

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF NADEL AND GUSSMAN
PERMIAN, L.L.C. FOR COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.

Case No. 13,365

AFFIDAVIT REGARDING NOTICE

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

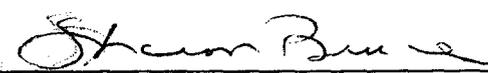
James Bruce, being duly sworn upon his oath, deposes and states:

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 3.6 day of November, 2004, by James Bruce.



 Notary Public

OIL CONSERVATION DIVISION
 CASE NUMBER
 EXHIBIT NUMBER 4

My Commission Expires:
3/15/05



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

October 14, 2004

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

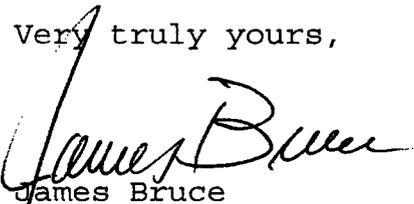
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Nadel and Gussman Permian, L.L.C., regarding the S½ of Section 33, Township 22 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, November 4, 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, October 29, 2004, if you intend to enter an appearance and participate in the case.

Very truly yours,


James Bruce

Attorney for Nadel and Gussman Permian, L.L.C.



EXHIBIT A

Garland H. Lang III
Unit Petroleum Company
Suite 101
407 North Big Spring
Midland, Texas 79701

Martha Rouse Schalk, Trustee
of the Schalk Family Trust
P.O. Box 25825
Albuquerque, New Mexico 87125

Eastland Exploration, Inc.
P.O. Box 5279
Austin, Texas 78763

Eastland Resources, Inc.
Spinnaker Oil & Gas, L.P.
Robert R. Donnelly Children's Trust
G. Arthur Donnelly III Children's Trust
Jan Donnelly O'Neill Children's Trust
c/o Robert R. Donnelly
P.O. Box 3488
Midland, Texas 79702

U.S. Postal ServiceSM
CERTIFIED MAILSM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL
USPS
 Postmark Here

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

Sent To
 Eastland Exploration, Inc.
 P.O. Box 5279
 Austin, Texas 78763
 City, State, ZIP+4

PS Form 3811, 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:

Eastland Resources, Inc.
 Spinnaker Oil & Gas Children's Trust
 Robert R. Donnelly III Children's Trust
 Jan Donnelly O'Neill Children's Trust
 c/o Robert R. Donnelly
 P.O. Box 3488
 Midland, Texas 79702

2. Article Number
 (Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 B. Received by (Printed Name) Addressee
 C. Date of Delivery
 Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
 4. Restricted Delivery? (Extra Fee) Yes No

7004 0750 0000 9053 4501

Domestic Return Receipt **NOT** 102595-02-M-1549

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:

Eastland Exploration, Inc.
 P.O. Box 5279
 Austin, Texas 78763

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 B. Received by (Printed Name) Addressee
 C. Date of Delivery
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
 4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number
 (Transfer from service label) 7004 0750 0000 9053 4518

PS Form 3811, February 2004 Domestic Return Receipt **NOT** 102595-02-M-1549

U.S. Postal ServiceSM
CERTIFIED MAILSM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE

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

Sent To
 Eastland Resources, Inc.
 Spinnaker Oil & Gas, L.P.
 Robert R. Donnelly Children's Trust
 Arthur Donnelly III Children's Trust
 or PO Box No. Jan Donnelly O'Neill Children's Trust
 c/o Robert R. Donnelly
 P.O. Box 3488
 Midland, Texas 79702

PS Form 3811, June 2002 See Reverse for Instructions

7004 0750 0000 9053 4502

Domestic Return Receipt **NOT** 102595-02-M-1549

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

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



Sent To
Martha Rouse Schalk, Trustee
of the Schalk Family Trust
P.O. Box 25825
Albuquerque, New Mexico 87125
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

7004 0750 0000 9053 4525

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:

Garland H. Lang III
Unit Petroleum Company
Suite 101
407 North Big Spring
Midland, Texas 79701

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7004 0750 0000 9053 4532

Domestic Return Receipt

NO P.A.

102505-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
B. Received by (Printed Name)
C. 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 C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

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:

Martha Rouse Schalk, Trustee
of the Schalk Family Trust
P.O. Box 25825
Albuquerque, New Mexico 87125

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

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7004 0750 0000 9053 4525

Domestic Return Receipt

NO P.A.

102505-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
B. Received by (Printed Name)
C. 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 C.O.D.
4. Restricted Delivery? (Extra Fee) Yes

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

7004 0750 0000 9053 4532

Domestic Return Receipt

NO P.A.

102505-02-M-1540

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

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



Sent To
Garland H. Lang III
Unit Petroleum Company
Suite 101
407 North Big Spring
Midland, Texas 79701
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions