

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF PECOS PRODUCTION
COMPANY FOR POOL CREATION AND
SPECIAL POOL RULES, LEA COUNTY,
NEW MEXICO.

Case No. 13125

AFFIDAVIT REGARDING NOTICE

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

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

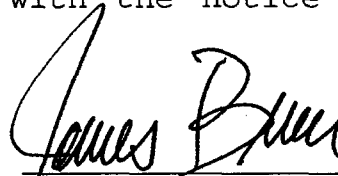
1. I am over the age of 18, and have personal knowledge of the matters set forth herein.

2. I am an attorney for Applicant.

3. Applicant 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.

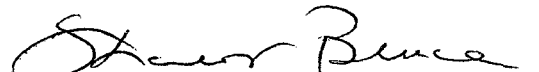
4. Notice of the Application was provided to the interest owners at their correct addresses by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.

5. Applicant has complied with the notice provisions of Division Rule 1207.



James Bruce

SUBSCRIBED AND SWORN TO before me this _____ 4th _____ day of August, 2003, by James Bruce.



Notary Public

My Commission Expires:

3/14/05

OIL CONSERVATION DIVISION

CASE NUMBER _____

EXHIBIT

8

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) 982-2151 (FAX)

jamesbruc@aol.com

July 18, 2003

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and Gentlemen:

Enclosed is an application for pool creation and special pool rules, filed with the New Mexico Oil Conservation Division by Pecos Production Company, regarding the SW¼ of Section 2, Township 16 South, Range 37 East, NMPM, Lea County, New Mexico. This application is scheduled to be heard at 8:00 a.m. on Thursday, August 7, 2003 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well and proposed pool, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are required to notify the Division, and the undersigned, by Friday, August 1, 2003, if you intend to enter an appearance and participate in the case.

Very truly yours,


James Bruce

Attorney for Pecos Production Company



EXHIBIT A

Calex Resources, Inc.
Suite 1145
4949 Greenville Ave.
Dallas, Texas 75206

Fasken Oil and Ranch, Ltd.
Suite 1800
303 West Wall
Midland, Texas 79701

Attention: Sally M. Kvasnicka

David Essex
P.O. Box 50577
Midland, Texas 79710

Gruy, LLC
Suite 250
8222 Douglas Avenue
Dallas, Texas 75225

Kerens Oil Ltd.
Suite 220
4514 Travis Street
Dallas, Texas 75205

Marshall & Winston, Inc.
P.O. Box 50880
Midland, Texas 79710

Mizell Resources, A Trust
Suite 810
3600 South Yosemite
Denver, Colorado 80237

P.J.W. Exploration & Production
Suite 446
415 West Wall
Midland, Texas 79701

Sheldon Smith
P.O. Box 3544
Midland, Texas 79702

John Keffler
Suite 313
110 West Louisiana
Midland, Texas 79701

Yosemite Creek Oil & Gas
Suite 810
3600 South Yosemite
Denver, Colorado 80237

Apache Corporation
Two Warren Place
Suite 1500
6120 South Yale
Tulsa, Oklahoma 74136

Attention: Mario R. Moreno, Jr.

THE FASKEN FOUNDATION
PO BOX 162786
AUSTIN, TX 78716-2786

RUBY NAOMA ANDERSON & SHIRLEY VAN BURNS
RIGHT OF SURVIVORSHIP
707 CLOVER PARK
ARLINGTON, TX 76013-1429

BROOKIE LEE GREEN
2814 EMERSON PLACE
MIDLAND, TX 79705

JOHN RICHARD ANDERSON
BOX 136
GAIL, TX 79738

CONNIE DELL WREN
1137 PASCAL PLACE
NORFOLK, VIRGINIA 23502

STANLEY EUGENE ANDERSON
212 WEST BOSTON AVE
RIDGECREST, CA 93555

KIMBERLY SCHAFFER HARRIS
HC 70, BOX 9A
LOVINGTON, NM 88260

MILTON WAYNE ANDERSON
24606 N V LAZY S LAND
ATHOL, IDALHO 83801

TAMARA SHAFFER MAXIE
HC 70, BOX 9A
LOVINGTON, NM 88260

MALCOLM S. ANDERSON
2010 46TH AVENUE, #N3
GREELEY, CO 80634

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CERTIFIED MAILTM RECEIPT
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OFFICIAL USE

Postage \$ 5.60 UNIT ID# 0500
Certified Fee 1.75
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required) 1.75
Total Postage & Fees \$ 4.65 07/19/03

Sent To
Street Apt. No. David Essex
P.O. Box 50577
City, State, ZIP+4 Midland, Texas 79710

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Restricted Delivery Fee (Endorsement Required) 1.75
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Restricted Delivery Fee (Endorsement Required) 1.75
Total Postage & Fees \$ 4.65 07/19/03

Sent To
Street Apt. No. David Essex
P.O. Box 50577
City, State, ZIP+4 Midland, Texas 79710

PS Form 3800, June 2002 See Reverse for Instructions

0002 0707 0000 9862 628E

MALCOLM S. ANDERSON
2010 46TH AVENUE, #N3
GREELEY, CO 80634

102595-02-M-1540

2926 2869 E000 OTOT E002

See Reverse for Instructions

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CERTIFIED MAILTM RECEIPT
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OFFICIAL USE

Postage \$	0.60	UNIT ID: 0500
Certified Fee	2.70	
Return Receipt Fee (Endorsement Required)	1.75	Postmark Here
Restricted Delivery Fee (Endorsement Required)	4.15	Mark: KRV14X
Total Postage & Fees \$		67/19/03

Sent To
 Mizell Resources, A Trust
 Suite 810
 3600 South Yosemite
 Denver, Colorado 80237
 City, State, ZIP+4

See Reverse for Instructions

9786 2869 0000 0707 0002

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:

Marshall & Winston, Inc.
 P.O. Box 50880
 Midland, Texas 79710

2. Article Number
 (Transfer from service label)

7003 1010 0003 6982 9809

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Jason Hernandez* C. Date of Delivery *7-23-03*

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 ☐ No

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:

Mizell Resources, A Trust
 Suite 810
 3600 South Yosemite
 Denver, Colorado 80237

2. Article Number
 (Transfer from service label)

7003 1010 0003 6982 9816

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *[Signature]* 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
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

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

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OFFICIAL USE

Postage \$	0.60	UNIT ID: 0500
Certified Fee	2.70	
Return Receipt Fee (Endorsement Required)	1.75	Postmark Here
Restricted Delivery Fee (Endorsement Required)	4.15	Mark: KRV14X
Total Postage & Fees \$	4.65	67/19/03

Sent To
 Marshall & Winston, Inc.
 P.O. Box 50880
 Midland, Texas 79710
 City, State, ZIP+4

See Reverse for Instructions

9786 2869 0000 0707 0002

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Postage	\$ 0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

07/19/03

Sent To

THE PASKEN FOUNDATION
PO BOX 162786
AUSTIN, TX 78716-2786

City, State, ZIP+4

PS Form 3800, June 2002 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:

THE PASKEN FOUNDATION
PO BOX 162786
AUSTIN, TX 78716-2786

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

7003 0500 0002 3972 3511

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:

Yosemite Creek Oil & Gas
Suite 810
3600 South Yosemite
Denver, Colorado 80237

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

7003 1010 0003 6982 9854

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:

THE PASKEN FOUNDATION
PO BOX 162786
AUSTIN, TX 78716-2786

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

7003 0500 0002 3972 3511

Domestic Return Receipt

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

☐ Registered ☒ Return Receipt for Merchandise

☐ Insured Mail ☐ O.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7003 1010 0003 6982 9854

Domestic Return Receipt

102595-02-M-1540

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Postage	\$ 0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

07/19/03

Sent To

Yosemite Creek Oil & Gas
Suite 810
3600 South Yosemite
Denver, Colorado 80237

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAILTM RECEIPT
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Postage \$ 0.60
Certified Fee 0.60
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required) 1.75
Total Postage & Fees \$ 4.65

Sent To
John Keffler
Suite 313
110 West Louisiana
Midland, Texas 79701
City, State, Zip+4

PS Form 3800, June 2002

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.

Article Addressed to:

John Keffler
Suite 313
110 West Louisiana
Midland, Texas 79701

2. Article Number
(Transfer from service label)

PS Form 3811, August 2001

7003 1010 0003 6982 9847

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.

Article Addressed to:

Gruy, LLC
Suite 250
8222 Douglas Avenue
Dallas, Texas 75225

2. Article Number
(Transfer from service label)

PS Form 3811, August 2001

7003 1010 0003 6982 9786

Domestic Return Receipt

102595-02-M-1540

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Postage \$ 0.60
Certified Fee 0.60
Return Receipt Fee (Endorsement Required) 2.30
Restricted Delivery Fee (Endorsement Required) 1.75
Total Postage & Fees \$ 4.65

Sent To

Gruy, LLC
Suite 250
8222 Douglas Avenue
Dallas, Texas 75225
City, State, Zip+4

PS Form 3800, June 2002

See Reverse for Instructions

U.S. Postal ServiceTM
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OFFICIAL USE

Postage \$ 0.60 UNIT ID: 0500
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. No., or PO Box No.
 Paskett Oil and Ranch, Ltd.
 Suite 1800
 303 West Mall
 Midland, Texas 79701
 City, State, ZIP+4
 Attention: Sally M. Kvaenicka

PS Form 3800, June 2002

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:

Paskett Oil and Ranch, Ltd.
 Suite 1800
 303 West Mall
 Midland, Texas 79701
 Attention: Sally M. Kvaenicka

2. Article Number (Transfer from service)

7003 1010 0003 6982 9885

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1549

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:

Calex Resources, Inc.
 Suite 1145
 4949 Greenville Ave.
 Dallas, Texas 75206

2. Article Number (Transfer from service)

7003 1010 0003 6982 9878

Postage Return Receipt

102595-02-M-1810

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *S. Cooper*
- B. Received by (Printed Name) *S. Cooper*
- C. Date of Delivery *7-23-03*
- D. Is delivery address different from item 1? ☐ Yes ☐ No

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

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

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OFFICIAL USE

Postage \$ 0.60 UNIT ID: 0500
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To

Calex Resources, Inc.
 Suite 1145
 4949 Greenville Ave.
 Dallas, Texas 75206
 City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

U.S. Postal ServiceTM
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OFFICIAL USE

UNIT ID: 0500

Postage \$ 0.60

Postmark Here

Clerk: KRVI4X

07/19/03

Total Postage & Fees \$ 4.65

SENT TO

JOHN RICHARD ANDERSON
 BOX 136
 GALL, TX 79738

Post. Apt. No.
 PO Box No.

City, State, ZIP+4

PS Form 3800, June 2002

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.

Article Addressed to:

JOHN RICHARD ANDERSON
 BOX 136
 GALL, TX 79738

A. Signature

☐ Agent

☐ Addressee

C. Date of Delivery

7/24/03

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 ☐ No

Article Number

7003 1010 0003 6982 9700

Transfer from service to

PS Form 3811, August 2001

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:

Sheldon Smith
 P.O. Box 3544
 Midland, Texas 79702

2. Article Number

(Transfer from service)

PS Form 3811, August 2001

Domestic Return Receipt

7003 1010 0003 6982 9830

102595-02-M-1540

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OFFICIAL USE

Postage \$ 0.60

Certified Fee 2.30

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

UNIT ID: 0500

Postmark Here

Clerk: KRVI4X

07/19/03

SENT TO

Sheldon Smith
 P.O. Box 3544
 Midland, Texas 79702

City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

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OFFICIAL USE

Date of Delivery: 07/19/03

Postage \$ 4.65

Certified Fee \$

Return Receipt Fee (Endorsement Required) \$

Restricted Delivery Fee (Endorsement Required) \$

Total Postage & Fees \$ 4.65

Sent To: Kerens Oil Ltd.
 Suite 220
 4514 Travis Street
 Dallas, Texas 75205
 City, State, ZIP+4

See Reverse for Instructions

6926 2869 E000 0701 E002

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:

CONNIE DELL WRN
 1137 PASCAL PLACE
 NORFOLK, VIRGINIA 23502

2. Article Number: 7003 1010 0003 6982 9717

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*

B. Received by (Printed Name): *[Signature]*

C. Date of Delivery: 7/21/03

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. ☐ Yes ☐ No

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

2. Article Number: 7003 1010 0003 6982 9793

(Transfer from service label)

102556-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]*

B. Received by (Printed Name): *[Signature]*

C. Date of Delivery: 07/19/03

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

If YES, enter delivery address below:

3. Service Type: ☐ Express Mail ☒ Return Receipt for Merchandise

☐ Certified Mail ☐ Registered ☐ Insured Mail ☐ C.O.D. ☐ Yes ☐ No

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

2. Article Number: 7003 1010 0003 6982 9717

(Transfer from service label)

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
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OFFICIAL USE

Date of Delivery: 07/19/03

Postage \$ 0.60

Certified Fee \$ 2.75

Return Receipt Fee (Endorsement Required) \$ 1.75

Restricted Delivery Fee (Endorsement Required) \$ 4.65

Total Postage & Fees \$ 4.65

Sent To: CONNIE DELL WRN
 1137 PASCAL PLACE
 NORFOLK, VIRGINIA 23502
 City, State, ZIP+4

See Reverse for Instructions

PS Form 3800, June 2002

6926 2869 E000 0701 E002

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OFFICIAL USE
 ARLINGTON, TX 76013-1429

Postage \$	0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	4.65

Sent To
 Street, Apt. No., or PO Box No. KIMBERLY SCHAEFER HARRIS
 HC 70, BOX 9A
 City, State, ZIP+4 LOVINGTON, NM 88260
 PS Form 3800, June 2002 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:

RUBY NAOMA ANDERSON & SHIRLEY VAN BURNS
 RIGHT OF SURVIVORSHIP
 707 CLOVER PARK
 ARLINGTON, TX 76013-1429

2. Article Number (Transfer from service label)
 PS Form 3811, August 2001

7003 0500 0002 3972 3528

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Ruby Naoma Anderson*
 B. Received by (Printed Name) C. Date of Delivery 7-15-03
 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 ☒ No

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:

KIMBERLY SCHAEFER HARRIS
 HC 70, BOX 9A
 LOVINGTON, NM 88260

2. Article Number (Transfer from service label)
 PS Form 3811, August 2001

7003 1010 0003 6982 9731

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Kimberly Schaefer Harris*
 B. Received by (Printed Name) C. Date of Delivery 07-19-03
 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 ☒ No

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE
 ARLINGTON, TX 76013-1429

Postage \$	0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	4.65

Sent To
 Street, Apt. No., or PO Box No. RUBY NAOMA ANDERSON & SHIRLEY VAN BURNS
 RIGHT OF SURVIVORSHIP
 707 CLOVER PARK
 City, State, ZIP+4 ARLINGTON, TX 76013-1429
 PS Form 3800, June 2002 See Reverse for Instructions

7003 0500 0002 3972 3528

7003 1010 0003 6982 9731

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Article Addressed to:

Postage \$ 4.65
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 4.65

UNIT NO: 0500
 Postmark Here
 Date: 07/19/03
 Clerk: KRUI4X

Sent To

Street, Apt. No., or PO Box No. MILTON WAYNE ANDERSON
 2406 N V LAZY S LAND
 City, State, ZIP+4 ATROL, IDALHO 83801

PS Form 3800, June 2002 See Reverse for Instructions

0746 2969 E000 0707 E002

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:

BROOKIE LEE GREEN
 2814 EMERSON PLACE
 MIDLAND, TX 79705

2. Article Number (Transfer from service)

7003 1010 0003 6982 9694

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Brookie Lee Green* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Brookie Lee Green* C. Date of Delivery *7-23-03*

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 ☐ No

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:

MILTON WAYNE ANDERSON
 2406 N V LAZY S LAND
 ATROL, IDALHO 83801

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Milton Wayne Anderson* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Milton Wayne Anderson* C. Date of Delivery *7-19-03*

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 ☐ No

2. Article Number (Transfer from service label)

7003 1010 0003 6982 9748

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 4.65
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$ 4.65

UNIT NO: 0500
 Postmark Here
 Date: 07/19/03
 Clerk: KRUI4X

Sent To

Street, Apt. No., or PO Box No. BROOKIE LEE GREEN
 2814 EMERSON PLACE
 MIDLAND, TX 79705

City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

4696 2969 E000 0707 E002

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com.

Postage	\$ 0.60
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To
 Apache Corporation
 Two Warren Place
 Suite 1500
 6120 South Yale
 Tulsa, Oklahoma 74136
 Attention: Mario R. Moreno, Jr.
 City, State, ZIP+4

PS Form 3800, June 2002 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:

Apache Corporation
 Two Warren Place
 Suite 1500
 6120 South Yale
 Tulsa, Oklahoma 74136
 Attention: Mario R. Moreno, Jr.

2. Article Number
 (Transfer from service label)

7003 1010 0003 6982 9861

PS Form 3811, August 2001

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:

Chesapeake Operating, Inc.
 P.O. Box 18496
 Oklahoma City, Oklahoma 73102

2. Article Number
 (Transfer from service label)

PS Form 3811, August 2001

Domestic Return Receipt

7003 1010 0003 6982 9892

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *Stan Allen* C. Date of Delivery *7/19/03*
 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 ☐ G.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *Stan Allen* C. Date of Delivery *7/19/03*
 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 ☐ G.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

7003 1010 0003 6982 9861

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1540

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com.

OFFICIAL USE
 OKLAHOMA CITY, OKLAHOTA
 JUL 1 2003
 POSTMARK
 CLERK: KRUI4X
 07/19/03

Postage	\$ 0.60
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To
 Chesapeake Operating, Inc.
 P.O. Box 18496
 Oklahoma City, Oklahoma 73102
 City, State, ZIP+4

See Reverse for Instructions

7003 1010 0003 6982 9892

CERTIFIED MAIL

JAMES BRUCE
P.O. BOX 1056
SANTA FE, NM 87504

JUL 28 2003

1ST NOTICE
2ND NOTICE UNDELIVERABLE AS ADDRESSED
RETURN AND FORWARDING ORDER ON FILE

1-02

7224 2829 0003 6982 9724



U.S. POSTAGE
PAID
SANTA FE, NM
87501
JUL 19, 03
AMOUNT

\$4.65
00028788-09

9264 93555

STANLEY EUGENE ANDERSON
212 WEST BOSTON AVE
RIDGECREST, CA 93555

RETURN RECEIPT
REQUESTED

U.S. Postal Service
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$ 0.60	UNIT ID: 0500 S467
Certified Fee	2.30	87501
Return Receipt Fee (Endorsement Required)	1.75	CRV14XX
Restricted Delivery Fee (Endorsement Required)		07/19/03
Total Postage & Fees	\$ 4.65	SANTA FE, NM

Sent To

STANLEY EUGENE ANDERSON
212 WEST BOSTON AVE
RIDGECREST, CA 93555
City, State, ZIP+4

PS Form 3800, June 2002

See Reverse for Instructions

Date: July 24, 2003
To: James Bruce
From: Stanley Eugene Anderson
Re: Contact me

Dear Mr. Bruce

My name is Stanley Eugene Anderson. My brother is Milton Wayne Anderson of Athol ID, my sister is Connie Del (Anderson) (Pulliam) Wrenn of Norfolk VA.

They have called me to ask about your communication regarding some properties that we own mineral rights to. Our father Roy Lawrence Anderson of Lovington NM (deceased) left the property mineral rights to the 3 of us share and share alike. I must be included in any correspondence concerning any of the properties. Since I moved 3 years ago I'm not certain that you have my current address. Add me to the list and send me any/all communications or documents or lease offers etc. that have been sent to them. My cousin Kimberly Harris and her sisters also have had some conversations and or communications about this same property (although there % is larger than ours.)

I hope to hear from you ASAP. Also can you advise me as to the correct procedure to make certain my name and address is on file with proper agencies that may have no record of my present address. I do have other property that is leased and receive royalties from them, so they must have a central office or agency that keep such records.

Thank you

Stanley E. Anderson

Stanley E. Anderson
6118 Quail Drive
Lake Isabella, CA 93240-9740

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) 982-2151 (FAX)

jamesbruce@aol.com

July 30, 2003

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

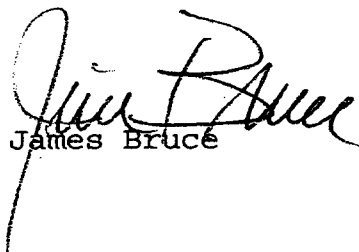
Stanley Eugene Anderson
6118 Quail Drive
Lake Isabella, California 93240

Dear Mr. Anderson:

Enclosed is the letter I attempted to send you at your old address. It concerns a hearing at the state Oil Conservation Division. As I understand the situation, interest ownership in the entire SW¼ of Section 2 is uniform, so the application does not affect the revenue you will receive from the well. However, we are required to give you notice of the hearing, and you have the right to object.

As to your address, there is no central governmental body which maintains addresses. Each oil company has to maintain its own records. I have forwarded your letter to Pecos Production Company, so they have the current address. The only way to give notice of a current address would be to record an affidavit with the County Clerk, setting forth your name and address. Enclosed is a list of addresses for the Lea County Clerk and Eddy County Clerk (in case you also own land there).

Very truly yours,


James Bruce

7003 1010 0003 6983 2514

U.S. Postal Service	
CERTIFIED MAIL RECEIPT	
(Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL USE	
Postage	\$ 0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65
UNIT 5380 SANTA FE NM 87501 Postmark JUL 30 2003 ELEC. REC'D 70 USPS 07/30/03	
Sent To	
Stanley Eugene Anderson	
6118 Quail Drive	
Lake Isabella, California 93240	
City, State, ZIP+4	