

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

**APPLICATION OF APACHE CORPORATION
FOR APPROVAL OF A WATERFLOOD
PROJECT AND TO QUALIFY THE PROJECT
FOR THE RECOVERED OIL TAX RATE, LEA
COUNTY, NEW MEXICO.**


Case No. 14,126

AFFIDAVIT OF NOTICE

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

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

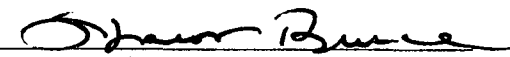
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Apache Corporation.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators and surface owners entitled to receive notice of the 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 Rule 1210.



James Bruce

SUBSCRIBED AND SWORN TO before me this 12th day of May, 2008 by James Bruce.

My Commission Expires: 3/14/09



Notary Public

Oil Conservation Division
Case No. _____
Exhibit No. 11

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

April 23, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

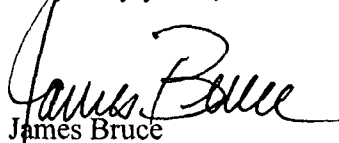
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application to institute a waterflood project, *etc.*, filed with the New Mexico Oil Conservation Division by Apache Corporation, regarding all or parts of Sections 4, 8, 9, 16, 17, and 21, Township 21 South, Range 37 East, N.M.P.M., Lea County, New Mexico. This matter is scheduled for hearing on May 15, 2008, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an offset operator or surface owner, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify (in writing) the Division, and the undersigned, by Thursday, May 8, 2008 if you intend to participate in the hearing.

Very truly yours,


James Bruce

Attorney for Apache Corporation

EXHIBIT

A

Exhibit A

Offset operators:

Chevron North America Exploration and Production
15 Smith Road
Midland, Texas 79705

Attention: Shelly Worrell

Campbell and Hedrick
Suite 405
203 West Wall
Midland, Texas 79701-5718

Attention: Ollie Hedrick

Exxon Mobil Corporation
U.S. Production Regulatory Affairs
396 West Greens Road
Houston, Texas 77067

Mirage Energy, Inc.
P.O. Box 760
Eunice, New Mexico 88231

Lewis B. Burleson, Inc.
P.O. Box 2479
Midland, TX 79702

Attention: Steven L. Burleson

Stephens & Johnson Operating Co.
Suite 300
811 Sixth Street
Wichita Falls, Texas 76307-2249

Attention: Bob Gilmore

Surface Owners:

Millard Deck Estate
c/o Bank of America, N.A., Trustee
of the Millard Deck Testamentary Trust,
P.O. Box 270
Midland, Texas

Oil and Gas Division
Commissioner of Public Lands
P.O. Box 1148
Santa Fe, New Mexico 87504

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Postage	\$	\$2.50
Certified Fee		\$2.65
Return Receipt Fee (Endorsement Required)		\$2.15
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$7.30

Sent To

Chevron North America Exploration and Production
15 Smith Road
Midland, Texas 79705
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:

Chevron North America Exploration and Production
15 Smith Road
Midland, Texas 79705

2. Article Number
(Transfer from service label)

7007 3020 0001 2490 5202

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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:

Campbell and Hedrick
Suite 405
203 West Wall
Midland, Texas 79701-5718

2. Article Number
(Transfer from service label)

7007 3020 0001 2490 5196

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☒ Agent ☐ Addressee
B. Received by (Printed Name) *[Name]* C. Date of Delivery *4/24/08*

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

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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Return Receipt Fee (Endorsement Required)		\$2.15
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$7.30

Sent To
Campbell and Hedrick
Suite 405
203 West Wall
Midland, Texas 79701-5718

PS Form 3800, August 2006

See Reverse for Instructions

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 MIDLAND TX 79702

Postage	\$ 2.50
Certified Fee	\$2.65
Return Receipt Fee (Endorsement Required)	\$2.15
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 7.30

Sent to Millard Deck Estate
c/o Bank of America, N.A., Trustee
of the Millard Deck Testamentary Trust,
P.O. Box 270
City, State, Zip Midland, Texas

PS Form 3800, August 2006 See Reverse for Instructions

7007 3020 0001 2490 5141

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:

Lewis B. Burleson, Inc.
 P.O. Box 2479
 Midland, TX 79702

2. Article Number
 (Transfer from service label)

7007 3020 0001 2490 5141

PS Form 3811, February 2004

Domestic Return Receipt

Ap - WF

102595-02-M-1540

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:

Millard Deck Estate
 c/o Bank of America, N.A., Trustee
 of the Millard Deck Testamentary Trust,
 P.O. Box 270
 Midland, Texas 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Barbara J. [Signature] C. Date of Delivery 4/22/08

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7007 3020 0001 2490 5141

PS Form 3811, February 2004

Domestic Return Receipt

Ap - WF

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Julie Trust C. Date of Delivery 4-20-08

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
 (Transfer from service label)

7007 3020 0001 2490 5141

Domestic Return Receipt

Ap - WF

102595-02-M-1540

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Certified Fee	\$2.65
Return Receipt Fee (Endorsement Required)	\$2.15
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 7.30

Sent to Lewis B. Burleson, Inc.
P.O. Box 2479
City, State, Zip Midland, TX 79702

PS Form 3800, August 2006 See Reverse for Instructions

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Certified Fee	\$	\$2.65
Return Receipt Fee (Endorsement Required)	\$	\$2.15
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$7.30

Sent To
Oil and Gas Division
Commissioner of Public Lands
Street, Apt. No.,
P.O. Box No.
City, State, ZIP+4
Santa Fe, New Mexico 87504

See Reverse for Instructions

PS Form 3800, August 2006

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:

Mirage Energy, Inc.
P.O. Box 760
Eunice, New Mexico 88231

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

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:

Oil and Gas Division
Commissioner of Public Lands
P.O. Box 1148
Santa Fe, New Mexico 87504

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? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number 7007 3020 0001 2490 5134

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

AP-UF

102595-02-M-1540

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? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2007 3020 0001 2490 5172

Domestic Return Receipt

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Return Receipt Fee (Endorsement Required)	\$	\$2.15
Restricted Delivery Fee (Endorsement Required)	\$	\$0.00
Total Postage & Fees	\$	\$7.30

Sent To
Mirage Energy, Inc.
P.O. Box 760
Eunice, New Mexico 88231
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

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Certified Fee		\$2.65
Return Receipt Fee (Endorsement Required)		\$2.15
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$7.30

Sent To: Stephens & Johnson Operating Co.
 Street, Apt. No., Suite 300
 811 Sixth Street
 Wichita Falls, Texas 76307-2249
 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:
 Exxon Mobil Corporation
 U.S. Production Regulatory Affairs
 396 West Greens Road
 Houston, Texas 77067

2. Article Number (Transfer from service label) 7007 3020 0001 2490 5189

PS Form 3811, February 2004 Domestic Return Receipt *Ap-WF* 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Craig Blanton* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *CRAIG BLANTON* Date of Delivery *4-28-08*
 C. Is delivery address different from return address? ☐ Yes ☐ No
 D. If YES, enter delivery address below

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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:
 Stephens & Johnson Operating Co.
 Suite 300
 811 Sixth Street
 Wichita Falls, Texas 76307-2249

2. Article Number (Transfer from service label) 7007 3020 0001 2490 5158

PS Form 3811, February 2004 Domestic Return Receipt *Ap-WF* 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Diana Walker* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *DIANA WALKER* Date of Delivery *APR 30 2008*
 C. Is delivery address different from item 1? ☐ Yes ☐ No
 D. If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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Certified Fee		\$2.65
Return Receipt Fee (Endorsement Required)		\$2.15
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$7.30

Sent To: Exxon Mobil Corporation
 U.S. Production Regulatory Affairs
 Street, Apt. No., 396 West Greens Road
 or PO Box No. Houston, Texas 77067
 City, State, Zip+4

PS Form 3800, August 2006 See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Craig Blanton* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *CRAIG BLANTON* Date of Delivery *4-28-08*
 C. Is delivery address different from return address? ☐ Yes ☐ No
 D. If YES, enter delivery address below

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes