olum Receipt 102 595- 02-M-18
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Prudential-Bach Energy Corporation	If YES, enter delivery address below:
213 Washinton St Fl 8	
Newark, NJ 07102	
	3. Service Type Certified Mail Registered Return Receipt for Merchand Insured Mail
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013 060	ב482 ב267 בססס ס

D. Is delivery address different from item 17 If YES, enter delivery address below: Suzanne Anarde 34413 State Highway 167 Fowler, CO 81039 3. Service Type Certified Mail Resum Receipt Return Receipt Return Receipt Printed Return Receipt Return	Agent Address Agent Agen
1. Article Addressed to: D. is delivery address different from item 17 if YES, enter delivery address below: Suzanne Anarde 34413 State Highway 167 Fowler, CO 81039 3. Service Type Certified Mail Registered Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) PS Form 3811, February 2004 Domestic Return Receipt SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiesad or on the front if space permits. D. is delivery address different from item 17 if YES, enter delivery address below: Service Type Cartified Mail Response Mail Receipt insured Mail C.O.D. Service Type Insured Mail C.O.D. Domestic Return Receipt A. Signature X. Signature X. Signature X. B. Received by (Printed Name) C. D. B. Received by (Printed Name) C. D. B. Received by (Printed Name) C. D. B. Received by (Printed Name)	Or Merchand Yes O2595-6 Agent Address Date of Deliver
3. Service Type Certified Mail Express Mail Return Receipt for Insured Mail C.O.D.	O2595-0 Agent Address
Certified Mail Rejector Return Receipt for Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) 2. Article Number (Transfer from service label) PS Form 3811, February 2004 Domestic Return Receipt SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the maliple and or on the front if space permits.	O2595-0 Agent Address
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1. Article Addressed to: Estate of Billie Robinson c/o Gene Grubitz	M Vaa
PO Box 1245 Salem, VA 24153-1245	□ No
☐ insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee)	☐ Yes
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D. Is delivery address different from Item 1? If YES, enter delivery address below:	☐ Yes
Questar URC Company 350 N Saint Paul St. Dallas, TX 75201	
3. Service Type Certified Mail Express Mail Registered Return Receipt fo	or Me rchand
4. Restricted Delivery? (Extra Fee)	☐ Yes

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Albuquerque, NM 87199						
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Article Addressed to:	D. Is delivery address different from item 1? Ye If YES, enter delivery address below:
Michael A. Harris	
PO Box 605	
Aztec, NM 87410	3. Service Type Certified Mail Registered Insured Mail Corp.
	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7013 060	ע 1451 אינ 7378 בססם סו
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1, MILIOR AUDIESSES IO.	If YES, enter delivery address below:
Mr. Larry Roybal	0.0010
Oil, Gas & Minerals Division	11.11
New Mexico State Land Office	
PO Box 1148	3. Service Type
Santa Fe, NM 87504	Certified Mail
	☐ Insured Mall ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee)
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John W. Harris PO Box 749 Alto, NM 88312 2. Article Number (Transfer from service label) 7013 0600	3. Service Type Certified Mail
PO Box 749 Alto, NM 88312 2. Article Number (Transfer from service label) 7013 0600	☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandis ☐ C.O.D.
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•	rn Receipt 102595-02-M-15
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Article Addressed to:	D / g velvery address different from item 1?
Dugan Production Corp Attn: Kurt Fagrelius 709 E. Murray Drive	THE PO
Farmington, New Mexico 87499-0420	3. Service Type Certified Mail Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee)
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PS Form 3811, February 2004 Domestic Re	sturn Recelpt 102595-02-M-
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Article Addressed to: Article Addressed to:	YES ther delivery address below: No
Bureau of Land Management	2013
6251 College Blvd., Suite A	1010
Farmington, NM 87402	3. Service Type Certifled Mall Registered Receipt for Merchan
	☐ Insured Mail ☐ C.O.D.

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1. Article Addressed to: Pitco Production Company PO Box 4190	D. Is delivery address different from item 1? D Yes If YES, enter delivery address below: No
Scottsdale, AZ 85261	3. Service Type 3. Service Type 4. Certified Mail
2. Article Number (Transfer from service label) 7013 060	00 0001 7378 1475
PS Form 3811, February 2004 Domestic R	Return Receipt 10/2/14-15
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
Article Addressed to: Rebecca Sharpe	D. Is delivery address different from item ? Yes If YES, enter delivery address below: No
137 HC 67 Nogal, NM 88341	3. Service Type Certified Mali Express Mail Registered Return Receipt for Merchandi Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)
2. Article Number 7013 060	
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 SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature A. Signature A. Roceived by (Printed Name) D. Is delivery address different from item 1? Yes
Article Addressed to:	D. Is delivery address different from item 1? LJ Yes If YES, enter delivery address below: No
Robert E. Harris 616 HC 63	
Raton, NM 87740	3. Service Type Certified Mail
2. Astista Number	4. Restricted Delivery? (Extra Fee)
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Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
P&P Producing Inc. 303 W. Wall Street, Suite 101	
Midland, TX 79701	3. Service Type 3. Certified Mail
2. Article Number	4. Restricted Delivery? (Extra Fee) Yes
(Italisiat Italit sarvice label)	0 0001 7378 1468
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 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A. Signature X Athen Agent Addresse
 a so that we can return the card to you. Attach this card to the back of the mallpiece, or on the front if space permits. 	B. Received by (Printed Name) C. Date of Deliver
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Caerus Land and Royalty LLC 600 17 th Street, Suite 1600N Denver, CO 80202	3. Service Type Certified Mail
	4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 7013 060	0 0001 7378 1345
PS Form 3811, February 2004 Domestic R	etum Receipt 102595-02-M-154
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Article Addressed to:	If YES, enter delivery address below:
Koch Exploration Company, LLC 950 17th Street, Suite 1900	
Denver, CO 80202	3. Service Type Certifled Mail Registered Insured Mail C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7013	1600 0001 7378 1413