

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

**APPLICATION OF JLA RESOURCES COMPANY  
FOR A NON-STANDARD OIL SPACING AND  
PRORATION UNIT, UNORTHODOX OIL WELL  
LOCATION, AND COMPULSORY POOLING,  
LEA COUNTY, NEW MEXICO.**

Case No. 15,225

**AFFIDAVIT OF NOTICE**

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

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

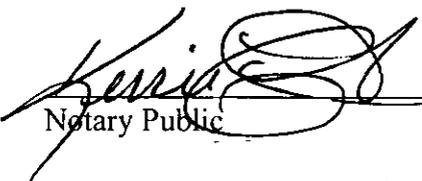
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for JLA Resources Company.
3. JLA Resources Company has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their correct 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 29<sup>th</sup> day of October, 2014 by James Bruce.



My Commission Expires

  
\_\_\_\_\_  
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)

October 1, 2014

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

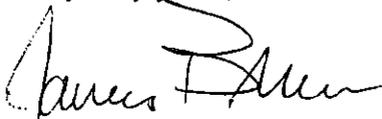
To: Persons on Exhibit A

Enclosed is a copy of an application for a non-standard well unit, compulsory pooling, and an unorthodox oil well location, filed with the New Mexico Oil Conservation Division by JLA Resources Company, regarding the SW/4NW/4 of Section 1 and the SE/4NE/4 of Section 2, Township 13 South, Range 37 East, N.M.P.M., Lea County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, October 30, 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 regulations to file a Pre-Hearing Statement no later than Thursday, October 23, 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 JLA Resources Company

EXHIBIT     A

EXHIBIT A

Rebekah Sarah Marler-Goins  
a/k/a Sarah Hess  
417 East Line Street  
Sapulpa, Oklahoma 74066

Sidney Roger Davis  
P.O. Box 29330  
Austin, Texas 78755

Sidney Roger Davis  
8902 Magna Carta Loop  
Austin, Texas 78754

Talmadge Leslie Fox  
Norman Leslie Fox  
572 Rio Grande Drive  
Bernalillo, New Mexico 87004

Anna Marguerite Bachman Chaffin  
1448 Acadia  
Simi Valley, California 93063

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)

**OFFICIAL USE**

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

Postmark Here

Sent To: Rebekah Sarah Marler-Goins  
 a/k/a Sarah Hess  
 417 East Line Street  
 Sapulpa, Oklahoma 74066

PS Form 3800, August 2006 See Reverse for Instructions

7013 3020 0000 4642 4431  
 0203

**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:  
 Talmadge Leslie Fox  
 Norman Leslie Fox  
 572 Rio Grande Drive  
 Bernalillo, New Mexico 87004

2. Article Number: 7013 3020 0000 4636 0265  
 (Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: X [Signature]  Agent  Addressee

B. Received by (Printed Name): Norman Leslie Fox C. Date of Delivery: 10-15-14

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 SLA

**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:  
 Rebekah Sarah Marler-Goins  
 a/k/a Sarah Hess  
 417 East Line Street  
 Sapulpa, Oklahoma 74066

2. Article Number: 7013 3020 0000 4642 4431  
 (Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: X [Signature]  Agent  Addressee

B. Received by (Printed Name): Rebekah Goins C. Date of Delivery: 10-18-14

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 SLA

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)

**OFFICIAL USE**

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

Postmark Here

Sent To: Talmadge Leslie Fox  
 Norman Leslie Fox  
 572 Rio Grande Drive  
 Bernalillo, New Mexico 87004

PS Form 3800, August 2006 See Reverse for Instructions

5920 9694 0000 0202 8700

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece or on the front if space permits.</li> </ul>		A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Taylor Foster</i>	
1. Article Addressed to:  Anna Marguerite Bachman Chaffin 1448 Acadia Simi Valley, California 93063		B. Received by (Printed Name) C. Date of Delivery 10-23-11	
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, July 2013		Domestic Return Receipt <i>JLA</i>	

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com	
<b>OFFICIAL USE</b>	
Postage \$	Postmark Here OCT 23 2011
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To	Sidney Roger Davis
Street, Apt. No., or PO Box No.	P.O. Box 29330
City, State, ZIP+4	Austin, Texas 78755
PS Form 3800, August 2006 See Reverse for Instructions	

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com	
<b>OFFICIAL USE</b>	
Postage \$	Postmark Here OCT 23 2011
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
Sent To	Anna Marguerite Bachman Chaffin
Street, Apt. No., or PO Box No.	1448 Acadia
City, State, ZIP+4	Simi Valley, California 93063
PS Form 3800, August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		A. Signature <input checked="" type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Sidney Roger Davis</i>	
1. Article Addressed to:  Sidney Roger Davis P.O. Box 29330 Austin, Texas 78755		B. Received by (Printed Name) C. Date of Delivery <i>Sidney Roger Davis</i>	
2. Article Number (Transfer from service label)		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, July 2013		Domestic Return Receipt <i>JLA</i>	

7013 3020 0000 020E E102

**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)

**OFFICIAL USE**

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

<b>Sent To</b>	
Street, Apt. No., or PO Box No.	Sidney Roger Davis 8902 Magna Carta Loop
City, State, ZIP+4	Austin, Texas 78754