

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

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

Case No 15,672

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

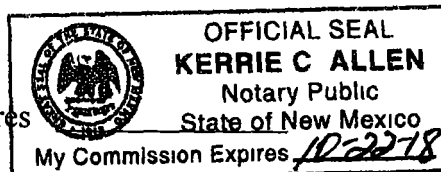
4 Notice of the application was provided to the interest owner at its last known address, by certified mail. Copies of the notice letter and certified return receipt are attached hereto as Attachment A

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 12th day of April 2017 by James Bruce

My Commission Expires




Notary Public

EXHIBIT

5

JAMES BRUCE
ATTORNEY AT LAW

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SANTA FE NEW MEXICO 87504

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(505) 982 7043 (Home)
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jamesbruce@iol.com

March 23 2017

CLEAR MAIL RETURN RECEIPT REQUEST

ConocoPhillips Company
600 North Dany Ashford
EC3 07 W335
Houston Texas 77079 1175

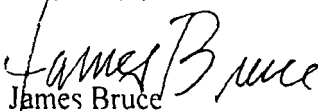
Ladies and gentlemen

Enclosed is a copy of an application for compulsory pooling filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company regarding a Wolfcamp well in the W½ of Section 18 Township 23 South Range 27 East NMPM Eddy County New Mexico

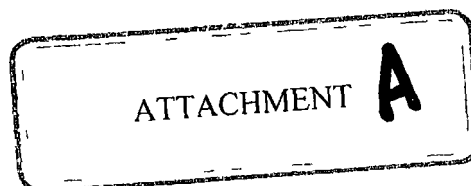
This matter is scheduled for hearing at 8:15 a.m. on Thursday April 13 2017 in Porter Hall at the Division's offices at 1220 South St. Francis Drive Santa Fe New Mexico 87505. You are not required to attend this hearing but as an owner of an interest who may be affected by the application you may appear 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 April 6 2017. 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 his or her 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.

Very truly yours

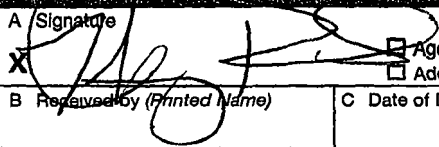

James Bruce

Attorney for Mewbourne Oil Company



7014 0510 0000 9535 2040

U.S. Postal Service™	
CERTIFIED MAIL™ RECEIPT	
<i>(Domestic Mail Only; No Insurance Coverage Provided)</i>	
For delivery information visit our website at www.usps.com	
Total postage Certified Fee Return Receipt Fee (Domestic Mail Required) Restricted Delivery Fee (Endorsement Required) Total postage & fees	\$ _____ \$ _____ \$ _____ \$ _____
Sent to Street Apt. No. or PO box No. City State ZIP+4	
ConocoPhillips Company 600 North Dairy Ashford LC 3 07 W335 Houston Texas 77079 1175	
PS Form 3800, August 2005 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3 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 		A Signature  <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1 Article Addressed to ConocoPhillips Company 600 North Dairy Ashford LC 3 07 W335 Houston Texas 77079 1175		B Received by (Printed Name) _____ C Date of Delivery _____ D Is delivery address different from Item 1? <input type="checkbox"/> Yes If YES enter delivery address below <input type="checkbox"/> No	
2 9590 9402 1676 6053 6591 43 7014 0510 0000 9535 2040		3 Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811 July 2015 PSN 7530 02 000 9053		Domestic Return Receipt	