

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

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

Case No. 13285

AFFIDAVIT REGARDING NOTICE

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

James Bruce, being duly sworn upon his oath, deposes and states:

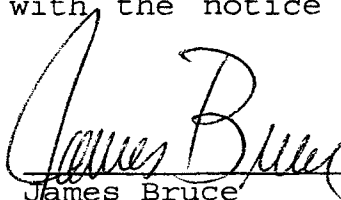
1. I am over the age of 18, and have personal knowledge of the matters set forth herein.

2. I am an attorney for Applicant.

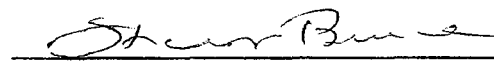
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the Application filed herein.

4. Notice of the Application was provided to the interest owners at their correct addresses by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.

5. Applicant has complied with the notice provisions of Division Rule 1207.

  
James Bruce

SUBSCRIBED AND SWORN TO before me this 21st day of June, 2004, by James Bruce.

  
Notary Public

My Commission Expires:

3/14/05

OIL CONSERVATION DIVISION

CASE NUMBER

EXHIBIT NUMBER

5

**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)

jamesbruc@aol.com

June 3, 2004

**CERTIFIED MAIL - RETURN RECEIPT REQUESTED**

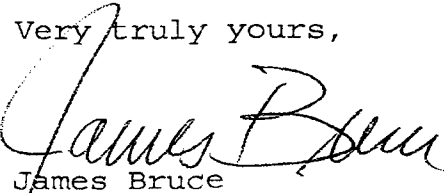
To: Persons on attached list

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding the W $\frac{1}{2}$  of Section 33, Township 16 South, Range 28 East, N.M.P.M., Eddy County, New Mexico. This application is scheduled to be heard at 8:15 a.m. on Thursday, June 24, 2004 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to appear at the hearing and present evidence. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are required to notify the Division, and the undersigned, by Friday, June 18, 2004, if you intend to enter an appearance and participate in the case.

Very truly yours,

  
James Bruce

Attorney for Mewbourne Oil Company



PARTIES BEING POOLED

Chisos, Ltd.  
670 Dona Ana Road S.W.  
Deming, New Mexico 88030

Devon Energy Production Company, L.P.  
P.O. Box 108838  
Oklahoma City, Oklahoma 73101-8838

Attention: Meg Muhlinghouse  
Land Department

Manix Energy, Ltd.  
P.O. Box 2818  
Midland, Texas 79702

June Johnson Cooper  
c/o Cooper, Kardaras & Kelleher  
141 East Walnut Street  
Pasadena, California 91103

June Johnson Cooper  
c/o Cooper, Kardaras & Kelleher  
660 South Figueroa  
Los Angeles, California 90017

ConocoPhillips Company  
P.O. Box 2197, WL3  
Houston, Texas 77252

Attention: Linda Hicks

EOG Resources, Inc.  
P.O. Box 2267  
Midland, Texas 79702

Yates Petroleum Corporation  
Yates Drilling Company  
Abo Petroleum Corporation  
MYCO Industries, Inc.  
105 South Fourth Street  
Artesia, New Mexico 88210

U.S. Postal Service<sup>TM</sup>  
CERTIFIED MAIL<sup>TM</sup> RECEIPT  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

|                                                |  |
|------------------------------------------------|--|
| Postage \$                                     |  |
| Certified Fee                                  |  |
| Return Receipt Fee (Endorsement Required)      |  |
| Restricted Delivery Fee (Endorsement Required) |  |
| Total Postage & Fees \$                        |  |

Sent To

Chisao, Ltd.  
670 Dona Ana Road S.W.  
Deming, New Mexico 88030

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

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.

1. Article Addressed to:

Chisao, Ltd.  
670 Dona Ana Road S.W.  
Deming, New Mexico 88030

2. Article Number (Transfer from service label)

7003 3110 0001 8303 7687

PS Form 3811, August 2001 Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Restricted Delivery (Printed Name) ☒ Date of Delivery

C. Restricted Delivery (Printed Name) ☒ Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☐ Return Receipt for Merchandise

☐ Insured Mail ☐ G.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

PS Form 3800, June 2002 See Reverse for Instructions

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.

1. Article Addressed to:

500 Resources, Inc.  
P.O. Box 2267  
Midland, Texas 79702

2. Article Number (Transfer from service label)

7004 0750 0003 8814 5747

PS Form 3811, August 2001 Domestic Return Receipt

U.S. Postal Service<sup>TM</sup>  
CERTIFIED MAIL<sup>TM</sup> RECEIPT  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

|                                                |  |
|------------------------------------------------|--|
| Postage \$                                     |  |
| Certified Fee                                  |  |
| Return Receipt Fee (Endorsement Required)      |  |
| Restricted Delivery Fee (Endorsement Required) |  |
| Total Postage & Fees \$                        |  |

Sent To

500 Resources, Inc.  
P.O. Box 2267  
Midland, Texas 79702

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
*(Domestic Mail Only, No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

|                                                   |  |
|---------------------------------------------------|--|
| Postage \$                                        |  |
| Certified Fee                                     |  |
| Return Receipt Fee<br>(Endorsement Required)      |  |
| Restricted Delivery Fee<br>(Endorsement Required) |  |
| <b>Total Postage &amp; Fees \$</b>                |  |

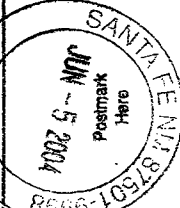
**Sent To**

June Johnson Cooper  
c/o Cooper Kardaras & Kelleher  
660 South Figueroa  
Los Angeles, California 90017

Street, Apt. No.,  
or PO Box No.  
City, State, ZIP+4<sup>®</sup>

PS Form 3811, August 2001 102595-02 M-1540

See Reverse for Instructions



**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.

1. Article Addressed to:

Conocophillips Company  
P.O. Box 2197, WL3  
Houston, Texas 77252

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

7004 0750 0003 8814 5754

Domestic Return Receipt

102595-02 M-1540

**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.

1. Article Addressed to:

June Johnson Cooper  
c/o Cooper Kardaras & Kelleher  
660 South Figueroa  
Los Angeles, California 90017

3. Service Type  
☐ Certified Mail  
☐ Registered  
☐ Insured Mail  
☐ Express Mail  
☐ Return Receipt for Merchandise  
☐ C.O.D.  
☐ Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

7004 0750 0003 8814 5730

Domestic Return Receipt

102595-02 M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*

B. Received by (Printed Name) *[Signature]*

C. Date of Delivery *[Signature]*

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
*(Domestic Mail Only, No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

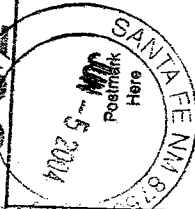
|                                                   |  |
|---------------------------------------------------|--|
| Postage \$                                        |  |
| Certified Fee                                     |  |
| Return Receipt Fee<br>(Endorsement Required)      |  |
| Restricted Delivery Fee<br>(Endorsement Required) |  |
| <b>Total Postage &amp; Fees \$</b>                |  |

Sent To

Conocophillips Company  
P.O. Box 2197, WL3  
Houston, Texas 77252

PS Form 3800, June 2002

See Reverse for Instructions



**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
*(Domestic Mail Only: No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|                                                |  |
|------------------------------------------------|--|
| Postage \$                                     |  |
| Certified Fee                                  |  |
| Return Receipt Fee (Endorsement Required)      |  |
| Restricted Delivery Fee (Endorsement Required) |  |
| Total Postage & Fees \$                        |  |

Sent To  
 Manix Energy, Ltd.  
 P.O. Box 2818  
 Midland, Texas 79702  
 City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

2. Article Number (Transfer from service label)

3. Service Type  
☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.  
☐ Restricted Delivery? (Extra Fee) ☐ Yes

4. Article Number (Transfer from service label)

PS Form 3811, August 2001

5. Article Addressed to:

6. Article Number (Transfer from service label)

PS Form 3800, June 2002 See Reverse for Instructions

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

2. Article Number (Transfer from service label)

3. Service Type  
☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.  
☐ Restricted Delivery? (Extra Fee) ☐ Yes

4. Article Number (Transfer from service label)

PS Form 3811, August 2001

5. Article Addressed to:

6. Article Number (Transfer from service label)

PS Form 3800, June 2002 See Reverse for Instructions

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *[Signature]*

B. Received by (Print Name) *[Name]*

C. Is delivery address different from item 1? ☐ Yes ☐ No

D. IF YES, enter delivery address below:

3. Service Type  
☐ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.  
☐ Restricted Delivery? (Extra Fee) ☐ Yes

4. Article Number (Transfer from service label)

PS Form 3811, August 2001

PS Form 3800, June 2002 See Reverse for Instructions

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
*(Domestic Mail Only: No Insurance Coverage Provided)*

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|                                                |  |
|------------------------------------------------|--|
| Postage \$                                     |  |
| Certified Fee                                  |  |
| Return Receipt Fee (Endorsement Required)      |  |
| Restricted Delivery Fee (Endorsement Required) |  |
| Total Postage & Fees \$                        |  |

Sent To  
 Yates Petroleum Corporation  
 Yates Drilling Company  
 Yates Petroleum Corporation  
 Yates Industries, Inc.  
 105 South Fourth Street  
 Artesia, New Mexico 88210

PS Form 3800, June 2002 See Reverse for Instructions

PS Form 3811, August 2001

PS Form 3800, June 2002

PS Form 3811, August 2001