CASE NO. 21365

APPLICATIONS OF COG MEWBOURNE OIL COMPANY FOR COMPULSORY POOLING, EDDY COUNTY, NEW MEXICO

MEWBOURNE OIL COMPANY'S EXHIBIT LIST

1. Application and Proposed Ad
2. Landman's Affidavit
3. Geologist's Affidavit
4. Notice Affidavit
5. Affidavit of Publication
6. Pooling Checklist

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

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

Case No. 21765

APPLICATION

Mewbourne Oil Company applies for an order pooling all mineral interests in the Wolfcamp formation underlying Lots 3, 4, S/2NW/4, and SW/4 (the W/2) of Section 2, Township 24 South, Range 28 East, N.M.P.M., Eddy County, New Mexico, and in support thereof, states:

1. Applicant is an interest owner in the W/2 of Section 2, and has the right to drill a well or wells thereon.

2. Applicant proposes to drill the following wells to a depth sufficient to test the Wolfcamp formation:

(a) The Skynyrd 2 W0CN Fee Well No. 1H, a horizontal well with a first take point in the NE/4NW/4 and a last take point in the SE/4SW/4 of Section 2;

(b) The Skynyrd 2 W0DM Fee Well No. 1H, a horizontal well with a first take point in the NW/4NW/4 and a last take point in the SW/4SW/4 of Section 2; and

(c) The Skynyrd 2 W0DM Fee Well No. 2H, a horizontal well with a first take point in the NW/4NW/4 and a last take point in the SW/4SW/4 of Section 2.

The producing interval of each well will be orthodox. Applicant seeks to dedicate the W/2 of Section 2 to the wells to form a standard 320.20 acre horizontal spacing unit in the Wolfcamp formation.

EXHIBIT 1

3. Applicant has in good faith sought to obtain the voluntary joinder of all other mineral interest owners in the W/2 of Section 2 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 the wells, certain interest owners have failed or refused to join in dedicating their interests. Therefore, applicant seeks an order pooling all mineral interest owners in the Wolfcamp formation underlying the W/2 of Section 2, pursuant to NMSA 1978 §§70-2-17.

5. The pooling of all mineral interests in the Wolfcamp formation underlying the W/2 of Section 2 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 interests in the Wolfcamp formation underlying the W/2 of Section 2;

B. Designating applicant as operator of the wells;

C. Considering the cost of drilling and completing the wells, and allocating the cost among the wells' working interest owners;

D. Approving actual operating charges and costs charged for supervision, together with a provision adjusting the rates pursuant to the COPAS accounting procedure; and

E. Setting a 200% charge for the risk involved in drilling and completing 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

PROPOSED ADVERTISEMENT

Case No. _____:

Application of Mewbourne Oil Company for compulsory pooling, Eddy County, New Mexico. Mewbourne Oil Company seeks an order pooling all mineral interests in the Wolfcamp formation underlying Lots 3, 4, S/2NW/4, and SW/4 (the W/2) of Section 2, Township 24 South, Range 28 East, NMPM. The unit will be dedicated to (i) the Skynyrd 2 W0CN Fee Well No. 1H, a horizontal well with a first take point in the NE/4NW/4 and a last take point in the SE/4SW/4 of Section 2; (ii) the Skynyrd 2 W0DM Fee Well No. 1H, a horizontal well with a first take point in the NW/4NW/4 and a last take point in the SW/4SW/4 of Section 2; and (iii) the Skynyrd 2 W0DM Fee Well No. 2H, a horizontal well with a first take point in the NW/4NW/4 and a last take point in the SW/4SW/4 of Section 2. Also to be considered will be the cost of drilling and completing 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 and completing the wells. The unit is located approximately 1-1/2 miles north-northeast of Malaga, New Mexico.

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

IN THE MATTER OF THE HEARING CALLED BY THE OIL CONSERVATION DIVISION FOR THE PURPOSE OF CONSIDERING:

APPLICATION OF MEWBOURNE OIL COMPANY FOR COMPULSORY POOLING, EDDY COUNTY, NEW MEXICO. **Case No. 21365**

VERIFIED STATEMENT OF MITCH ROBB

Mitch Robb, being duly sworn upon his oath, deposes and states:

1. I am a landman for Mewbourne Oil Company ("Mewbourne"), and have personal knowledge of the matters stated herein. I have been qualified by the Division as an expert petroleum landman.

2. Pursuant to NMAC 19.15.4.12.A(1), the following information is submitted in support of the compulsory pooling application filed herein:

(a) The purpose of this application is to force pool unleased mineral interest owners into the Wolfcamp horizontal spacing unit described below, and in wells to be drilled in the unit.

(b) No opposition is expected because the interest owners being pooled (i) are unlocatable, or (ii) have been contacted regarding the proposed well, but have failed or refused to voluntarily commit their interests to the wells.

(c) A plat outlining the unit being pooled is attached hereto as Attachment A. Mewbourne seeks an order pooling all mineral interests in the Wolfcamp formation underlying Lots 3, 4, S/2NW/4, and SW/4 (the W/2) of Section 2, Township 24 South, Range 28 East, NMPM. The unit will be dedicated to:

(i) the Skynyrd 2 W0CN Fee Well No. 1H, a horizontal well with a surface location in the NE/4NW/4 and a last take point in the SE/4SW/4 of Section 2;

(ii) the Skynyrd 2 W0DM Fee Well No. 1H, a horizontal well with a surface location in the NW/4NW/4 and a last take point in the SW/4SW/4 of Section 2; and

EXHIBIT 2

(iii) the Skynyrd 2 W0DM Fee Well No. 2H, a horizontal well with a surface location in the NW/4NW/4 and a last take point in the SW/4SW/4 of Section 2.

C-102s for the wells are also of Attachment A.

(d) The parties being pooled are set forth in Attachment B. The total working interest being pooled is less than 1.5%, and each interest owner has a very small interest. Title work on this prospect shows that these interests have passed through numerous unprobated estates. Thus, the interests are not marketable.

(e) In order to locate the interest owners Mewbourne examined the county records, performed internet searches, checked telephone records, made calls to family members, and searched Accurint and Whitepages.

(f) Attachment C is a sample copy of the proposal letter sent to the interest owners. Mewbourne has attempted to locate and contact the parties being pooled since early 2018.

(g) Mewbourne has made a good faith effort to obtain the voluntary joinder of the working interest owners in the proposed well, or to locate the owners.

(h) Mewbourne has the right to pool the overriding royalty owners in the well unit.

(i) Attachment D contains the Authorizations for Expenditure for the proposed wells. The estimated costs of the wells set forth therein are fair and reasonable, and comparable to the costs of other wells of similar depth and length drilled in this area of Eddy County.

(j) Mewbourne requests overhead and administrative rates of $8000/month for a drilling well and $800/month for a producing well. These rates are fair, and comparable to the rates charged by other operators for wells of this type in this portion of Eddy County. They are also the rates set forth in the Joint Operating Agreement for the well unit. Mewbourne requests that these rates be adjusted periodically as provided in the COPAS Accounting Procedure.

(k) Mewbourne requests that the maximum cost plus 200% risk charge be assessed against non-consenting working interest owners.

(l) Mewbourne requests that it be designated operator of the wells.

(m) The attachments to this affidavit were prepared by me, or compiled from company business records.

(n) The granting of this application is in the interests of conservation and the prevention of waste.

VERIFICATION

STATE OF TEXAS)
) ss.
COUNTY OF MIDLAND)

Mitch Robb, being duly sworn upon his oath, deposes and states that: He is a landman for Mewbourne Oil Company; he is authorized to make this verification on its behalf; he has read the foregoing motion, and knows the contents thereof; and the facts set forth in Section A above true and correct to the best of his knowledge, information, and belief.

Mitch Robb

SUBSCRIBED AND SWORN TO before me this 8th day of June, 2020 by Mitch Robb.

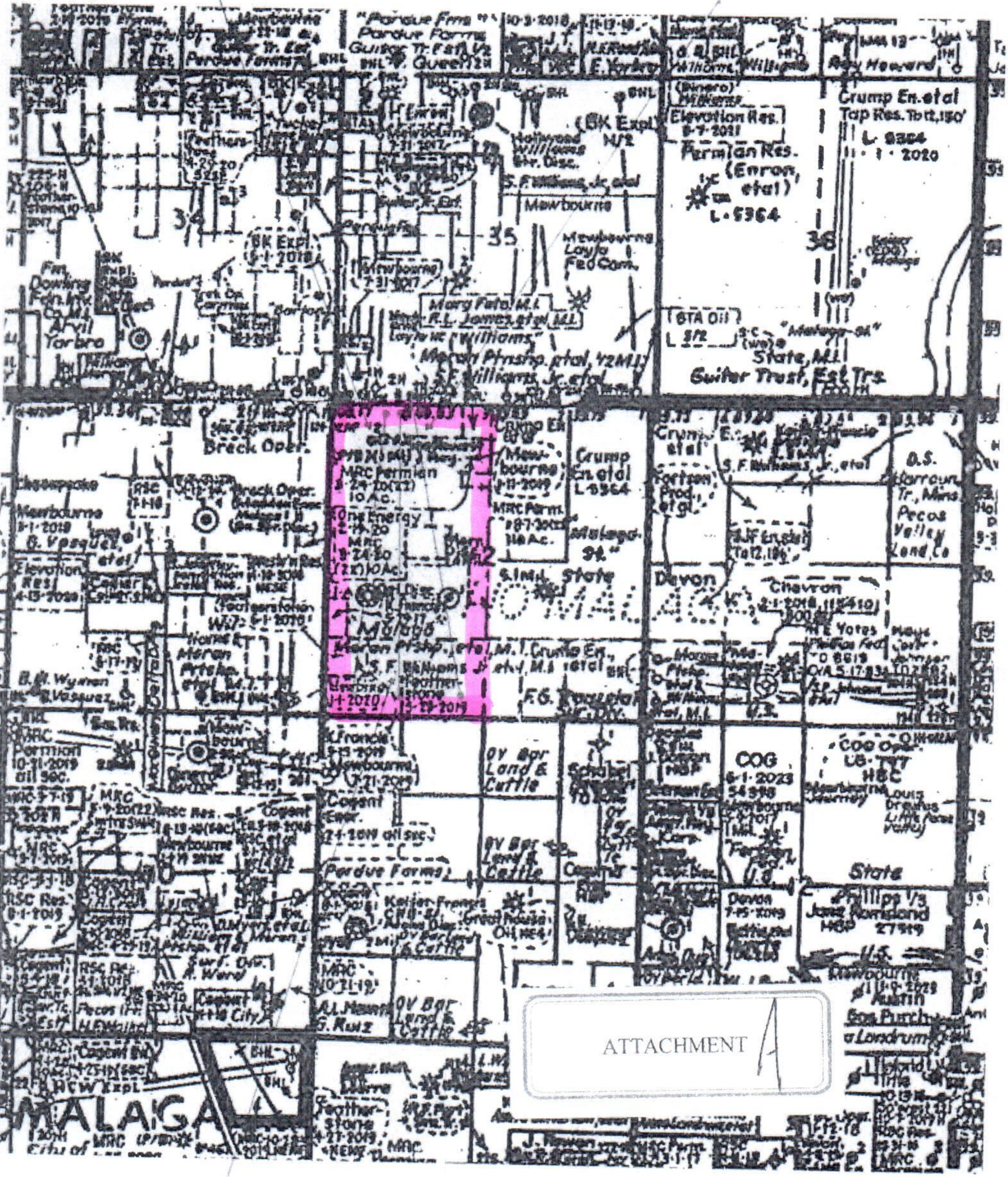
My Commission Expires: January 11, 2022

Notary Public

ALEJANDRA KIRKSEY
Notary ID #131406744
My Commission Expires
January 11, 2022

Skynyrd 2 WODM Fee #1H

Skynyrd 2 WOCN Fee #1H



ATTACHMENT A

Skynyrd 2 WODM Fee #2H

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

RECEIVED
MAY 17 2018
DISTRICT II-ARTESIA O.C.D.

Form C-102
Revised August 1, 2011
Submit one copy to appropriate District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number	2 Pool Code	3 Pool Name
30-015-44801	98220	PURPLE SAGE WOLFCAMP GAS

4 Property Code	5 Property Name	6 Well Number
321447	SKYNYRD 2 WOCN FEE	1H

7 OGRID NO.	8 Operator Name	9 Elevation
14744	MEWBOURNE OIL COMPANY	3016'

10 Surface Location

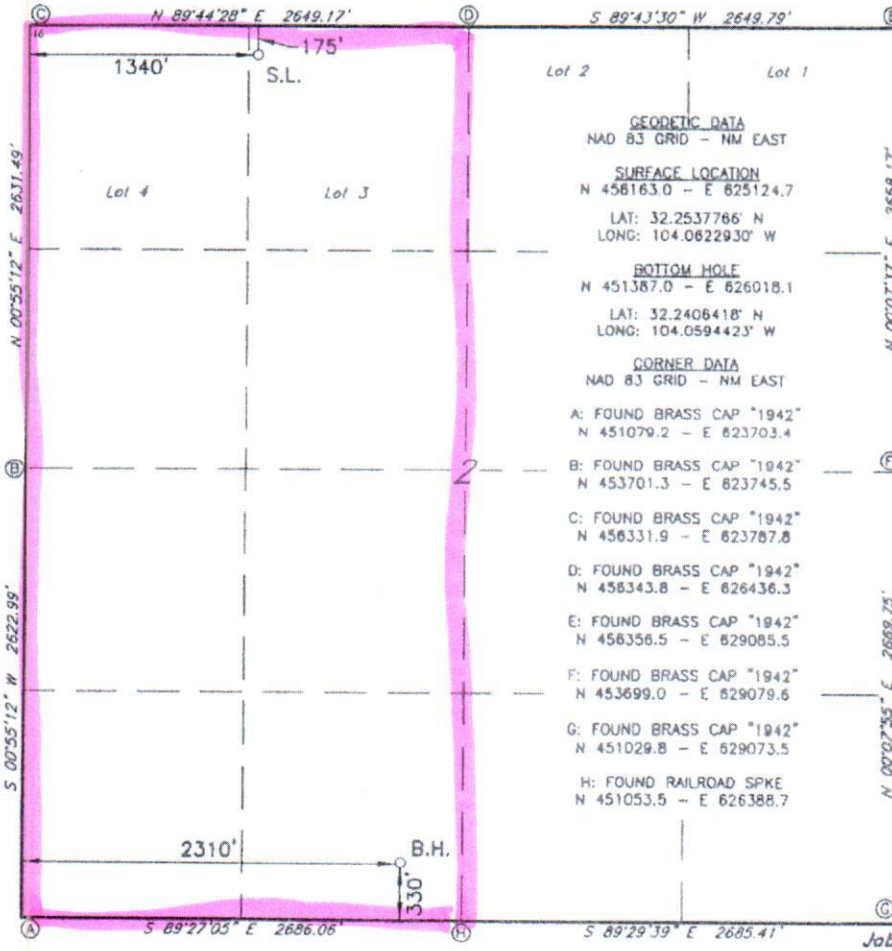
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet From the	East/West line	County
C	3	2	24S	28E		175	NORTH	1340	WEST	EDDY

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	2	24S	28E		330	SOUTH	2310	WEST	EDDY

12 Dedicated Acres	13 Joint or Infill	14 Consolidation Code	15 Order No.
320			

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.



17 OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature — Date: 5-15-18

BRADLEY BISHOP
Printed Name

BBISHOP@MEWBOURNE.COM
E-mail Address

18 SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

04-19-18
Date of Survey

Signature and Seal of Professional Surveyor

ROBERT M. HOWETT
NEW MEXICO
19680
PROFESSIONAL SURVEYOR

19680
Certificate Number

Job No.: LS1804485

RECEIVED

MAY 17 2018

DISTRICT II-ARTESIA O.C.D.

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
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District III
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District IV
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Phone: (505) 476-3460 Fax: (505) 476-3462

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1 API Number	2 Pool Code	3 Pool Name
30-015-44802	98220	PURPLE SAGE WOLFCAMP GAS

4 Property Code	5 Property Name	6 Well Number
321448	SKYNYRD 2 WODM FEE	1H

7 OGRID NO.	8 Operator Name	9 Elevation
14744	MEWBOURNE OIL COMPANY	3016'

10 Surface Location

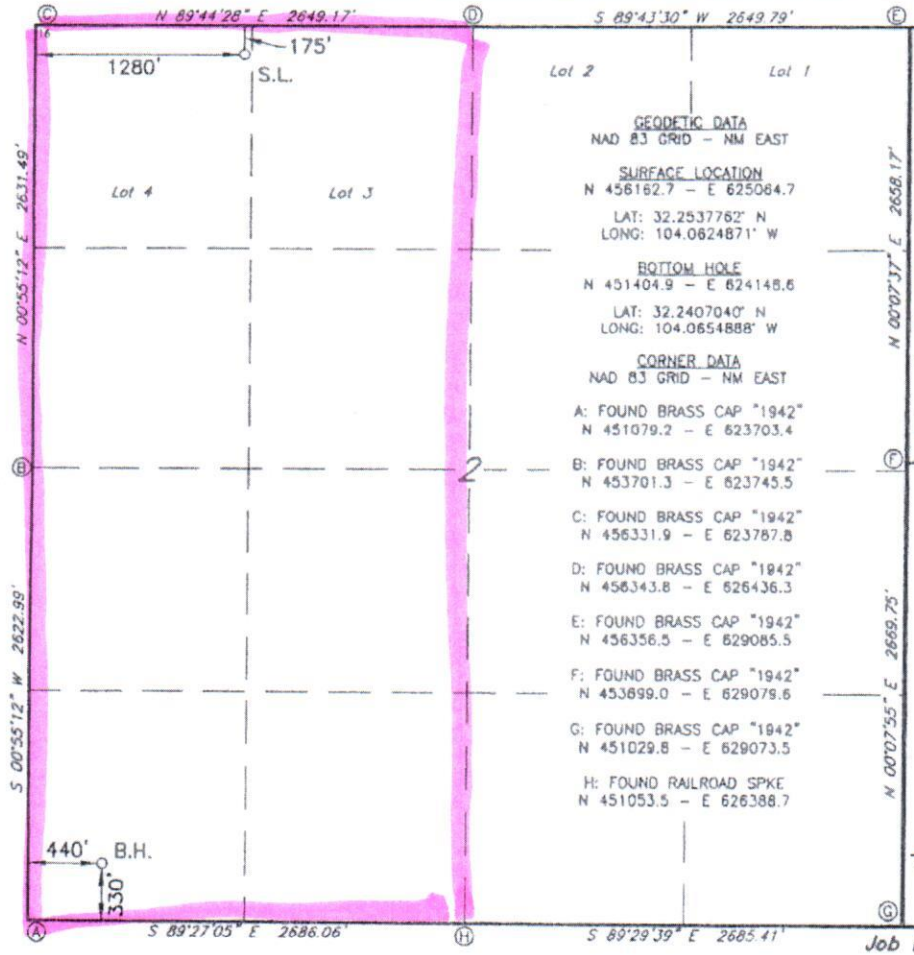
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet From the	East/West line	County
D 4	2	24S	28E		175	NORTH	1280	WEST	EDDY

11 Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	2	24S	28E		330	SOUTH	440	WEST	EDDY

12 Dedicated Acres	13 Joint or Infill	14 Consolidation Code	15 Order No.
320			

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.



GEODETIC DATA
NAD 83 GRID – NM EAST

SURFACE LOCATION
N 456162.7 – E 625064.7
LAT: 32.2537762° N
LONG: 104.0624871° W

BOTTOM HOLE
N 451404.9 – E 624148.6
LAT: 32.2407040° N
LONG: 104.0654888° W

CORNER DATA
NAD 83 GRID – NM EAST

A: FOUND BRASS CAP "1942"
N 451079.2 – E 623703.4

B: FOUND BRASS CAP "1942"
N 453701.3 – E 623745.5

C: FOUND BRASS CAP "1942"
N 456331.9 – E 623787.8

D: FOUND BRASS CAP "1942"
N 456343.8 – E 626436.3

E: FOUND BRASS CAP "1942"
N 456356.5 – E 629085.5

F: FOUND BRASS CAP "1942"
N 453699.0 – E 629079.6

G: FOUND BRASS CAP "1942"
N 451029.8 – E 629073.5

H: FOUND RAILROAD SPIKE
N 451053.5 – E 626388.7

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5-15-18
Signature Date

BRADLEY BISHOP
Printed Name

BBISHOP@MEWBOURNE.COM
E-mail Address

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04-19-18
Date of Survey

Signature and Seal of Professional Surveyor

ROBERT M. HOWETT
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PROFESSIONAL SURVEYOR

19680
Certificate Number

Job No.: LS1804486

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M	2	24S	28E		330	SOUTH	1320	WEST	EDDY

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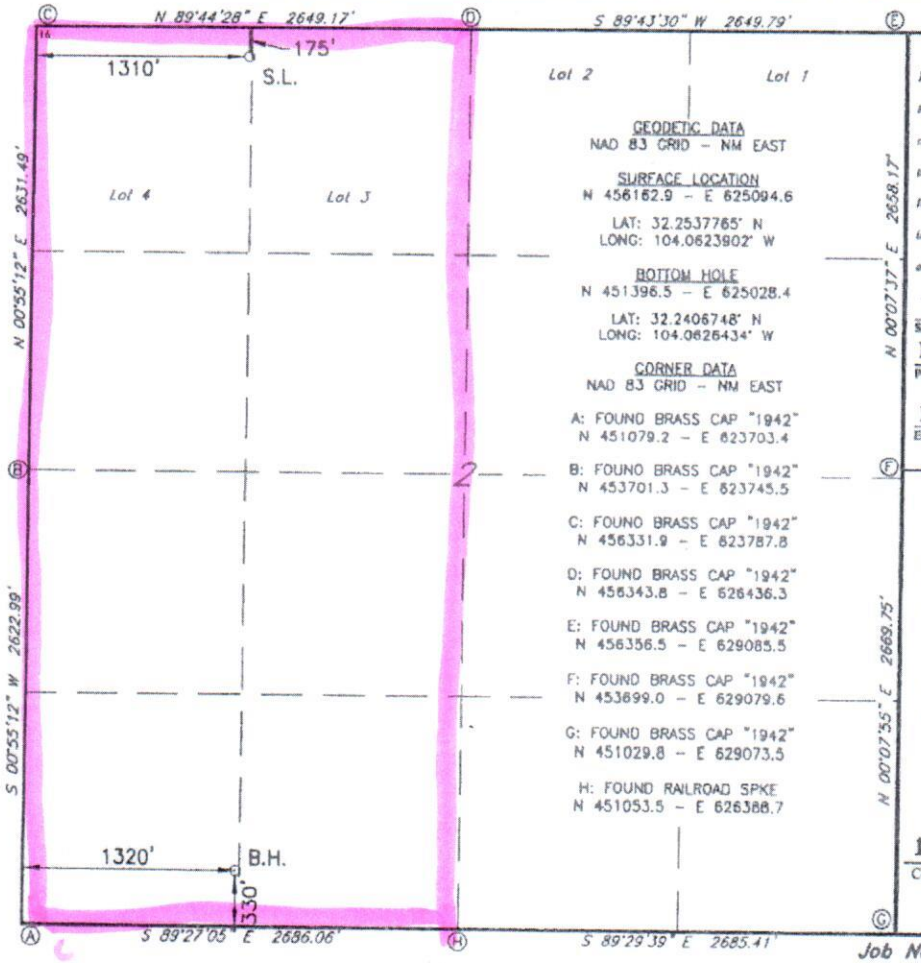

GEODETIC DATA
NAD 83 GRID – NM EAST

SURFACE LOCATION
N 456162.9 – E 625094.6
LAT: 32.2537765° N
LONG: 104.0623802° W

BOTTOM HOLE
N 451396.5 – E 625028.4
LAT: 32.2406748° N
LONG: 104.0626434° W

CORNER DATA
NAD 83 GRID – NM EAST

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N 451079.2 – E 623703.4

B: FOUND BRASS CAP "1942"
N 453701.3 – E 623745.5

C: FOUND BRASS CAP "1942"
N 456331.9 – E 623787.8

D: FOUND BRASS CAP "1942"
N 456343.8 – E 626436.3

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N 456356.5 – E 629085.5

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N 453699.0 – E 629079.6

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N 451029.8 – E 629073.5

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N 451053.5 – E 626388.7

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Signature — Date: 5-15-18

BRADLEY BISHOP
Printed Name

BBISHOP@MEWBOUNRE.COM
E-mail Address

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04-19-18
Date of Survey

Signature and Seal of Professional Surveyor

ROBERT M. HOWETT
NEW MEXICO
19680
PROFESSIONAL SURVEYOR

19680
Certificate Number

Job No.: LS1804487

Lenora Mae Swearingen
Koray Ali Cagliergin
Heirs and Devisees of Margaret E. Lundblade
Heirs and Devisees of Eugene D. Lundblade
Carol Jean Anderson
Janet S. Istas
Marilyn K. Powell
Heirs and Devisees of Lucy Jones Lundblade
Heirs and Devisees of Diane Lundblade Wilson
Raymond H. Jones
Betty Groat
Madeline
Cinda Rogers
Sharon Burgholzer
Mark Lundblade
Heirs and Devisees of W.H. Swearingen
Heirs and Devisees of Vernon Swearingen
Heirs and Devisees of Pauline Swearingen
Heirs and Devisees of Anna Pauline Swearingen
Heirs and Devisees of Ralph Swearingen
Ida Mary Abbey
Jesse Allen Redford
Heirs and Devisees of Louise M. Richardson
Heirs and Devisees of Evan Richardson
Heirs and Devisees of Ernest Redford
Heirs and Devisees of Edna Mae Watt
Heirs and Devisees of Fern M. Redford
Ernest L. Redford
Heirs and Devisees of Larry L. Redford
Majorie Moran
Vada Alridge
Nadine Rasco
Mary Patrick
Heirs and Devisees of Diane Peace
Sonja Lopez
Heirs and Devisees of Dewayne Peace
Donna Phillips
Barbara Brown
Sharlene Murphy
Ronald Peace
Elizabeth Njuyen
Heirs and Devisees of James Robert Watt
James David Watt
Sharon Ann Browne
Julie Ann Weeks

ATTACHMENT B

Heirs and Devisees of John A. Swearingen
Heirs and Devisees of Florence Swearingen
Heirs and Devisees of Marion L. Swearingen
Heirs and Devisees of Arthur D. Lundblade
Heirs and Devisees of Marvin L. Lundblade
Helen Anderson aka Helen Tholstrup

Mary Fager
Carol Diane Knisley
Cameron Christopher Watt
Lisa Nicole Watt
Yoshi Peterson
Michael Murphy
Madeline Murphy
Henry Murphy
Richard Robert Raymond
Byron Steiner
Bret James Steiner
Marshall Levan Browne
Sean Robert Browne
Matthew Franklin Browne
Heirs and Devisees of Myrtie I. Brown
Heirs and Devisees of Sidney M. Coryell
Heirs and Devisees of Elija Gleason Brown and Gleason Brown
Heirs and Devisees of Robert A. Brown
Lee J. Penden
Leonard J. Herrell
Rosetta F. Brown
Sidney M. Coryell, Jr.
Heirs and Devisees of James A. Collier III
Gregory Collier
Heirs and Devisees of Allen Swearingen
Heirs and Devisees of Ralph Swearingen

MEWBOURNE OIL COMPANY
FASKEN CENTER
500 WEST TEXAS, SUITE 1020
MIDLAND, TX 79701

TELEPHONE (432) 682-3715
FACSIMILE (432) 685-4170

May 3, 2018

Via Certified Mail

Anna Pauline Swearingen
512 Cedar Street
Concordia, KS 66901

Re: Skynyrd 2 W0CN Fee #1H
175' FNL & 1340' FWL (SL)
330' FSL & 2310' FWL (BHL)

Skynyrd 2 W0DM Fee #1H
175' FNL & 1280' FWL (SL)
330' FSL & 440' FWL (BHL)

Skynyrd 2 W0DM Fee #2H
175' FNL & 1310' FWL (SL)
330' FSL & 1320' FWL (BHL)

All in Section 2, T24S, R28E
Eddy County, New Mexico

Ladies and Gentlemen:

Mewbourne Oil Company ("Mewbourne") as Operator hereby proposes to form a 320.20 acre Working Interest Unit ("WIU") covering the W/2 of the captioned Section 2 for oil and gas production.

Mewbourne as Operator hereby proposes to drill the captioned Skynyrd 2 W0CN Fee #1H at the above referenced surface location (SL) to the referenced bottom hole location (BHL). The proposed well will be drilled to an approximate true vertical depth (TVD) of 9,663 feet subsurface to evaluate the Wolfcamp Formation. The proposed well will have a measured depth (MD) of approximately 14,328 feet. The W/2 of the captioned Section 2 will be dedicated to the well as the proration unit.

In addition, Mewbourne as Operator hereby proposes to drill the captioned Skynyrd 2 W0DM Fee #1H at the above referenced surface location (SL) to the referenced bottom hole location (BHL). The proposed well will be drilled to an approximate true vertical depth (TVD) of 9,634 feet subsurface to evaluate the Wolfcamp Formation. The proposed well will have a measured depth (MD) of approximately 14,314 feet. The W/2 of the captioned Section 2 will be dedicated to the well as the proration unit.

Finally, Mewbourne as Operator hereby proposes to drill the captioned Skynyrd 2 W0DM Fee #2H at the above referenced surface location (SL) to the referenced bottom hole location (BHL). The proposed well will be drilled to an approximate true vertical depth (TVD) of 9,611 feet subsurface to evaluate the Wolfcamp Formation. The proposed well will have a measured depth (MD) of approximately 14,199 feet. The W/2 of the captioned Section 2 will be dedicated to the well as the proration unit.

Regarding the above, enclosed for your further handling are our AFEs dated April 25, 2018 for the captioned proposed wells. Please sign and return said AFEs at your earliest convenience if you elect to participate in the captioned wells and WIU and return to me within thirty (30) days.

A copy of our Joint Operating Agreement ("JOA") will follow under separate cover letter for your further handling and review in the near future.

In lieu of participating in the above captioned WIU and wells, Mewbourne offers to purchase an Oil and Gas Lease of your interest. Please contact me via the information provided below if you wish to lease your interest.

Should you have any questions regarding the above, please email me at mrobb@mewbourne.com or call me at (432) 682-3715.

Sincerely,

MEWBOURNE OIL COMPANY

Mitch Robb
Landman

ATTACHMENT C

MEWBOURNE OIL COMPANY

AUTHORIZATION FOR EXPENDITURE

Well Name: Skynyrd 2 W0CN Fee #1H | Prospect: Wolfcamp

Location: SL: 175' FNL & 1340' FWL; BHL: 330' FSL & 2310' FWL | County: Eddy | ST: NM

Sec. 2 | Blk: | Survey: | TWP: 24S | RNG: 28E | Prop. TVD: 9663 | TMD: 14328

INTANGIBLE COSTS 0180		CODE	TCP	CODE	CC
Regulatory Permits & Surveys		0180-0100	$10,000	0180-0200	
Location / Road / Site / Preparation		0180-0105	$50,000	0180-0205	$25,000
Location / Restoration		0180-0106	$175,000	0180-0206	$30,000
Daywork / Turnkey / Footage Drilling	19 days drlg / 3 days comp @ $21,000/d	0180-0110	$427,000	0180-0210	$67,300
Fuel	1500 gal/day @ 2.63/gal	0180-0114	$95,200	0180-0214	$240,000
Mud, Chemical & Additives		0180-0120	$150,000	0180-0220	
Horizontal Drillout Services				0180-0222	$100,000
Cementing		0180-0125	$95,000	0180-0225	$25,000
Logging & Wireline Services		0180-0130	$2,000	0180-0230	$220,000
Casing / Tubing / Snubbing Service		0180-0134	$20,000	0180-0234	$70,000
Mud Logging		0180-0137	$30,000		
Stimulation	28 Stg 11.3 MM gal / 11.3 MM lb			0180-0241	$1,725,000
Stimulation Rentals & Other				0180-0242	$120,000
Water & Other		0180-0145	$50,000	0180-0245	$365,000
Bits		0180-0148	$63,000	0180-0248	$4,000
Inspection & Repair Services		0180-0150	$40,000	0180-0250	$5,000
Misc. Air & Pumping Services		0180-0154		0180-0254	$10,000
Testing & Flowback Services		0180-0158	$15,000	0180-0258	$30,000
Completion / Workover Rig				0180-0260	$10,500
Rig Mobilization		0180-0164	$100,000		
Transportation		0180-0165	$20,000	0180-0265	$20,000
Welding Services		0180-0168	$5,000	0180-0268	$15,000
Contract Services & Supervision		0180-0170	$32,300	0180-0270	$22,500
Directional Services	Includes Vertical Control	0180-0175	$157,500		
Equipment Rental		0180-0180	$170,100	0180-0280	$30,000
Well / Lease Legal		0180-0184	$5,000	0180-0284	
Well / Lease Insurance		0180-0185	$6,300	0180-0285	
Intangible Supplies		0180-0188	$8,000	0180-0288	$1,000
Damages		0180-0190	$7,000	0180-0290	
ROW & Easements		0180-0192		0180-0292	$1,000
Pipeline Interconnect				0180-0293	
Company Supervision		0180-0195	$103,200	0180-0295	$72,000
Overhead Fixed Rate		0180-0196	$10,000	0180-0296	$20,000
Well Abandonment		0180-0198		0180-0298	
Contingencies	10% (TCP) 10% (CC)	0180-0199	$184,700	0180-0299	$322,800
	TOTAL		$2,031,300		$3,551,100

TANGIBLE COSTS 0181					
Casing (19.1" - 30")		0181-0793			
Casing (10.1" - 19.0")	180' - 13 3/8" 54.5# J-55 ST&C @ $35.90/ft	0181-0794	$7,000		
Casing (8.1" - 10.0")	2580' - 9 5/8" 40# N-80 LT&C @ $27.61/ft	0181-0795	$76,100		
Casing (6.1" - 8.0")	10090' - 7" 29# P-110 LT&C @ $27.76/ft	0181-0796	$299,200		
Casing (4.1" - 6.0")	5150' - 4 1/2" 13.5# P-110 LTC @ $13.66/ft			0181-0797	$75,200
Tubing	9190' - 2 7/8" 6.5# L-80 EUE 8rd @ $4.74/ft			0181-0798	$46,600
Drilling Head		0181-0860	$40,000		
Tubing Head & Upper Section				0181-0870	$50,000
Horizontal Completion Tools	Completion Liner Hanger			0181-0871	$30,000
Sucker Rods				0181-0875	
Subsurface Equipment				0181-0880	
Artificial Lift Systems	Gas Lift Valves			0181-0884	$15,000
Pumping Unit				0181-0885	
Surface Pumps & Prime Movers	1/3 VRU/SWD Pump/Circ Pump			0181-0886	$35,000
Tanks - Oil	3 - 750 bbl			0181-0890	$55,000
Tanks - Water	3 - 750 bbl			0181-0891	$60,000
Separation / Treating Equipment	30"x10'x1k# 3 ph/36"x15'x1k# Hor 3ph/Gun bbl			0181-0895	$45,000
Heater Treaters, Line Heaters	8'x20'x75# HT			0181-0897	$23,000
Metering Equipment				0181-0898	$14,000
Line Pipe & Valves - Gathering	0.2 Mile 4" Gas & 0.1 Mile (2) 4" Water			0181-0900	$15,000
Fittings / Valves & Accessories				0181-0906	$60,000
Cathodic Protection				0181-0908	$8,000
Electrical Installation				0181-0909	$50,000
Equipment Installation				0181-0910	$50,000
Pipeline Construction	0.2 Mile 4" Steel & 0.1 Mile (2) 4" Poly			0181-0920	$20,000
	TOTAL		$422,300		$551,800
	SUBTOTAL		$2,453,600		$4,202,900
	TOTAL WELL COST		$6,656,500		

Extra Expense Insurance

☐ I elect to be covered by Operator's Extra Expense insurance and pay my proportionate share of the premium.
Operator has secured Extra Expense insurance covering costs of well control, clean up and redrilling as estimated in Line Item 0180-0185.

☐ I elect to purchase my own well control insurance policy.

If neither box is checked above, non-operating working interest owner elects to be covered by Operator's well control insurance.

Prepared by: B. Talley Date: 4/24/2018

Company Approval: M. Whitlock Date: 4/26/2018

Joint Owner Interest: _____ Amount: _____

Joint Owner Name: _____ Signature: _____

File: Skynyrd 2 W0CN Fee 1H AFE.xlsx

ATTACHMENT D

Revised: 01/31/2018

MEWBOURNE OIL COMPANY

AUTHORIZATION FOR EXPENDITURE

Well Name: Skynyrd 2 W0DM Fee #1H | Prospect: Wolfcamp

Location: SL: 175' FNL & 1280' FWL; BHL: 330' FSL & 440' FWL | County: Eddy | ST: NM

Sec. 2 | Blk: | Survey: | TWP: 24S | RNG: 28E | Prop. TVD: 9634 | TMD: 14314

INTANGIBLE COSTS 0180		CODE	TCP	CODE	CC
Regulatory Permits & Surveys		0180-0100	$10,000	0180-0200	
Location / Road / Site / Preparation		0180-0105	$50,000	0180-0205	$25,000
Location / Restoration		0180-0106	$175,000	0180-0206	$30,000
Daywork / Turnkey / Footage Drilling	19 days drlg / 3 days comp @ $21,000/d	0180-0110	$427,000	0180-0210	$67,300
Fuel	1500 gal/day @ 2.63/gal	0180-0114	$95,200	0180-0214	$240,000
Mud, Chemical & Additives		0180-0120	$150,000	0180-0220	
Horizontal Drillout Services				0180-0222	$100,000
Cementing		0180-0125	$95,000	0180-0225	$25,000
Logging & Wireline Services		0180-0130	$2,000	0180-0230	$220,000
Casing / Tubing / Snubbing Service		0180-0134	$20,000	0180-0234	$70,000
Mud Logging		0180-0137	$30,000		
Stimulation	28 Stg 11.3 MM gal / 11.3 MM lb			0180-0241	$1,730,000
Stimulation Rentals & Other				0180-0242	$120,000
Water & Other		0180-0145	$50,000	0180-0245	$365,000
Bits		0180-0148	$83,000	0180-0248	$4,000
Inspection & Repair Services		0180-0150	$40,000	0180-0250	$5,000
Misc. Air & Pumping Services		0180-0154		0180-0254	$10,000
Testing & Flowback Services		0180-0158	$15,000	0180-0258	$30,000
Completion / Workover Rig				0180-0260	$10,500
Rig Mobilization		0180-0164	$100,000		
Transportation		0180-0165	$20,000	0180-0265	$20,000
Welding Services		0180-0168	$5,000	0180-0268	$15,000
Contract Services & Supervision		0180-0170	$32,300	0180-0270	$22,500
Directional Services	Includes Vertical Control	0180-0175	$157,500		
Equipment Rental		0180-0180	$170,100	0180-0280	$30,000
Well / Lease Legal		0180-0184	$5,000	0180-0284	
Well / Lease Insurance		0180-0185	$6,300	0180-0285	
Intangible Supplies		0180-0188	$8,000	0180-0288	$1,000
Damages		0180-0190	$7,000	0180-0290	
ROW & Easements		0180-0192		0180-0292	$1,000
Pipeline Interconnect				0180-0293	
Company Supervision		0180-0195	$103,200	0180-0295	$72,000
Overhead Fixed Rate		0180-0196	$10,000	0180-0296	$20,000
Well Abandonment		0180-0198		0180-0298	
Contingencies	10% (TCP) 10% (CC)	0180-0199	$184,700	0180-0299	$323,300
	TOTAL		$2,031,300		$3,556,500

TANGIBLE COSTS 0181					
Casing (19.1" - 30")		0181-0793			
Casing (10.1" - 19.0")	180' - 13 3/8" 54.5# J-55 ST&C @ $35.90/ft	0181-0794	$7,000		
Casing (8.1" - 10.0")	2580' - 9 5/8" 40# N-80 LT&C @ $27.61/ft	0181-0795	$76,100		
Casing (6.1" - 8.0")	10060' - 7" 29# P-110 LT&C @ $27.76/ft	0181-0796	$298,300		
Casing (4.1" - 6.0")	5160' - 4 1/2" 13.5# P-110 LTC @ $13.66/ft			0181-0797	$75,300
Tubing	9160' - 2 7/8" 6.5# L-80 EUE 8rd @ $4.74/ft			0181-0798	$46,400
Drilling Head		0181-0860	$40,000		
Tubing Head & Upper Section				0181-0870	$50,000
Horizontal Completion Tools	Completion Liner Hanger			0181-0871	$30,000
Sucker Rods				0181-0875	
Subsurface Equipment				0181-0880	
Artificial Lift Systems	Gas Lift Valves			0181-0884	$15,000
Pumping Unit				0181-0885	
Surface Pumps & Prime Movers	1/3 VRU/SWD Pump/Circ Pump			0181-0886	$35,000
Tanks - Oil	3 - 750 bbl			0181-0890	$55,000
Tanks - Water	3 - 750 bbl			0181-0891	$60,000
Separation / Treating Equipment	30"x10'x1k# 3 ph/36"x15'x1k# Hor 3ph/Gun bbl			0181-0895	$45,000
Heater Treaters, Line Heaters	8'x20'x75# HT			0181-0897	$23,000
Metering Equipment				0181-0898	$14,000
Line Pipe & Valves - Gathering	0.2 Mile 4" Gas & 0.1 Mile (2) 4" Water			0181-0900	$15,000
Fittings / Valves & Accessories				0181-0906	$60,000
Cathodic Protection				0181-0908	$8,000
Electrical Installation				0181-0909	$50,000
Equipment Installation				0181-0910	$50,000
Pipeline Construction	0.2 Mile 4" Steel & 0.1 Mile (2) 4" Poly			0181-0920	$20,000
	TOTAL		$421,400		$851,700
	SUBTOTAL		$2,452,700		$4,408,300
	TOTAL WELL COST		$6,661,000		

Extra Expense Insurance

☐ I elect to be covered by Operator's Extra Expense Insurance and pay my proportionate share of the premium.
Operator has secured Extra Expense Insurance covering costs of well control, clean up and redrilling as estimated in Line Item 0180-0185.

☐ I elect to purchase my own well control insurance policy.

If neither box is checked above, non-operating working interest owner elects to be covered by Operator's well control insurance.

Prepared by: B. Talley Date: 4/24/2018

Company Approval: M. Whitlock Date: 4/25/2018

Joint Owner Interest: _____ Amount: _____

Joint Owner Name: _____ Signature: _____

File: Skynyrd 2 W0DM Fee 1H AFE.xlsx

Revised: 01/31/2018

MEWBOURNE OIL COMPANY

AUTHORIZATION FOR EXPENDITURE

Well Name: Skynyrd 2 W0DM Fee #2H | Prospect: Wolfcamp

Location: SL: 175' FNL & 1310' FWL; BHL: 330' FSL & 1320' FWL | County: Eddy | ST: NM

Sec. 2 | Blk: | Survey: | TWP: 24S | RNG: 28E | Prop. TVD: 9611 | TMD: 14199

INTANGIBLE COSTS 0180		CODE	TCP	CODE	CC
Regulatory Permits & Surveys		0180-0100	$10,000	0180-0200	
Location / Road / Site / Preparation		0180-0105	$50,000	0180-0205	$25,000
Location / Restoration		0180-0106	$175,000	0180-0206	$30,000
Daywork / Turnkey / Footage Drilling	19 days drlg / 3 days comp @ $21,000/d	0180-0110	$427,000	0180-0210	$67,300
Fuel	1500 gal/day @ 2.63/gal	0180-0114	$95,200	0180-0214	$240,000
Mud, Chemical & Additives		0180-0120	$150,000	0180-0220	
Horizontal Drillout Services				0180-0222	$100,000
Cementing		0180-0125	$95,000	0180-0225	$25,000
Logging & Wireline Services		0180-0130	$2,000	0180-0230	$220,000
Casing / Tubing / Snubbing Service		0180-0134	$20,000	0180-0234	$70,000
Mud Logging		0180-0137	$30,000		
Stimulation	28 Stg 11.3 MM gal / 11.3 MM lb			0180-0241	$1,730,000
Stimulation Rentals & Other				0180-0242	$120,000
Water & Other		0180-0145	$50,000	0180-0245	$365,000
Bits		0180-0148	$63,000	0180-0248	$4,000
Inspection & Repair Services		0180-0150	$40,000	0180-0250	$5,000
Misc. Air & Pumping Services		0180-0154		0180-0254	$10,000
Testing & Flowback Services		0180-0158	$15,000	0180-0258	$30,000
Completion / Workover Rig				0180-0260	$10,500
Rig Mobilization		0180-0164	$100,000		
Transportation		0180-0165	$20,000	0180-0265	$20,000
Welding Services		0180-0168	$5,000	0180-0268	$15,000
Contract Services & Supervision		0180-0170	$32,300	0180-0270	$22,500
Directional Services	Includes Vertical Control	0180-0175	$157,500		
Equipment Rental		0180-0180	$170,100	0180-0280	$30,000
Well / Lease Legal		0180-0184	$5,000	0180-0284	
Well / Lease Insurance		0180-0185	$6,300	0180-0285	
Intangible Supplies		0180-0188	$8,000	0180-0288	$1,000
Damages		0180-0190	$7,000	0180-0290	
ROW & Easements		0180-0192		0180-0292	$1,000
Pipeline Interconnect				0180-0293	
Company Supervision		0180-0195	$103,200	0180-0295	$72,000
Overhead Fixed Rate		0180-0196	$10,000	0180-0296	$20,000
Well Abandonment		0180-0198		0180-0298	
Contingencies	10% (TCP) 10% (CC)	0180-0199	$184,700	0180-0299	$323,300
	TOTAL		$2,031,300		$3,556,600

TANGIBLE COSTS 0181					
Casing (19.1" - 30")		0181-0793			
Casing (10.1" - 19.0")	180' - 13 3/8" 54.5# J-55 ST&C @ $35.90/ft	0181-0794	$7,000		
Casing (8.1" - 10.0")	2580' - 9 5/8" 40# N-80 LT&C @ $27.81/ft	0181-0795	$76,100		
Casing (6.1" - 8.0")	10040' - 7" 29# P-110 LT&C @ $27.76/ft	0181-0796	$297,700		
Casing (4.1" - 6.0")	5070' - 4 1/2" 13.5# P-110 LTC @ $13.66/ft			0181-0797	$74,000
Tubing	9140' - 2 7/8" 6.5# L-80 EUE 8rd @ $4.74/ft			0181-0798	$46,300
Drilling Head		0181-0860	$40,000		
Tubing Head & Upper Section				0181-0870	$50,000
Horizontal Completion Tools	Completion Liner Hanger			0181-0871	$30,000
Sucker Rods				0181-0875	
Subsurface Equipment				0181-0880	
Artificial Lift Systems	Gas Lift Valves			0181-0884	$15,000
Pumping Unit				0181-0885	
Surface Pumps & Prime Movers	1/3 VRU/SWD Pump/Circ Pump			0181-0886	$35,000
Tanks - Oil	3 - 750 bbl			0181-0890	$55,000
Tanks - Water	3 - 750 bbl			0181-0891	$60,000
Separation / Treating Equipment	30"x10'x1k# 3 ph/36"x15'x1k# Hor 3ph/Gun bbl			0181-0895	$45,000
Heater Treaters, Line Heaters	8'x20'x75# HT			0181-0897	$23,000
Metering Equipment				0181-0898	$14,000
Line Pipe & Valves - Gathering	0.2 Mile 4" Gas & 0.1 Mile (2) 4" Water			0181-0900	$15,000
Fittings / Valves & Accessories				0181-0906	$60,000
Cathodic Protection				0181-0908	$8,000
Electrical Installation				0181-0909	$50,000
Equipment Installation				0181-0910	$50,000
Pipeline Construction	0.2 Mile 4" Steel & 0.1 Mile (2) 4" Poly			0181-0920	$20,000
	TOTAL		$420,800		$650,300
	SUBTOTAL		$2,452,100		$4,206,900
	TOTAL WELL COST		$6,659,000		

Extra Expense Insurance

☐ I elect to be covered by Operator's Extra Expense Insurance and pay my proportionate share of the premium.
Operator has secured Extra Expense Insurance covering costs of well control, clean up and redrilling as estimated in Line Item 0180-0185.

☐ I elect to purchase my own well control insurance policy.

If neither box is checked above, non-operating working interest owner elects to be covered by Operator's well control insurance.

Prepared by: B. Talley Date: 4/24/2018

Company Approval: M. Whitlock Date: 4/25/2018

Joint Owner Interest: _____ Amount: _____

Joint Owner Name: _____ Signature: _____

File: Skynyrd 2 W0DM Fee 2H AFE.xlsx

Revised: 01/31/2018

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

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

Case No. 21365

VERIFIED STATEMENT OF CHARLES CROSBY

COUNTY OF MIDLAND)
) ss.
STATE OF TEXAS)

Charles Crosby, being duly sworn upon his oath, deposes and states:

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

2. I am a geologist for Mewbourne Oil Company ("Mewbourne"), and I am familiar with the geological matters involved in this case. I have been qualified by the Division as an expert petroleum geologist.

3. The following geological plats are attached hereto:

(a) Attachment A is a structure map on the top of the Wolfcamp formation. It shows that structure dips gently to the east. It also shows Wolfcamp wells in the area, and a line of cross-section.

(b) Attachment B is a cross section. The well logs on the cross-section give a representative sample of the Wolfcamp formation in this area. The unit will be dedicated to the Skynyrd 2 W0CN Fee Well No. 1H, the Skynyrd 2 W0DM Fee Well No. 1H, and the Skynyrd 2 W0DM Fee Well No. 2H, in the W/2 of Section 2, Township 24 South, Range 28 East, NMPM. The target zone for each well is the upper Wolfcamp sand. The sand is continuous and uniformly thick across the well unit.

4. I conclude from the maps that:

(a) The horizontal spacing unit is justified from a geologic standpoint.

(b) Each quarter section in the unit will contribute more or less equally to production.

(c) There is no faulting or other geologic impediment on the area which will affect the drilling of the subject wells.

EXHIBIT 3

5. Attachment C contains information from other Wolfcamp wells drilled in this area. There are both standup and laydown wells in this area, and Mewbourne sees no difference in production whether wells are standup or laydown.

6. Attachment D contains the horizontal drilling plans for the three proposed wells. The producing interval each proposed well will be orthodox.

VERIFICATION

STATE OF TEXAS)
) ss.
COUNTY OF MIDLAND)

Charles Crosby, being duly sworn upon his oath, deposes and states that: He is a geologist for Mewbourne Oil Company; he is authorized to make this verification on its behalf; he has read the foregoing statement, and knows the contents thereof; and the same is true and correct to the best of his knowledge, information, and belief.

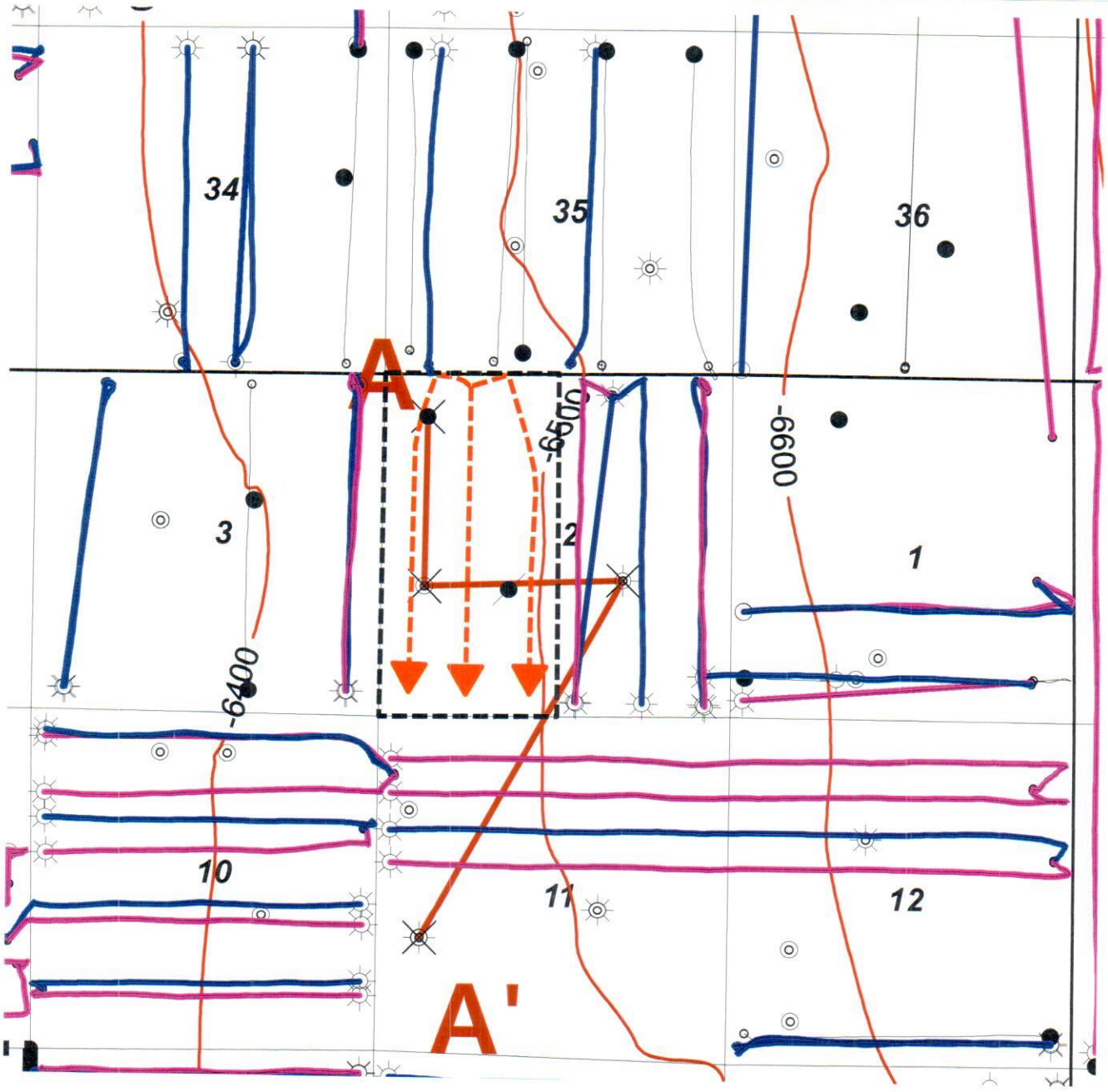
Charles Crosby

SUBSCRIBED AND SWORN TO before me this 22 day of May, 2020 by Charles Crosby.

My Commission Expires: 8-28-22

Notary Public

TIA ALEXANDER
Notary ID #131701498
My Commission Expires
August 28, 2022



1:28000

1350 0 1350 2700 4050 us ft

Horizontal Activity Color Code

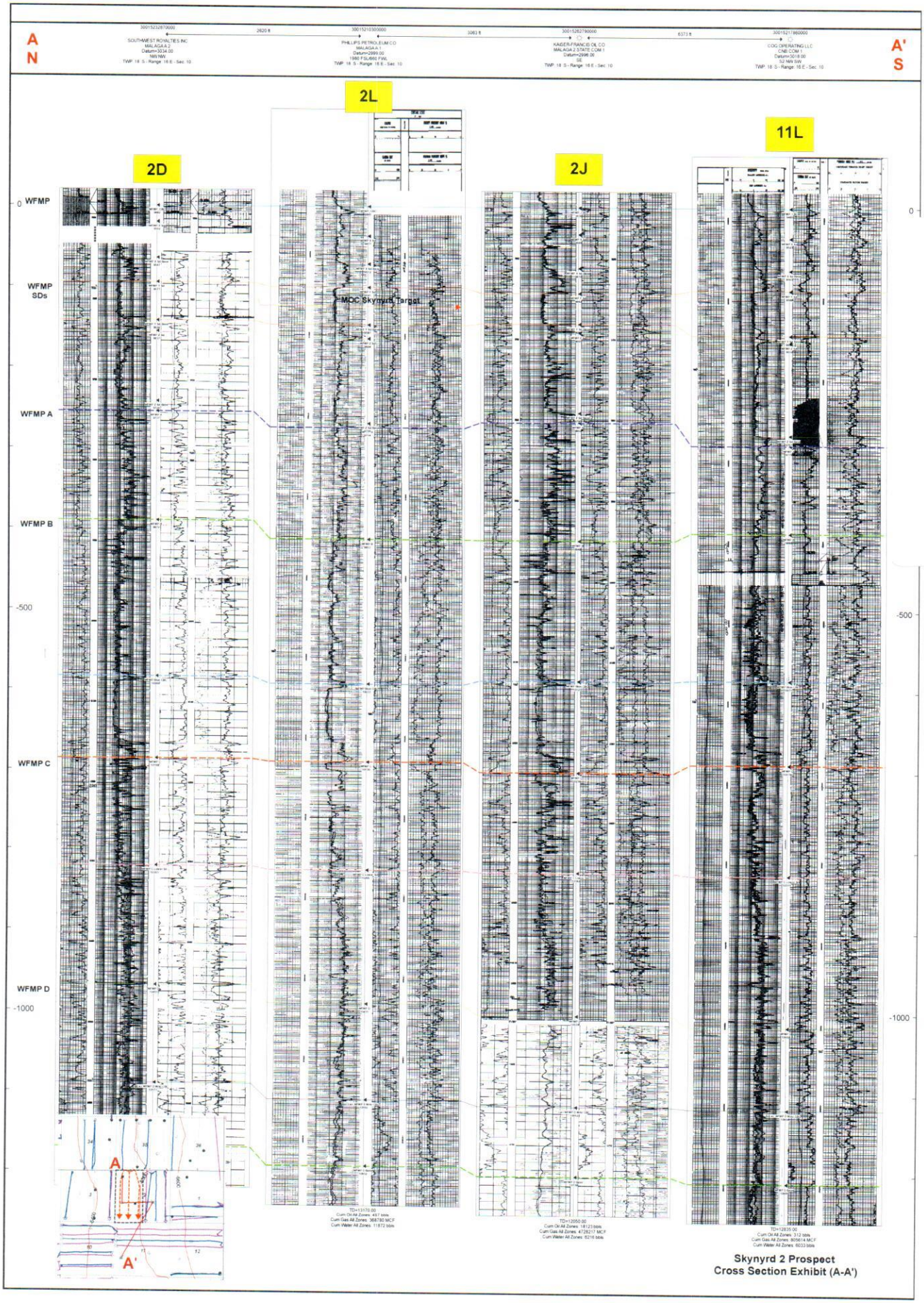
Wolfcamp Sand

Wolfcamp Shale

n

ATTACHMENT A

Mewbourne Oil Company		
Skynyrd 2 W0CN Fee 1H Skynyrd 2 W0DM Fee 1H Skynyrd 2 W0DM Fee 2H Horizontal Activity Map Structure Top of WFMP (C.I. 100')		
5/21/20	Eddy County	New Mexico
		Geol: C. Crosby



ATTACHMENT 2

Skynyrd 2 Horizontal Wolfcamp Production Table									
Well Name	Operator	API	Location	WFMP Comp Date	Cum Oil (Mbo)	Cum Gas (BCF)	Cum Water (mbw)	NS/EW	WFMP Zone
Yardbirds 34 W2CN Fee 1H	Mewbourne	3001541309	34N/23S28E	7/1/2016	248.3	3.6	839.8	NS	WFMP D Shale
Layla 35 MD Fee 2H	Mewbourne	3001541730	35M/23S/28E	4/2/2014	168.1	1.9	573.2	NS	WFMP D Shale
Layla 34 W2OB Fee 3H	Mewbourne	3001542407	35O/23S/28E	8/24/2015	231.1	2.2	762.7	NS	WFMP D Shale
Guitar 10 24 28 RB 202H	Matador	3001542660	10H/24S/28E	4/2/2015	262.5	0.5	828.3	EW	WFMP Sand
Yardbirds 3 W2AP Fee 1H	Mewbourne	3001542935	3A/24S/28E	7/18/2017	160.8	2.2	729.6	NS	WFMP D Shale
Yardbirds 3 W2DM Fee 1H	Mewbourne	3001542936	3D/24S/28E	7/30/2015	196.8	2.1	638.4	NS	WFMP D Shale
Speedwagon 27 W2PA Fee 1H	Mewbourne	3001543097	34A/23S/28E	2/14/2018	118.4	2.1	692.9	NS	WFMP D Shale
Yardbirds 34 W2OB Fee 1H	Mewbourne	3001543464	34O/23S/28E	6/12/2016	170.4	2.6	724.2	NS	WFMP D Shale
Guitar 10 24 28 RB 222H	Matador	3001543693	10H/24S/28E	8/12/2016	150.5	1.5	560	EW	WFMP D Shale
Dr Scrivner Federal 1 24S 28E RB 208H	Matador	3001543822	1P/24S/28E	10/21/2016	387.2	0.9	1303	EW	WFMP Sand
Dr Scrivner Federal 1 24S 28E RB 228H	Matador	3001543824	1P/24S/28E	11/6/2016	193	3.2	569.1	EW	WFMP D Shale
Journey 12 W2MP Fee Com 2H	Mewbourne	3001543845	12M/24S/28E	4/17/2017	157.6	2.2	480.6	EW	WFMP D Shale
Guitar 10 24 28 RB 201H	Mewbourne	3001543940	11D/24S/28E	5/20/2017	258.8	0.7	1047	EW	WFMP Sand
Yardbirds 3 W0AP Fee 2H	Mewbourne	3001543949	3A/24S/28E	7/18/2017	352.2	0.7	1105	NS	WFMP Sand
Guitar 10 24 28 RB 221H	Matador	3001543966	11D/24S/28E	4/30/2017	121.7	1.7	567.9	EW	WFMP D Shale
Guitar 10 24 28 RB 205H	Matador	3001543993	11D/24S/28E	5/17/2017	176.6	0.6	596.8	EW	WFMP Sand
Speedwagon 27 W0PA Fee 2H	Mewbourne	3001544115	34A/23S/28E	2/5/2018	414.6	0.7	971.6	NS	WFMP Sand
Tom Matthews 10 24S 28E RB 223H	Matador	3001544257	9I/24S/28E	10/21/2017	90.8	1.8	503.6	EW	WFMP D Shale
Tom Matthews 10 24S 28E RB 204H	Matador	3001544515	10M/24S/28E	5/5/2018	180.5	0.6	731.5	EW	WMFP Sand
Tom Matthews 10 24S 28E RB 224H	Matador	3001544516	10M/24S/28E	4/14/2018	76.1	1.2	358.5	EW	WFMP D Shale
Tom Matthews 10 24S 28E RB 203H	Matador	3001544561	9I/24S/28E	4/22/2018	200.3	0.6	819.3	EW	WFMP Sand
Howitzer Federal Com 602H	COG	3001545831	12A/24S/28E	5/22/2019	108.5	0.3	296	EW	WFMP A Shale
Howitzer Federal Com 603H	COG	3001545832	12A/24S/28E	11/25/2019	125.4	0.2	308.5	EW	WMFP Sand
Howitzer Federal Com 605H	COG	3001545833	12H/24S/28E	7/27/2019	101.6	0.2	254	EW	WFMP A Shale
Howitzer Fedral Com 606H	COG	3001545834	12H/24S/28E	1/19/2020	114.9	0.2	257.7	EW	WFMP Sand
Skynyrd 2 W0CN Fee 1H	Mewbourne	3001544801	2C/24S/28E	1/4/2019	250	0.5	765.1	EW	WMFP Sand
Skynyrd 2 W0DM Fee 1H	Mewbourne	3001544802	2D/24S/28E	1/5/2019	136.7	0.3	647.1	EW	WFMP Sand
Skynyrd 2 W0DM Fee 2H	Mewbourne	3001544803	2D/24S/28E	1/5/2019	189.5	0.4	611.5	EW	WFMP Sand

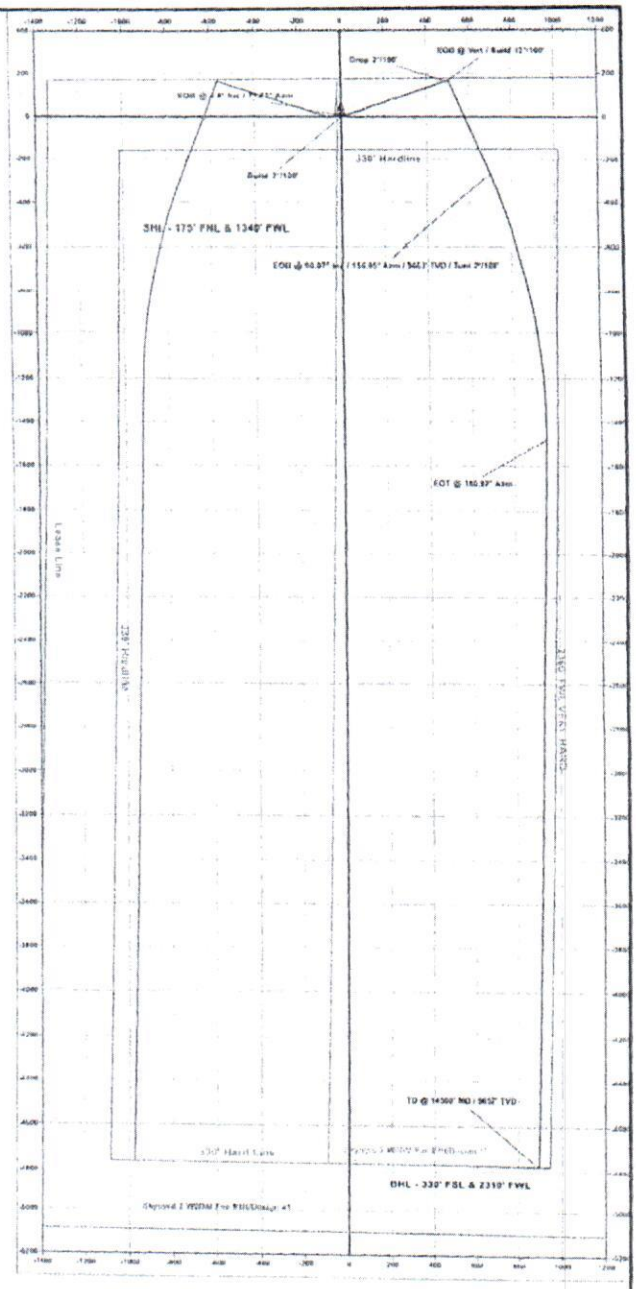
ATTACHMENT C

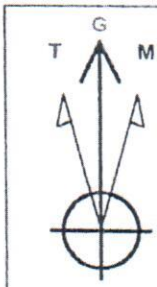
Company Name: Mewbourne Oil Company
Skynyrd 2 W0CN Fee #1H
Eddy County, New Mexico (Nad 83)
Rig: Patterson #243
Created By: Shane Robbins
Date: 7/6/2018

Skynyrd 2 W0CN Fee #1H
Eddy County, New Mexico (Nad 83)
Q180*** & WT-180***
Design #1

MEWBOURNE OIL COMPANY

QEC





Azimuths to Grid North

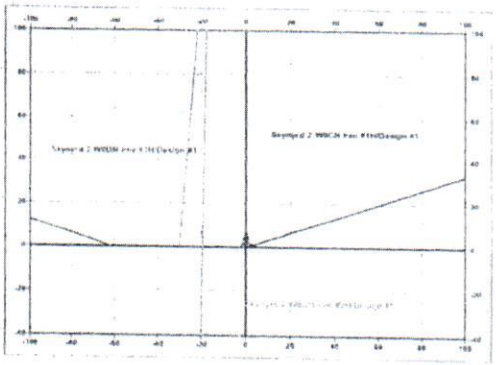
Correction: 6.93°

Magnetic Field

Strength: 47798.3snT
Dip Angle: 60.00°
Date: 7/6/2018
Model: IGRF2015

WELL DETAILS: Skynyrd 2 W0CN Fee #1H					
			3615.0		
+N/-S	+E/-W	Northing	Easting	Latitude	Longitude
0.0	0.0	496163.00	625124.70	32° 15' 13.556 N	104° 3' 44.254 W

PROJECT DETAILS: Eddy County, New Mexico (Nad 83)	
Geodetic System:	US State Plane 1983
Datum:	North American Datum 1983
Ellipsoid:	GRS 1980
Zone:	New Mexico Eastern Zone
System Datum:	Mean Sea Level



ANNOTATIONS

MD	Inc	Azi	TVD	+N/-S	+E/-W	VSect	Departure	Annotation
2600.0	0.00	0.00	2600.0	0.0	0.0	0.0	0.0	Build 2°/100'
2846.1	4.89	71.72	2839.8	3.2	9.5	-1.3	10.1	EOB @ 4.8° Inc / 71.72° Azm
8967.5	4.89	71.72	8945.7	164.9	496.5	-69.9	523.8	Drop 2°/100'
9207.6	0.00	0.00	9185.5	167.2	506.2	-71.3	533.1	EOC @ Vert / Build 12°/100'
9858.2	90.07	156.05	9663.0	-269.7	700.3	393.9	1011.2	EOB @ 90.07° Inc / 156.05° Azm / 9663' TVD / Turn 2°/100'
11201.3	90.07	180.92	9661.3	-1476.8	846.5	1627.7	2254.8	EOT @ 180.92° Azm
14499.5	90.07	180.92	9657.0	-4776.0	893.4	4858.8	5552.4	TD @ 14500' MD / 9657' TVD

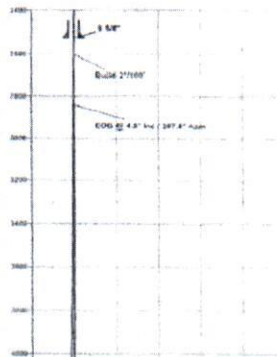
ATTACHMENT D

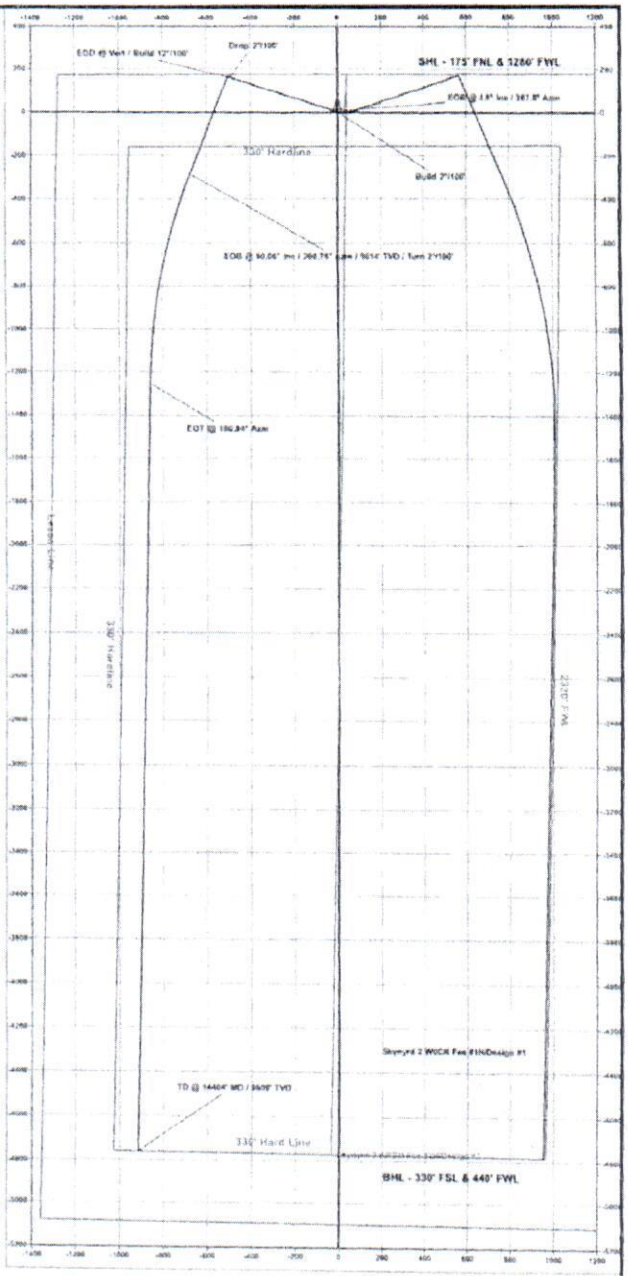
Company Name: Mewbourne Oil Company
Skynyrd 2 W0DM Fee #1H
Eddy County, New Mexico (Nad 83)
Rig: Patterson #243
Created By: Shane Robbins
Date: 7/6/2018

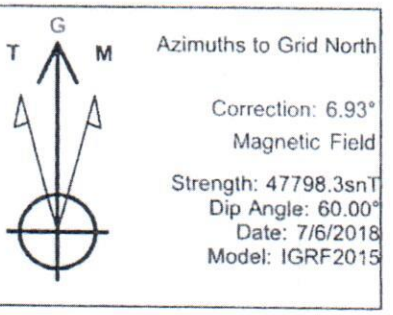
Skynyrd 2 W0DM Fee #1H
Eddy County, New Mexico (Nad 83)
Q180*** & WT-180***
Design #2

MEWBOURNE OIL COMPANY

QES







Azimuths to Grid North

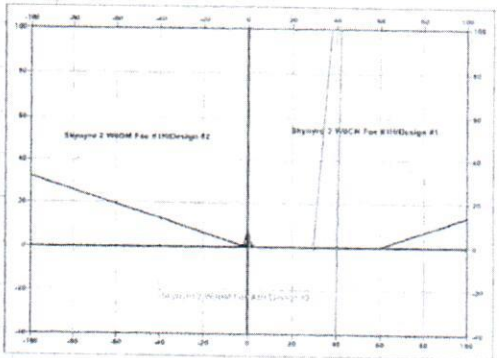
Correction: 6.93°

Magnetic Field

Strength: 47798.3snT
Dip Angle: 60.00°
Date: 7/6/2018
Model: IGRF2015

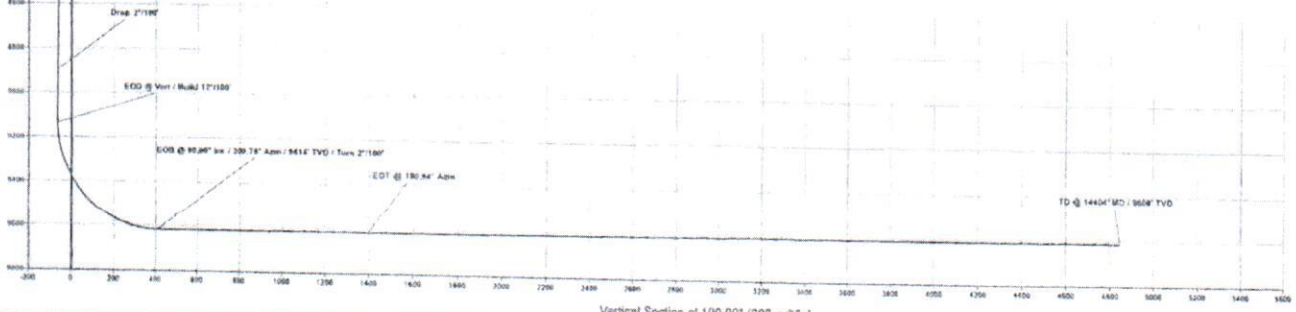
WELL DETAILS: Skynyrd 2 W0DM Fee #1H					
+N/-S	+E/-W	Northing	Easting	Latitude	Longitude
0.0	0.0	496162.76	3016.8 625864.76	32° 15' 12.686 N	104° 3' 44.953 W

PROJECT DETAILS: Eddy County, New Mexico (Nad 83)	
Geodetic System:	US State Plane 1983
Datum:	North American Datum 1983
Ellipsoid:	GRS 1980
Zone:	New Mexico Eastern Zone
System Datum:	Mean Sea Level



ANNOTATIONS

MD	Inc	Azi	TVD	+N/-S	+E/-W	VSectDeparture	Annotation
2600.0	0.00	0.00	2600.0	0.0	0.0	0.0	Build 2°/100'
2840.6	4.80	287.80	2839.7	3.1	-9.6	-1.2	10.8 EOB @ 4.8° Inc / 287.8° Azm
9915.4	4.80	287.80	9896.8	158.6	-493.8	-62.3	519.7 Drop 2°/100'
9158.4	0.00	0.00	9138.5	161.6	-503.4	-63.5	529.7 EOD @ Vert / Build 12°/100'
9908.9	90.06	200.76	9614.0	-285.3	-672.8	407.4	1008.7 EOB @ 90.06° Inc / 200.76° Azm / 9614' TVD / Turn 2°/100'
10839.8	90.06	180.94	9612.9	-1253.6	-658.4	1393.3	1997.6 EOT @ 180.94° Azm
14404.4	90.06	180.94	9609.0	-4757.8	-616.1	4845.2	5302.2 TD @ 14404' MD / 9609' TVD



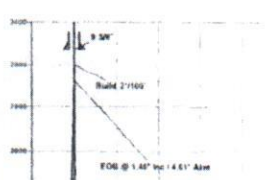
Vertical Section at 190.90° (200 usft/in)

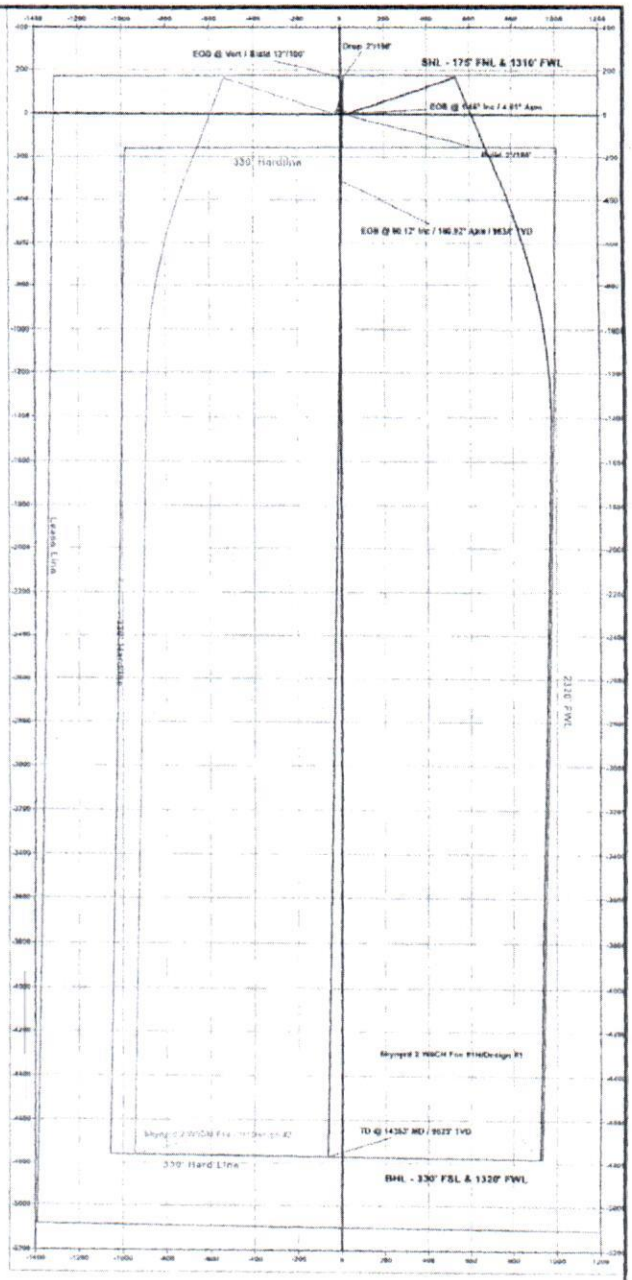
Company Name: Mewbourne Oil Company
Skynyrd 2 W0DM Fee #2H
Eddy County, New Mexico (Nad 83)
Rig: Patterson #243
Created By: Shane Robbins
Date: 7/6/2018

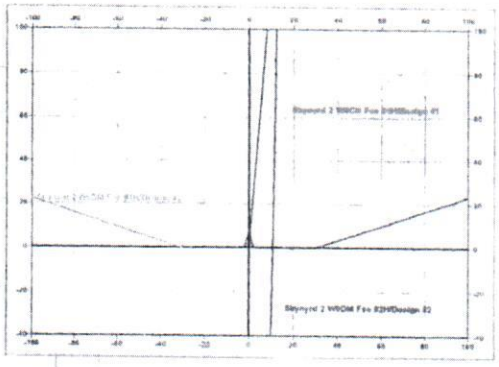
Skynyrd 2 W0DM Fee #2H
Eddy County, New Mexico (Nad 83)
Q180*** & WT-180***
Design #2

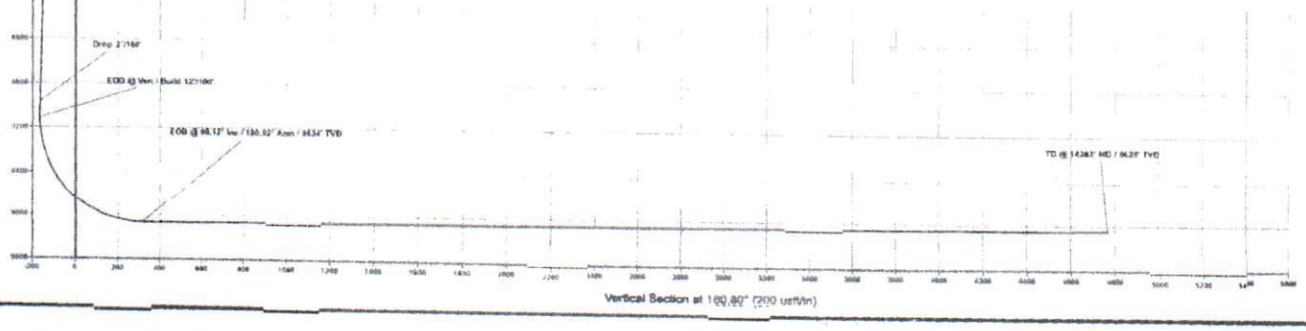
MEWBOURNE OIL COMPANY

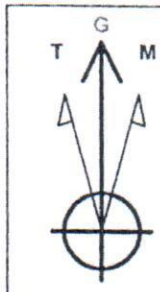
QES











Azimuths to Grid North

Correction: 6.93°
Magnetic Field

Strength: 47798.3snT
Dip Angle: 60.00°
Date: 7/6/2018
Model: IGRF2015

WELL DETAILS:	Skynyrd 2 W0DM Fee #2H				
		3616.0			
+N/-S	+E/-W	Northing	Easting	Latitude	Longitude
0.0	0.0	454162.90	623994.60	32° 19' 13.596 N	104° 1' 44.605 W

PROJECT DETAILS:	Eddy County, New Mexico (Nad 83)
Geodetic System:	US State Plane 1983
Datum:	North American Datum 1983
Ellipsoid:	GRS 1980
Zone:	New Mexico Eastern Zone
System Datum:	Mean Sea Level

ANNOTATIONS

MD	Inc	Azi	TVD	+N/-S	+E/-W	VSectDeparture	Annotation
2600.0	0.00	0.00	2600.0	0.0	0.0	0.0	Build 2°/100'
2673.1	1.46	4.61	2673.1	0.9	0.1	-0.9	EOB @ 1.46° Inc / 4.61° Azm
9085.6	1.46	4.61	9083.4	164.0	13.2	-164.2	164.5 Drop 2°/100'
9158.6	0.00	4.61	9156.5	164.9	13.3	-165.1	165.5 EOD @ Vert / Build 12°/100'
9905.6	90.12	180.92	9634.0	-313.5	5.6	313.4	643.9 EOB @ 90.12° Inc / 180.92° Azm / 9634' TVD
14383.1	90.12	180.92	9625.0	-4768.4	-44.2	4768.9	5097.4 TD @ 14383' MD / 9625' TVD

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

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

Case Nos. 21365

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 application filed herein.

4. Notice of the application 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.

6. 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: 8/18/20

James Bruce
James Bruce

EXHIBIT 4

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

July 16, 2020

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 Mewbourne Oil Company, regarding Wolfcamp wells in the W/2 of Section 2, Township 24 South, Range 28 East, NMPM, Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, August 6, 2020. 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.

Due to the flu epidemic and state-ordered public health emergency, the hearing will be held remotely. Persons may view and participate in the hearing through one of the following links:

Meeting number: 968 329 152
Password: YQe6KZBe3n6
https://nmemnrd.webex.com/nmemnrd/j.php?MTID=mb3ddb90721ccc17207709b8c71dc2ac1

Join by video system
Dial 968329152@nmemnrd.webex.com
You can also dial 173.243.2.68 and enter your meeting number.

Join by phone
+1-408-418-9388 United States Toll
Access code: 968 329 152

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, July 30, 2020. This statement must be filed with the Division's

ATTACHMENT A

Santa Fe office at ocd.hearings@state.nm.us. It should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its 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 A

Helen Anderson aka Helen Tholstrup
Lenora Mae Swearingen
2828 SE Downing Road
Topeka, KS 66605

Koray Ali Cagliergin
410 South Armenia Avenue, Unit #922
Tampa, FL 33069

Janet S. Istas
1342 Rust Road K9
Concordia, KS 66901

Marilyn K. Powell
6201 S 143rd St. East
Derby, KS 67037-9015

Raymond H. Jones
PO Box 191
Kenesaw, NE 68956

Betty Groat
15336 SE Fairoaks Ave.
Portland, OR 97267-3532

Cinda Rogers
1115 SW 11th Ave., Apt. 301
Portland, OR 97205-2138

Sharon Burgholzer
413 SW 27th Way
Troutdale, OR 97060-3169

Majorie Moran
111 Nara Visa, N.W.
Albuquerque, NM 87107

Vada Alridge
1810 Cameo Court, NW
Olympia, WA 98502

Nadine Rasco
Routhe 2, Box 156
Portales, NM 88130

Mary Patrick
PO Box 1324
Los Lunas, NM 87123

Donna Phillips
PO Box 1058
Seminole, OK 74818

Barbara Brown
10400 2nd St, Unit D
Albuquerque, NM 87114

Sharlene Murphy
616 N. Burgess
Holdenville, OK 74848

Ronald Peace
PO Box 695
Holdenville, OK 74848

Elizabeth Nguyen
1324 Bernardo CT, NE
Albuquerque, NM 87713

James David Watt
128 Dyrell Way
Folsom, CA 95630-2368

Sharon Ann Browne
1378 Palomar Circle
Sacramento, CA 95831

Julie Ann Weeks
2507 T Street
Sacramento, CA 95816

Mary Fager
PO Box 269003
Sacramento, CA 95826-9003

Cameron Christopher Watt &
Yoshi Peterson
3001 Stanton Circle
Carmichael, CA 95608-3734

Lisa Nicole Watt
1114 7th Ave.
Sacramento, CA 95818-3743

Richard Robert Raymond
5825 Walnut Ave.
Sacramento, CA95841-2234

Byron Steiner
1144 Greenhills Road
Sacramento, CA 95864-3816

Marshall Levan Browne
3473 Kimberly Road
Cameron Park, CA 95682-9036

Sean Robert Browne
1378 Palomar Circle
Sacramento, CA 95831-3132

Matthew Franklin Browne
90 Chandler St. Apt. 2
Somerville, MA 02144-1912

Leonard J. Herrell
163 County Road 1170
Minco, OK 73059-7000

Rosetta F. Brown
PO Box 66
Fletcher, OK 73541

Sidney M. Coryell, Jr.
4502 West 29th St
Little Rock, Arkansas 72204

Heirs and Devisees of James A. Collier III
Gregory Collier
3336 NW 12th Street, Apt. 1
Oklahoma City, OK 73107

Westway Petro, a Texas joint venture
6440 N. Central Expressway, Suite 615
Dallas, TX 75206

J.M. Turney
3529 Rashti Court
Fort Worth, TX 76109

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, [illegible] 3.
- 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:

James David Watt
128 Dyrell Way
Folsom, CA 95630-2368

9590 9402 5751 0003 4181 61

2. Article N

7018 3090 0001 4738 4416

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Verna L Dunlap ☑ Agent ☐ Addressee

B. Received by (Printed Name) Verna L Dunlap
C. Date of Delivery 8/3/2020

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

7018 3090 0001 4738 4379

CERTIFIED MAIL®
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee
$
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
$

Postmark Here

Sent To Cameron Christopher Watt & Yoshi Peterson
Street and Apt. No., or P 3001 Stanton Circle
City, State, ZIP+4® Carmichael, CA 95608-3734

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

7018 3090 0001 4738 4416

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee
$
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
$

Postmark Here

Sent To James David Watt
Street and Apt. No., or P 128 Dyrell Way
City, State, ZIP+4® Folsom, CA 95630-2368

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, [illegible] 3.
- 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:

Cameron Christopher Watt &
Yoshi Peterson
3001 Stanton Circle
Carmichael, CA 95608-3734

9590 9402 5751 0003 4181 23

2. A [illegible] from service label)

7018 3090 0001 4738 4379

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [illegible] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [illegible]
C. Date of Delivery 7-25-20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail [illegible] stricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Betty Groat
15336 SE Fairoaks Ave.
Portland, OR 97267-3532

9590 9402 5751 0003 4182 84

2. Article Number (Transfer from service label)
7018 3090 0001 4738 4539

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X CW RW ☐ Agent ☑ Addressee

B. Received by (Printed Name) CW 97267 | C. Date of Delivery 7/25

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

7018 3090 0001 4738 45

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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OFFICIAL USE

Certified Mail Fee $
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 $

Postmark Here

Sent To Marilyn K. Powell
Street and Apt. No., or PO Box No. 6201 S 143rd St. East
City, State, ZIP+4® Derby, KS 67037-9015

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

7018 3090 0001 4738 4539

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OFFICIAL USE

Certified Mail Fee $
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 $

Postmark Here

Sent To Betty Groat
Street and Apt. No., or PO Box No. 15336 SE Fairoaks Ave.
City, State, ZIP+4® Portland, OR 97267-3532

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Marilyn K. Powell
6201 S 143rd St. East
Derby, KS 67037-9015

9590 9402 5751 0003 4183 07

2. Article Number (Transfer from service label)
7018 3090 0001 4738 4553

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X KW Roo3 ☑ Agent ☐ Addressee

B. Received by (Printed Name) C19 | C. Date of Delivery 7/23

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over $500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Janet S. Istas
1342 Rust Road K9
Concordia, KS 66901

9590 9402 4582 8278 6089 78

2. 7018 3090 0001 4738 4560

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X GH ☐ Agent ☐ Addressee

B. Received by (Printed Name) R+2 CG
C. Date of Delivery 7-27-20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee
$
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
$

Postmark Here

Sent To Westway Petro, a Texas joint venture
Street and Apt. No., 6440 N. Central Expressway, Suite 615
City, State, ZIP+4® Dallas, TX 75206

7018 3090 0001 4738 4263

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

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OFFICIAL USE

Certified Mail Fee
$
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
$

Postmark Here

Sent To Janet S. Istas
Street and Apt. No., or PO Concordia, KS 66901
City, State, ZIP+4®

7018 3090 0001 4738 4560

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

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SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Westway Petro, a Texas joint venture
6440 N. Central Expressway, Suite 615
Dallas, TX 75206

9590 9402 5751 0003 4180 17

2. 7018 3090 0001 4738 4263

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Dana C Zachary ☐ Agent ☐ Addressee

B. Received by (Printed Name) DANA C ZACHARY
C. Date of Delivery 7/31/20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over $500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, [illegible] 3.
- 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:

Vada Alridge
1810 Cameo Court, NW
Olympia, WA 98502

9590 9402 5751 0003 4182 46

2. Article [illegible] (Transfer from service label)

7018 3090 0001 4738 4492

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Aldridge ☒ Agent ☐ Addressee

B. Received by (Printed Name) DT C19 C-90 C. Date of Delivery 7-27-20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

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U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee
$

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
$

Postmark Here

Sent To Sharon Burgholzer
Street and Apt. No., 413 SW 27th Way
City, State, ZIP+4® Troutdale, OR 97060-3169

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

7018 3090 0001 4738 4515

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OFFICIAL USE

Certified Mail Fee
$

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
$

Postmark Here

Sent To
Street and Apt. No., Vada Alridge
1810 Cameo Court, NW
City, State, ZIP+4® Olympia, WA 98502

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

7018 3090 0001 4738 4492

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, [illegible] 3.
- 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:

Sharon Burgholzer
413 SW 27th Way
Troutdale, OR 97060-3169

9590 9402 5751 0003 4182 60

2. Article Number *(Transfer from service label)*

7018 3090 0001 4738 4515

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X S. Burgholzer ☐ Agent ☐ Addressee

B. Received by (Printed Name) LC/C1/C19 C. Date of Delivery 7/24

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

(over $500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Elizabeth Nguyen
1324 Bernardo CT, NE
Albuquerque, NM 87713

9590 9402 5751 0003 4181 78

2. Arti... 7018 3090 0001 4738 4423

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X TMP C19 ☐ Agent ☐ Addressee

B. Received by (Printed Name) TMP C19 C. Date of Delivery 7/21

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail ...icted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee $

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 $

Postmark Here

Sent To Donna Phillips
Street and Apt. No., PO Box 1058
City, State, ZIP+4® Seminole, OK 74818

7018 3090 0001 4738 4461

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

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OFFICIAL USE

Certified Mail Fee $

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 $

Postmark Here

Sent To Elizabeth Nguyen
Street and Apt. No., or P 1324 Bernardo CT, NE
City, State, ZIP+4® Albuquerque, NM 87713

7018 3090 0001 4738 4423

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

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SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Donna Phillips
PO Box 1058
Seminole, OK 74818

9590 9402 5751 0003 4182 15

2. Articl... 7018 3090 0001 4738 4461

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Donna Phillips C. Date of Delivery 7-25-20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ ...ed Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Heirs and Devisees of James A. Collier III
Gregory Collier
3336 NW 12th Street, Apt. 1
Oklahoma City, OK 73107

9590 9402 5751 0003 4180 24

2. Article Number (Transfer from service label)
7018 3090 0001 4738 4270

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over $500) ☐ Insured Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

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7018 3090 0001 4738 4355

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OFFICIAL USE

Certified Mail Fee
$

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
$

Postmark Here

Sent To: Richard Robert Raymond
Street and Apt. No., or PO: 5825 Walnut Ave.
City, State, ZIP+4®: Sacramento, CA95841-2234

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

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7018 3090 0001 4738 4270

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OFFICIAL USE

Certified Mail Fee
$

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
$

Postmark Here

Sent To: Heirs and Devisees of James A. Collier III
Street and Apt. No.: Gregory Collier
City, State, ZIP+4®: 3336 NW 12th Street, Apt. 1
Oklahoma City, OK 73107

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

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SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Richard Robert Raymond
5825 Walnut Ave.
Sacramento, CA95841-2234

9590 9402 5751 0003 4181 09

2. Article Number (Transfer from service label)
7018 3090 0001 4738 4355

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X RRR ☐ Agent ☐ Addressee

B. Received by (Printed Name) RM 10 C19 | C. Date of Delivery 7/29/21

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☑ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

☐ Insured Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Lisa Nicole Watt
1114 7th Ave.
Sacramento, CA 95818-3743

9590 9402 5751 0003 4181 16

2. Article Number (Transfer from service label)
7018 3090 0001 4738 4362

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Lisa Watt ☐ Agent ☐ Addressee

B. Received by (Printed Name) Lisa Watt
C. Date of Delivery 7/28/20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

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OFFICIAL USE

Certified Mail Fee
$
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
$

Postmark Here

Sent To Mary Fager
Street and Apt. No., or PO Box No. PO Box 269003
City, State, ZIP+4® Sacramento, CA 95826-9003

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

7018 3090 0001 4738 4386

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OFFICIAL USE

Certified Mail Fee
$
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
$

Postmark Here

Sent To Lisa Nicole Watt
Street and Apt. No., or PO Box No. 1114 7th Ave.
City, State, ZIP+4® Sacramento, CA 95818-3743

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

7018 3090 0001 4738 4362

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Mary Fager
PO Box 269003
Sacramento, CA 95826-9003

9590 9402 5751 0003 4181 30

2. Article Number (Transfer from service label)
7018 3090 0001 4738 4386

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X Delivered ☐ Agent ☐ Addressee

B. Received by (Printed Name) 07/27/2020
C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

(over $500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 SK Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Leonard J. Herrell
163 County Road 1170
Minco, OK 73059-7000

9590 9402 5751 0003 4180 55

2. Article Number (Transfer from service label)
7018 3090 0001 4738 4300

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X (O-19 ☐ Agent ☑ Addressee

B. Received by (Printed Name) JLD C. Date of Delivery 7-27-20

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

(over $500) stricted Delivery

SK

Domestic Return Receipt

7018 3090 0001 4738 4331

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

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

OFFICIAL USE

Certified Mail Fee
$

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
$

Postmark Here

Sent To Marshall Levan Browne
Street and Apt. No., or PO Box No. 3473 Kimberly Road
City, State, ZIP+4® Cameron Park, CA 95682-9036

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

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7018 3090 0001 4738 4300

U.S. Postal Service™
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OFFICIAL USE

Certified Mail Fee
$

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
$

Postmark Here

Sent To Leonard J. Herrell
Street and Apt. No. 163 County Road 1170
City, State, ZIP+4® Minco, OK 73059-7000

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

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SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Marshall Levan Browne
3473 Kimberly Road
Cameron Park, CA 95682-9036

9590 9402 5751 0003 4180 86

2. Article Number (Transfer from service label)
7018 3090 0001 4738 4331

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X ☐ Agent ☑ Addressee

B. Received by (Printed Name) C. Date of Delivery 7-24

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☑ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

(over $500)

SK

Domestic Return Receipt

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

CERTIFIED MAIL®

7018 3090 0001 4738 4522

$7.05
US POSTAGE
FIRST-CLASS

071V00607931
87501
000122955

Cinda Rogers

NIXIE 971 FE 1 0007/29/20

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 87504105636 *1579-03486-29-26

9326029814729619

UTF
87504>1056

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

5/15/2020

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

CERTIFIED MAIL®

7019 2970 0000 7595 4308

S77323.168

$7.05
US POSTAGE
FIRST-CLASS

071V00607931
87501
00121780

Sharon Ann Browne
1378 Palomar Circle

NIXIE 957 FE 1 0005/11/20

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

87504105656 *2255-07246-06-45

ANK
87504>1056
SEBG1$3132 CO

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

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

CERTIFIED MAIL®

7018 3090 0001 4738 4478

S73323.81

$7.05⁰
US POSTAGE
FIRST-CLASS

071V00607931
87501
000122951

7-21-20

8-5-20

ANK
87504>1056

NIXIE 871 FE 1 0007/25/20
RETURN TO SENDER
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UNABLE TO FORWARD
BC: 87504105656 *1755-01066-25-07

7018 3090 0001 4738 4478

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Extra Services & Fees *(check box, add fee as appropriate)*
- ☐ Return Receipt (hardcopy) $
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- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
$

Postmark Here

Sent To Mary Patrick
PO Box 1324
Los Lunas, NM 87123

Street and Apt. No., or PO Box No.

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

OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL®

7018 3090 0001 4738 4393

$7.05⁰
US POSTAGE
FIRST-CLASS

071V00607931
87501
000122960

Julie Ann Weeks

NIXIE 957 FE 1 0007/30/20

RETURN TO SENDER
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BC: 87504105656 *0241-02985-23-26

ANK

1056

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- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

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$

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$

Postmark Here

Sent To Julie Ann Weeks
Street and Apt. No 2507 T Street
City, State, ZIP+4® Sacramento, CA 95816

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

7018 3090 0001 4738 4393

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

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

CERTIFIED MAIL®

7018 3090 0001 4738 4409

S73323.71

$7.05
US POSTAGE
FIRST-CLASS

071V00607931
87501
000122961

ANC

Sharon Ann Browne
1378 Palomar Circle
[illegible] CA 95831

NIXIE 957 FE 1 0007/30/20

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 87504105656 *0241-02980-23-26

ANK

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- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

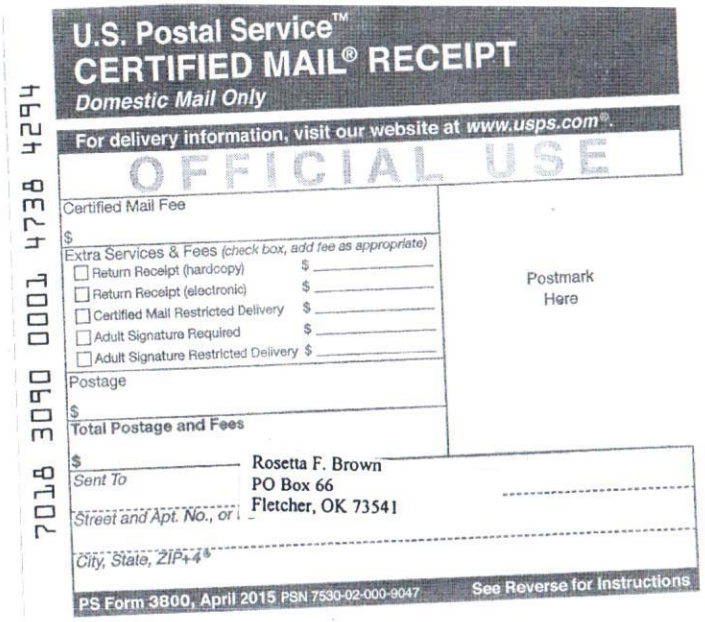
Total Postage and Fees
$

Postmark Here

Sent To: Sharon Ann Browne
Street and Apt. No., or PO Box: 1378 Palomar Circle
City, State, ZIP+4®: Sacramento, CA 95831

7018 3090 0001 4738 4409

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



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- ☐ Return Receipt (hardcopy) $
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- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
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Postmark Here

Sent To
Rosetta F. Brown
Street and Apt. No., or
PO Box 66
City, State, ZIP+4®
Fletcher, OK 73541

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

7018 3090 0001 4738 4294

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

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CERTIFIED MAIL®

7018 3090 0001 4738 4294

S73323.62

$7.05⁰
US POSTAGE
FIRST-CLASS

071V00607931
87501
00012970

Rosetta F. Brown
PO Box 66
Fletcher, OK 73541

NIXIE 731 FE 1 0008/02/20

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 87504105656 *0657-01766-23-28

73541$0066 BC

87504>1056

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

CERTIFIED MAIL®

7018 3090 0001 4738 4287

$7.05⁰
US POSTAGE
FIRST-CLASS
071V00607931
87501
000122969

VAC

Sidney M. Coryell, Jr.
4502 West 29th St
Little Rock, Arkansas 72204

NIXIE 722 DE 1 0008/04/20
RETURN TO SENDER
VACANT
UNABLE TO FORWARD
BC: 87504105656 *1255-05330-04-44

VAC
87504>1056

7018 3090 0001 4738 4287

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Certified Mail Fee
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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
$
Postmark Here
Sent To
Sidney M. Coryell, Jr.
Street and Apt. No., or PO Box 4502 West 29th St
Little Rock, Arkansas 72204
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

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

CERTIFIED MAIL®

7018 3090 0001 4738 4324

S73323.59

$7.05[0]
US POSTAGE
FIRST-CLASS

071V00697931
87501
0001[illegible]2973

ANK

Sean Robert Browne
1378 Palomar Circle
Sacramento, CA 95831-3132

NIXIE 957 FE 1 0007/30/20

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 87504105656 *0241-02986-23-26

1: 93270201437623 ANK

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- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
$

Postmark Here

Sent To: Sean Robert Browne
1378 Palomar Circle
Sacramento, CA 95831-3132

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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7018 3090 0001 4738 4324

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

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7018 3090 0001 4738 4584

$2.00
US POSTAGE
FIRST-CLASS
071V00607931
87501
000120628

$2.00
US POSTAGE
FIRST-CLASS
071V00607931
87501
000120630

$2.00
US POSTAGE
FIRST-CLASS
071V00607931
87501
000120629

RETURN TO SENDER

S73323.148

$1.60
US POSTAGE
FIRST-CLASS
071V00607931
87501

Helen Anderson aka Helen Tholstrup
Lenora Mae Swearingen
2828 SE Downing Road

NIXIE 641 FE 1 0006/01/20
RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD
BC: 87504105656 *0428-02519-24-19

UTF
87504>1056

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Extra Services & Fees *(check box, add fee as appropriate)*
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- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$
Total Postage and Fees
$

Postmark Here

Sent To: Helen Anderson aka Helen Tholstrup
Lenora Mae Swearingen
Street and Apt. No., or PO Box No.: 2828 SE Downing Road
City, State, ZIP+4®: Topeka, KS 66605

7018 3090 0001 4738 4584

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

8/04/2020

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CERTIFIED MAIL®

7018 3090 0001 4738 4485

S73323.80

$7.05⁰
US POSTAGE
FIRST-CLASS

071V00607931
87501
00012952

ANK

7-23-20

Nadine Rasco
Route 2, Box 156

NIXIE 750 DE 1 0007/29/20

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

ANK
87504>1056 BC: 87504105656 *1882-01023-29-24

7018 3090 0001 4738 4485

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- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
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Total Postage and Fees
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Postmark Here

Sent To
Nadine Rasco
Routhe 2, Box 156
Portales, NM 88130

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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7018 3090 0001 4738 4546

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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
$

Postmark Here

Sent To
Raymond H. Jones
Street and Apt. No., o PO Box 191
City, State, ZIP+4® Kenesaw, NE 68956

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

7018 3090 0001 4738 4348

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- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
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Sent To
Byron Steiner
Street and Apt. No., or PO B 1144 Greenhills Road
City, State, ZIP+4® Sacramento, CA 95864-3816

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7018 3090 0001 4738 4317

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Extra Services & Fees *(check box, add fee as appropriate)*
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- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
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Postmark Here

Sent To
Matthew Franklin Browne
Street and Apt. No., or 90 Chandler St. Apt. 2
City, State, ZIP+4® Somerville, MA 02144-1912

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7018 3090 0001 4738 4454

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- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
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Postmark Here

Sent To
Barbara Brown
Street and Apt. No., or P 10400 2nd St, Unit D
City, State, ZIP+4® Albuquerque, NM 87114

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

7018 3090 0001 4738 4447

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- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
$

Postmark Here

Sent To
Sharlene Murphy
Street and Apt. No., or P 616 N. Burgess
City, State, ZIP+4® Holdenville, OK 74848

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

7018 3090 0001 4738 4430

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- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
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Total Postage and Fees
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Postmark Here

Sent To
Ronald Peace
Street and Apt. No., or PO B PO Box 695
City, State, ZIP+4® Holdenville, OK 74848

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

7018 3090 0001 4738 4256

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- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
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Postmark Here

Sent To J.M. Turney
Street and Apt. No., or PO Box 3529 Rashti Court
City, State, ZIP+4® Fort Worth, TX 76109

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

7018 3090 0001 4738 4508

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Extra Services & Fees *(check box, add fee as appropriate)*
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- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
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Sent To Majorie Moran
Street and Apt. No., 111 Nara Visa, N.W.
City, State, ZIP+4® Albuquerque, NM 87107

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

7018 3090 0001 4738 4577

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- ☐ Return Receipt (hardcopy) $
- ☐ Return Receipt (electronic) $
- ☐ Certified Mail Restricted Delivery $
- ☐ Adult Signature Required $
- ☐ Adult Signature Restricted Delivery $

Postage
$

Total Postage and Fees
$

Postmark Here

Sent To Koray Ali Cagliergin
Street and Apt. No. 410 South Armenia Avenue, Unit #922
City, State, ZIP+4® Tampa, FL 33069

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

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

CERTIFIED MAIL®

7018 3090 0001 4738 4522

S73323.77

$7.05⁰
US POSTAGE
FIRST-CLASS

071V00607931
87501
000122955

9326029814729619

UTF
87504>1056

Cinda Rogers

NIXIE 971 FE 1 0007/29/20

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 87504105636 *1579-03486-29-26

7018 3090 0001 4738 4522

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Certified Mail Fee
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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
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Postmark Here

Sent To Cinda Rogers
Street and Apt. No., 1115 SW 11th Ave., Apt. 301
City, State, ZIP+4® Portland. OR 97205-2138

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Affidavit of Publication

Ad # 0004296663

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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 on the date as follows, to wit:

07/24/2020

Kathleen Allen
Legal Clerk

Subscribed and sworn before me this July 24, 2020:

Shelly Hora
State of WI, County of Brown
NOTARY PUBLIC

8-25-23
My commission expires

SHELLY HORA
Notary Public
State of Wisconsin

Ad # 0004296663
PO #: 968 329 152
# of Affidavits1

This is not an invoice

EXHIBIT 5

NOTICE

To: John A. Swearingen, Florence Swearingen, Marion L. Swearingen, Arthur D. Lundblade, Marvin L. Lundblade, Helen Anderson aka Helen Tholstrup, Lenora Mae Swearingen, Koray Ali Cagliergin, Margaret E. Lundblade, Eugene D. Lundblade, Carol Jean Anderson, Janet S. Istas, Marilyn K. Powell, Lucy Jones Lundblade, Diane Lundblade Wilson, Raymond H. Jones, Betty Groat, Madeline, Cinda Rogers, Sharon Burgholzer, Mark Lundblade, W.H. Swearingen, Vernon Swearingen, Pauline Swearingen, Anna Pauline Swearingen, Ralph Swearingen, Ida Mary Abbey, Jesse Allen Redford, Louise M. Richardson, Evan Richardson, Ernest Redford, Edna Mae Watt, Fern M. Redford, Ernest L. Redford, Larry L. Redford, Majorie Moran, Vada Alridge, Nadine Rasco, Mary Patrick, Diane Peace, Sonja Lopez, Dewayne Peace, Donna Phillips, Barbara Brown, Sharlene Murphy, Ronald Peace, Elizabeth Nguyen, James Robert Watt, James David Watt, Sharon Ann Browne, Julie Ann Weeks, Mary Fager, Carol Diane Knisley, Cameron Christopher Watt, Lisa Nicole Watt, Yoshi Peterson, Michael Murphy, Madeline Murphy, Henry Murphy, Richard Robert Raymond, Byron Steiner, Bret James Steiner, Marshall Levan Browne, Sean Robert Browne, Matthew Franklin Browne, Myrtle I. Brown, Sidney M. Coryell, Elija Gleason Brown, Gleason Brown, Robert A. Brown, Lee J. Penden, Leonard J. Herrell, Rosetta F. Brown, Sidney M. Coryell, Jr., James A. Collier III, Gregory Collier, Allen Swearingen, Ralph Swearingen, Westway Petro (a Texas joint venture), and J.M. Turney or your heirs, devisees, successors, or assigns: Mewbourne Oil Company has filed an application with the New Mexico Oil Conservation Division seeking an order pooling all mineral interest owners in the Wolfcamp formation underlying Lots 3, 4, S/2NW/4, and SW/4 (the W/2) of Section 2, Township 24 South, Range 28 East, NMPM, Eddy County, New Mexico. The unit will be dedicated to (i) the Skynyrd 2 W0CN Fee Well No. 1H, a horizontal well with a surface location in the NE/4NW/4 and a last take point in the SE/4SW/4 of Section 2, (ii) the Skynyrd 2 W0DM Fee Well No. 1H, a horizontal well with a surface location in the NW/4NW/4 and a last take point in the SW/4SW/4 of Section 2, and (iii) the Skynyrd 2 W0DM Fee Well No. 2H, a horizontal well with a surface location in the NW/4NW/4 and a last take point in the SW/4SW/4 of Section 2. Also to be considered will be the cost of drilling and completing 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 and completing the wells. The application is scheduled to be heard at 8:15 a.m. on August 6, 2020. During the COVID-19 Public Health Emergency, state buildings are currently closed to the public and the hearing will be held remotely. Persons may view and participate in the hearing through one of the following links:

Meeting number: 968 329 152
Password: YQe6KZBe3n6
https://nmemnrd.webex.com/nmemnrd/j.php?MTID=mb3ddb90721ccc17207709b8c71dc2ac1

Join by video system
Dial 968329152@nmemnrd.webex.com
You can also dial 173.243.2.68 and enter your meeting number.

Join by phone
+1-408-418-9388 United States Toll
Access code: 968 329 152

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, July 30, 2020. This statement must be filed with the Division's Santa Fe office at ocd.hearings@state.nm.us. It should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its 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. The attorney for applicant is James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504, jamesbruc@aol.com. The unit is located approximately 1-1/2 miles north-northeast of Malaga, New Mexico.

July 24, 2020

COMPULSORY POOLING APPLICATION CHECKLIST

ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS

Case:	**21365**
Date	**August 20, 2020**
Applicant	Mewbourne Oil Company
Designated Operator & OGRID (affiliation if applicable)	Mewbourne Oil Company/OGRID No. 14744
Applicant's Counsel:	James Bruce
Case Title:	Application of Mewbourne Oil Company for Compulsory Pooling, Eddy County, New Mexico
Entries of Appearance/Intervenors:	Mary Fager
Well Family	Skynyrd Wolfcamp wells
Formation/Pool	
Formation Name(s) or Vertical Extent:	Wolfcamp Formation
Primary Product (Oil or Gas):	Gas
Pooling this vertical extent:	Entire Wolfcamp formation
Pool Name and Pool Code:	Purple Sage; Wolfcamp (Gas)/Pool Code 98220
Well Location Setback Rules:	Purple Sage pool rules and current horizontal well rules
Spacing Unit Size:	Half Section/320 acres
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres
Building Blocks:	320 acres
Orientation:	North-South
Description: TRS/County	Lots 3, 4, S/2NW/4, and SW/4 (W/2) §2-24S-28E, NMPM, Eddy County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	No
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	
Applicant's Ownership in Each Tract	Exhibit 2. Applicant owns or controls over 98.5% of the working interest in the well unit.
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Skynyrd 2 W0CN Fee Well No. 1H API No. 30-015-44801 SHL: 175 FNL & 1340 FWL §2 BHL: 330 FSL & 2310 FWL §2 FTP: 330 FNL & 2310 FWL §2 LTP: 330 FSL & 2310 FWL §2 Upper Wolfcamp/TVD 9663 feet/MD 14328 feet

EXHIBIT 6

	Skynyrd 2 W0DM Fee Well No. 1H API No. 30-015-44802 SHL: 175 FNL & 1280 FWL §2 BHL: 330 FSL & 440 FWL §2 FTP: 330 FNL & 440 FWL §2 LTP: 330 FSL & 440 FWL §2 Upper Wolfcamp/TVD 9634 feet/MD 14314 feet Skynyrd 2 W0DM Fee Well No. 2H API No. 30-015-44803 SHL: 175 FNL & 1310 FWL §2 BHL: 330 FSL & 1320 FWL §2 FTP: 330 FNL & 1320 FWL §2 LTP: 330 FSL & 1320 FWL §2 Upper Wolfcamp/TVD 9611 feet/MD 14199 feet
Horizontal Well First and Last Take Points	See above
Completion Target (Formation, TVD and MD)	See above
AFE Capex and Operating Costs	
Drilling Supervision/Month $	$8000
Production Supervision/Month $	$800
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	Cost + 200%/Exhibit 2, page 2
Notice of Hearing	
Proposed Notice of Hearing	Exhibit 1
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit 4
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit 5
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibit 2-A
Tract List (including lease numbers and owners)	
Pooled Parties (including ownership type)	Exhibit 2-B
Unlocatable Parties to be Pooled	Exhibit 2-B
Ownership Depth Severance (including percentage above & below)	None
Joinder	
Sample Copy of Proposal Letter	Exhibit 2-C
List of Interest Owners (*i.e.* Exhibit A of JOA)	Exhibit 2-B
Chronology of Contact with Non-Joined Working Interests	Exhibit 2
Overhead Rates In Proposal Letter	
Cost Estimate to Drill and Complete	Exhibit 2-D
Cost Estimate to Equip Well	Exhibit 2-D

Cost Estimate for Production Facilities	Exhibit 2-D
Geology	
Summary (including special considerations)	Exhibit 3
Spacing Unit Schematic	Exhibit 3-A
Gunbarrel/Lateral Trajectory Schematic	Exhibit 3-A
Well Orientation (with rationale)	Standup/Exhibit 3
Target Formation	Wolfcamp
HSU Cross Section	Exhibit 3-B
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibit 2-A
Tracts	Exhibit 2-A
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2
General Location Map (including basin)	Exhibit 2-A
Well Bore Location Map	Exhibit 2-A
Structure Contour Map - Subsea Depth	Exhibit 3-A
Cross Section Location Map (including wells)	Exhibit 3-B
Cross Section (including Landing Zone)	Exhibit 3-B
Additional Information	
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	James Bruce
Signed Name (Attorney or Party Representative):	James Bruce
Date:	August 18, 2020