



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON

Governor

Joanna Prukop

Cabinet Secretary

Mark E. Fesmire, P.E.

Director

Oil Conservation Division

March 22, 2006

Roberts SWD, LLC
P.O. Box 356
Hobbs, NM 88241

Roberts SWD, LLC
8301 Eunice Hwy
Hobbs, NM 88240

VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Re: Case No. 13710 : Application of the New Mexico Oil Conservation Division for an Order Requiring Roberts SWD, LLC to Plug One Well and Ordering Forfeiture of Applicable Financial Assurance in Event of Operator's Non-Compliance; Lea County, New Mexico

Ladies and Gentlemen:

You are hereby notified that the New Mexico Oil Conservation Division has filed the referenced Application (copy enclosed), seeking an Order requiring you to properly plug and abandon one well in Lea County, New Mexico, identified in said application.

A hearing on this application will take place before a Division hearing examiner on Thursday, May 11, 2006, at 8:15 a.m., in Porter Hall, First Floor, 1220 South St. Francis Drive in Santa Fe, New Mexico. At that hearing you will have an opportunity to show cause why an order should not be entered as requested in the Application.

You posted a surety bond, in the amount of \$7,500, secured by account no. 3058011549 at Wells Fargo Bank. That security will be forfeited if an order is entered as requested and you fail to comply therewith.

Inquiries concerning this application may be directed to the undersigned in the Santa Fe office of the Division at (505)-476-3450.

7002 3150 0004 4924 1332

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Sent To Roberts SWD, LLC	
Street, Apt. No. 8301 Eunice Hwy.	
City, State, ZIP+4 [®] Hobbs, NM 88240	
PS Form 3800, June 2002	

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1. Article Addressed to: Roberts SWD, LLC 8301 Eunice Hwy. Hobbs, NM 88240	B. Received by (Printed Name) C. Date of Delivery
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Receipt
OCD
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PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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<p>1. Article Addressed to: Roberts SWD, LLC P. O. Box 356 Hobbs, NM 88241</p>	<p>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.</p>
<p>2. Article Number (Transfer from service label) 7002 3150 0004 4924 1318</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, August 2001 Domestic Return Receipt

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