

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

APPLICATION OF MEWBOURNE OIL COMPANY  
FOR A NON-STANDARD OIL SPACING AND  
PRORATION UNIT AND COMPULSORY POOLING,  
LEA COUNTY, NEW MEXICO.

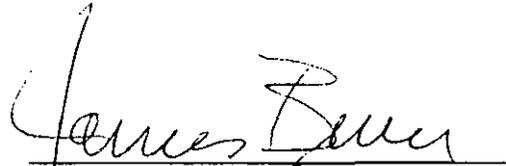
Case No. 15,081

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 interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owner, at its correct address, by certified mail. Copies of the notice letter and certified return receipt are attached hereto as Attachment 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 29<sup>th</sup> day of January, 2014 by James Bruce.



My Commission Expires:

  
Notary Public

Oil Conservation Division  
Case No. 9 15081  
Exhibit No.

**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)

December 26, 2013

CERTIFIED MAIL -- RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, *etc.* filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding the S½S½ of Section 21, Township 18 South, Range 32 East, N.M.P.M., Lea County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, January 23, 2014, 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 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 contesting the 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, January 16, 2014. 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

Attachment 

Exhibit A

Harvey E. Yates Company,  
Explorers Petroleum Corporation  
and Spiral, Inc.  
P.O. Box 1933  
Roswell, NM 88202  
Attn: Melissa Randle

VALCO, LLC and EAKO, LLC  
P.O. Box 1090  
Roswell, NM 88202

Roper Family Properties  
c/o Frontage Funding, LLC  
2409 Never Bend Cv.  
Austin, TX 78746  
Attn: Mr. Mark Roper

The Marital Deduction QTIP Trust  
2108 Fountain Square  
Fort Worth, TX 76107

7012 3050 0000 6871 6455

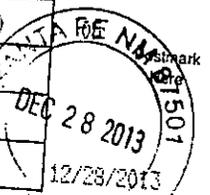
# U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

AUSTIN TX 78746 SPECIAL USE

Postage	\$ 0.46	0500
Certified Fee	\$3.10	
Return Receipt Fee (Endorsement Required)	\$2.55	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.11	



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

Roper Family Properties  
 c/o Frontage Funding, L.L.C.  
 2409 Never Bend Cv.  
 Austin, TX 78746

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:

Harvey E. Yates Company,  
 Explorers Petroleum Corporation  
 and Spiral, Inc.  
 P.O. Box 1933  
 Roswell, NM 88202

2. Article Number

(Transfer from service label)

7012 3050 0000 6871 6455

PS Form 3811, February 2004

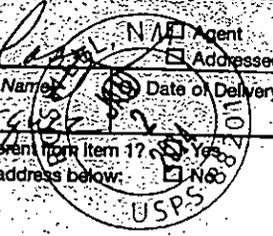
Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*  
 Agent  
 Addressee

B. Received by (Printed Name): *Diana Velasquez*  
 Date of Delivery: *12/28/2013*

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:

Roper Family Properties  
 c/o Frontage Funding, L.L.C.  
 2409 Never Bend Cv.  
 Austin, TX 78746

## COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*  
 Agent  
 Addressee

B. Received by (Printed Name): *J Mack*  
 C. Date of Delivery: *1-2*

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

7012 3050 0000 6871 6431

2. Article Number (Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7012 3050 0000 6871 6455

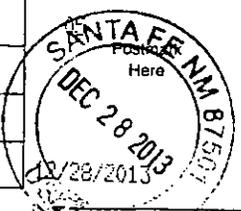
# U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

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

ROSWELL NM 88202 SPECIAL USE

Postage	\$ 0.46	0500
Certified Fee	\$3.10	
Return Receipt Fee (Endorsement Required)	\$2.55	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.11	



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

Harvey E. Yates Company,  
 Explorers Petroleum Corporation  
 and Spiral, Inc.  
 P.O. Box 1933  
 Roswell, NM 88202

PS Form 3800, August 2006

See Reverse for Instructions

7012 3050 0000 6871 6448

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

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

**SPECIAL USE**

Postage	\$ 0.46
Certified Fee	\$3.10
Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$ 6.11</b>



Sent To: The Marital Deduction QTIP Trust  
2108 Fountain Square  
Fon Worth, TX 76107

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:

VALCO, LLC and EAKO, LLC  
P.O. Box 1090  
Roswell, NM 88202

2. Article Number (Transfer from service label) **7012 3050 0000 6871 6448**

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*  Agent  Addressee

B. Received by (Printed Name): *D. Godwin*

C. Date of Delivery: *1-2-14*

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

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

4. Restricted Delivery? (Extra Fee)  Yes



## SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Marital Deduction QTIP Trust  
2108 Fountain Square  
Fon Worth, TX 76107

## COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*  Agent  Addressee

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

C. Date of Delivery: *12-29-13*

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) **7012 3050 0000 6871 6424**

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

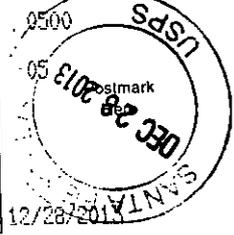
7012 3050 0000 6871 6448

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**SPECIAL USE**

Postage	\$ 0.46
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Return Receipt Fee (Endorsement Required)	\$2.55
Restricted Delivery Fee (Endorsement Required)	\$0.00
<b>Total Postage &amp; Fees</b>	<b>\$ 6.11</b>



Sent To: VALCO, LLC and EAKO, LLC  
P.O. Box 1090  
Roswell, NM 88202

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

PS Form 3800, August 2006 See Reverse for Instructions