

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

APPLICATION OF MEWBOURNE OIL COMPANY  
TO RE-OPEN CASE NO. 14554 TO MAKE THE  
SPECIAL RULES AND REGULATIONS FOR THE  
NORTH SEVEN RIVERS GLORIETA-YESO  
POOL PERMANENT, AND TO EXPAND THE POOL,  
EDDY COUNTY, NEW MEXICO.

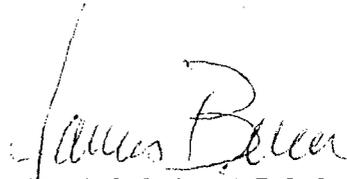
Case No. 14554

AFFIDAVIT OF NOTICE

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

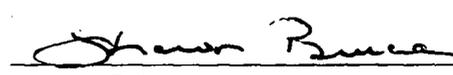
James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters 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 operators entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the operators, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.

  
\_\_\_\_\_  
James Bruce

SUBSCRIBED AND SWORN TO before me this 8<sup>th</sup> day of August, 2012 by James Bruce.

My Commission Expires: 3/14/13

  
\_\_\_\_\_  
Notary Public

Oil Conservation Division  
Case No. 5  
Exhibit No. 5

**JAMES BRUCE**  
ATTORNEY AT LAW

POST OFFICE BOX 1056  
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213  
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)  
(505) 660-6612 (Cell)  
(505) 982-2151 (Fax)

[jamesbruc@aol.com](mailto:jamesbruc@aol.com)

July 17, 2012

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is an application re-open Case No. 14554, to make permanent the special pool rules for the North Seven Rivers Glorieta-Yeso Pool, filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, August 9, 2012, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an operator in the pool 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.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, August 2, 2012. This statement must be filed with the Division's Santa Fe office at the above address, and 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**

EXHIBIT A

COG Operating LLC  
550 West Texas Avenue  
Midland, Texas 79701

Yates Petroleum Corporation  
105 South Fourth Street  
Artesia, New Mexico 88210

Nearburg Producing Company  
Building 2, Suite 120  
3300 North "A" Street  
Midland, Texas 79705

Echo Production Company  
P.O. Box 1210  
Graham, Texas 76450

Nadel and Gussman Permian, L.L.C.  
Suite 508  
601 North Marienfeld  
Midland, Texas 79701

Cimarex Energy Co.  
Suite 600  
600 North Marienfeld  
Midland, Texas 79701

Fasken Oil & Ranch, Ltd.  
Suite 1800  
303 West Wall  
Midland, Texas 79701

Unit Petroleum Company  
P.O. Box 702500  
Tulsa, Oklahoma 74170

Marshall & Winston, Inc.  
P.O. Box 50880  
Midland, Texas 79710

**SENDER: COMPLETE THIS SECTION**

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nadel and Gussman Permian, L.L.C.  
Suite 508  
601 North Marienfeld  
Midland, Texas 79701

2. Article Number

(Transfer from service label) 7010 3090 0000 2336 5926

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
*X Lauren LeBard*

B. Received by (Printed Name)  Yes  
 C. Date of Delivery  
*Lauren LeBard 7-23-11*

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, February 2004

Domestic Return Receipt

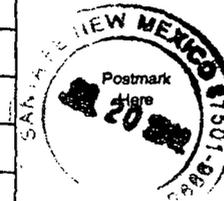
102595-02-M-1540

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



Sent To Cimarex Energy Co.  
 Suite 600  
 Street, Apt. No., or PO Box No. 600 North Marienfeld  
 Midland, Texas 79701  
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7010 3090 0000 2336 5919

**SENDER: COMPLETE THIS SECTION**

- Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cimarex Energy Co.  
 Suite 600  
 600 North Marienfeld  
 Midland, Texas 79701

2. Article Number

(Transfer from service label) 7010 3090 0000 2336 5919

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
*X David Guza*

B. Received by (Printed Name)  Yes  
 C. Date of Delivery  
*David Guza 7-23-11*

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

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

Sent To Nadel and Gussman Permian, L.L.C.  
 Suite 508  
 Street, Apt. No., or PO Box No. 601 North Marienfeld  
 Midland, Texas 79701  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7010 3090 0000 2336 5926

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Fasken Oil & Ranch, Ltd.  
Suite 1800  
303 West Wall  
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7010 3090 0000 2336 5902

PS Form 3811, February 2004

Domestic Return Receipt

M-4

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Carol Heller*  Agent  
 Addressee

B. Received by (Printed Name)

*Carol Heller*

C. Date of Delivery

7-23-12

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

3. Service Type

- Certified Mail  Express Mail
- Registered  Return Receipt for Merchandise
- Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

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**OFFICIAL USE**

7010 3090 0000 2336 5964

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



Sent To

COG Operating LLC  
550 West Texas Avenue  
Midland, Texas 79701

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

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

**U.S. Postal Service (TM)  
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**OFFICIAL USE**

7010 3090 0000 2336 5902

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



Sent To

Fasken Oil & Ranch, Ltd.  
Suite 1800  
303 West Wall  
Midland, Texas 79701

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

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COG Operating LLC  
550 West Texas Avenue  
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7010 3090 0000 2336 5964

PS Form 3811, February 2004

Domestic Return Receipt

M-4

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X *Jay Monroe*  Agent  
 Addressee

B. Received by (Printed Name)

JAY MONROE

C. Date of Delivery

7-23-12

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

3. Service Type

- Certified Mail  Express Mail
- Registered  Return Receipt for Merchandise
- Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Echo Production Company  
P.O. Box 1210  
Graham, Texas 76450

2. Article Number **7010 3090 0000 2336 5933**  
(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt **M-Y** 102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Tom Doyle*

B. Received by (Printed Name) *Taylor Doyle* C. Date of Delivery *7/23/11*

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

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



Sent To: Marshall & Winston, Inc.  
 P.O. Box 50880  
 Midland, Texas 79710

Street, Apt. No., or PO Box No.  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7010 3090 0000 2336 5889

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



Sent To: Echo Production Company  
 P.O. Box 1210  
 Graham, Texas 76450

Street, Apt. No., or PO Box No.  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7010 3090 0000 2336 5933

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marshall & Winston, Inc.  
 P.O. Box 50880  
 Midland, Texas 79710

2. Article Number **7010 3090 0000 2336 5889**  
(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt **M-Y** 102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Kyndal Kidd*

B. Received by (Printed Name) *Kyndal Kidd* C. Date of Delivery *7/24/11*

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

**SENDER: COMPLETE THIS SECTION**

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
 Print your name and address on the reverse so that we can return the card to you.  
 Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:  
  
 Unit Petroleum Company  
 P.O. Box 702500  
 Tulsa, Oklahoma 74170

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*B. Craghead*  
 B. Received by (Printed Name) C. Date of Delivery  
*B. Craghead* 7-23-04

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

Article Number (Transfer from service label) 7010 3090 0000 2336 5896

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**OFFICIAL USE**

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



Sent To: Nearburg Producing Company  
 Building 2, Suite 120  
 Street, Apt. No. or PO Box No.: 3300 North "A" Street  
 Midland, Texas 79705  
 City, State, ZIP+4

7010 3090 0000 2336 5940

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

**OFFICIAL USE**

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



Sent To: Unit Petroleum Company  
 P.O. Box 702500  
 Street, Apt. No. or PO Box No.: Tulsa, Oklahoma 74170  
 City, State, ZIP+4

**SENDER: COMPLETE THIS SECTION**

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
 Print your name and address on the reverse so that we can return the card to you.  
 Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:  
  
 Nearburg Producing Company  
 Building 2, Suite 120  
 3300 North "A" Street  
 Midland, Texas 79705

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
*Laura Selz*  
 B. Received by (Printed Name) C. Date of Delivery  
 Laura Selz 7-26-04  
 D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Transfer from service label) 7010 3090 0000 2336 5940

7010 3090 0000 2336 5896

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece or on the front if space permits.

1. Article Addressed to:

Yates Petroleum Corporation  
105 South Fourth Street  
Artesia, New Mexico 88210

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 Agent  
 Addressee  
*Chandermaal*

B. Received by (Printed Name) C. Date of Delivery  
*Chandermaal 7-23-12*

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number 7010 3090 0000 2336 5957  
 (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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7010 3090 0000 2336 5957

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



Sent To  
 Yates Petroleum Corporation  
 105 South Fourth Street  
 Artesia, New Mexico 88210  
 Street, Apt. No., or PO Box No.  
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions