

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

APPLICATION OF LEGEND NATURAL GAS III, LP  
FOR A NOMENCLATURE ORDER EXPANDING THE  
NORTH HAY HOLLOW-BONE SPRING POOL, EDDY  
COUNTY, NEW MEXICO.


Case No. 15,182

AFFIDAVIT OF NOTICE

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

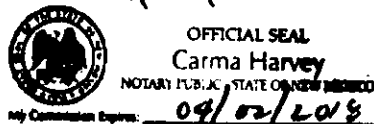
James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Legend Natural Gas III, LP.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners or operators entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners or 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 4 day of August, 2014 by  
James Bruce.

My Commission Expires: 04/02/2018



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

Oil Conservation Division  
Case No. 15182  
Exhibit No. 3

**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)

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

July 15, 2014

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

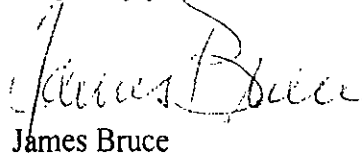
Ladies and gentlemen:

Enclosed is an application, filed with the New Mexico Oil Conservation Division by Legend Natural Gas III, LP, for expansion of the North Hay Hollow-Bone Spring Pool.

This matter is re-scheduled for hearing at 8:15 a.m. on Thursday, August 7, 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 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, July 31, 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 Legend Natural Gas III, LP

EXHIBIT

A

EXHIBIT A

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

Mewbourne Oil Company  
Suite 1020  
500 West Texas  
Midland, Texas 79701

Chevron U.S.A. Inc.  
1400 Smith Street  
Houston, Texas 77002

COG Operating LLC  
One Concho Center  
600 West Illinois  
Midland, Texas 79701

Devon Energy Production Company, L.P.  
333 West Sheridan  
Oklahoma City, Oklahoma 73102

7013 3020 0000 4642 4110

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
HOUSTON, TX 77002	
Postage	\$ \$0.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ \$6.49
Sent To: Chevron U.S.A. Inc. 1400 Smith Street Houston, Texas 77002 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  
One Concho Center  
600 West Illinois  
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7013 3020 0000 4642 4097

PS Form 3811, July 2013

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt

LEB

## 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:

Chevron U.S.A. Inc.  
1400 Smith Street  
Houston, Texas 77002

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7013 3020 0000 4642 4110

PS Form 3811, July 2013

Domestic Return Receipt

LEB

7013 3020 0000 4642 4097

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>	
MIDLAND, TX 79701	
Postage	\$ \$0.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ \$6.49
Sent To: COG Operating LLC One Concho Center 600 West Illinois Midland, Texas 79701 Street, Apt. No., or PO Box No. City, State, ZIP+4	
PS Form 3800, August 2006 See Reverse for Instructions	

7013 3020 0000 4642 4127

**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)

ARTESIA, NM 88210

Postage	\$	\$0.49
Certified Fee		\$3.70
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$6.89

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

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:  
Mewbourne Oil Company  
Suite 1020  
500 West Texas  
Midland, Texas 79701

2. Article Number  
(Transfer from service)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
[Signature]

C. Date of Delivery  
7/21

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

3. Service Type  
☒ Certified Mail® ☐ Priority Mail Express™  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

7013 3020 0000 4642 4127

**SENDER: COMPLETE THIS SECTION**

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- 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

2. Article Number  
(Transfer from service)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
[Signature]

C. Date of Delivery  
7-21-14

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

3. Service Type  
☒ Certified Mail® ☐ Priority Mail Express™  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 2013 Domestic Return Receipt

7013 3020 0000 4642 4127

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

MIDLAND, TX 79701

Postage	\$	\$0.49
Certified Fee		\$3.70
Return Receipt Fee (Endorsement Required)		\$2.70
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$6.89

Sent To  
Mewbourne Oil Company  
Suite 1020  
500 West Texas  
Midland, Texas 79701

PS Form 3800, August 2006 See Reverse for Instructions

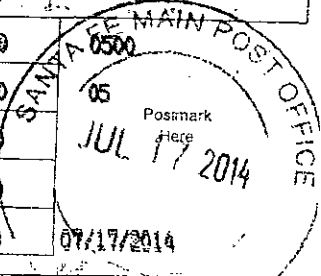
7013 3020 0000 4642 4103

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

OKLAHOMA CITY OK 73102

Postage	\$ 00.49
Certified Fee	\$3.30
Return Receipt Fee (Endorsement Required)	\$2.70
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 06.49



Send To  
 Devon Energy Production Company, L.P.  
 Street, Apt. No., 333 West Sheridan  
 or PO Box No. Oklahoma City, Oklahoma 73102  
 City, State, ZIP+4

PS Form 3800, August 2005 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:

Devon Energy Production Company, L.P.  
 333 West Sheridan  
 Oklahoma City, Oklahoma 73102

2. Article Number  
 (Transfer from service label)

7013 3020 0000 4642 4103

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
*David Canillo* ☐ 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  
☒ Certified Mail® ☐ Priority Mail Express™  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes