

**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:**

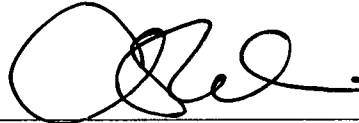
**APPLICATION OF COULTHURST
MANAGEMENT & INVESTMENT, LLC,
FOR AUTHORIZATION TO INJECT AS
PART OF PRESSURE MAINTENANCE
PROJECT, SANDOVAL COUNTY,
NEW MEXICO.**

14835
CASE NO. 1435

AFFIDAVIT

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

Adam G. Rankin, attorney in fact and authorized representative of Coulthurst Management & Investment, LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter and proof of receipt attached hereto.

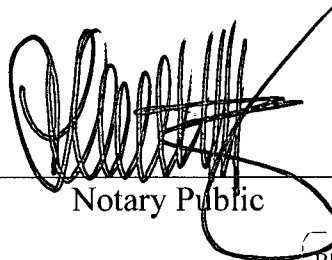


Adam G. Rankin

SUBSCRIBED AND SWORN to before this 5th day of July 2012 by Adam G.
Rankin.



**OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO**
My commission expires 01/14/15



Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 5
Submitted by:
COULTHURST MGMT & INVESTMENT, LLC.
Hearing Date: July 12, 2012



April 10, 2012

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: AFFECTED PARTIES

**Re: Application of Coulthurst Management & Investment, LLC, for
Authorization to Inject as Part of a Pressure Maintenance Project,
Sandoval County, New Mexico.**

Ladies and Gentlemen:

This letter is to advise you that Coulthurst Management & Investment, LLC ("Coulthurst") has filed the enclosed application with the New Mexico Oil Conservation Division. This application has been set for hearing before a Division Examiner at 8:15 a.m. on May 10, 2012. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 1208.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all 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 are to be resolved prior to the hearing.

If you have any questions regarding this application, please contact Paul Thompson at (505) 327-4892.

Sincerely,

Adam G. Rankin
COULTHURST MANAGEMENT & INVESTMENT, LLC

Enclosures

7006 0100 0005 0626 6742

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

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

OFFICE *Canthurst/Hew*

Postage	\$ 2.10
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 7.40



Three Forks Resources, LLC
 1515 Wazee Street, #350
 Denver, Colorado 80202

PS Form 3800, June 2002

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION		DELIVERY	
<p>1. Article Addressed to:</p> <p>Three Forks Resources, LLC 1515 Wazee Street, #350 Denver, Colorado 87202</p>		<p>A. Signature <input checked="" type="checkbox"/> <i>Loralee Olivas</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>2. Article Number (Transfer from service label)</p>		<p>B. Received by (Printed Name)</p>	
		<p>C. Date of Delivery 10-13-12</p>	
		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
		<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
<p>7006 0100 0005 0626 6742</p>			
PS Form 3811, February 2004		Domestic Return Receipt	
102595-02-M-1540			