

2014 Jun-8 P 3:02

Case No. 15,065

Oil Conservation Division
Case No. 3 15003
Exhibit No. 3

JAMES BRUCE
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November 22, 2013

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Trustee of the Edward R. Hudson Trust No. 4
222 West 4th Street, PH No. 5
Fort Worth, Texas 76102

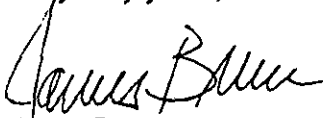
Ladies and gentlemen:

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 17, Township 19 South, Range 33 East, N.M.P.M., Lea County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, December 19, 2013, 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, December 12, 2013. 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



7012 3050 0000 6871 6189

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
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City, State, ZIP+4	Fort Worth, Texas 76102

PS Form 3800, August 2005 See Reverse for Instructions

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1. Article Addressed to: Trustee of the Edward R. Hudson Trust No. 4 222 West 4th Street, PH No. 5 Fort Worth, Texas 76102		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
2. Article Number (Transfer from service label)		7012 3050 0000 6871 6189	