

Oil Conservation Division
Case No. _____
Exhibit No. 2

JAMES BRUCE
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October 14, 2009

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Walter Parker III
2710 Rockville Road
Fairfield, California 94534

Dear Sir:

Enclosed is an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding the NE¼SW¼ of Section 15, Township 20 South, Range 25 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, November 12, 2009, 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 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, November 5, 2009. 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 Mewbourne Oil Company

EXHIBIT

A

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:

Walter Parker III
2710 Rockville Road
Fairfield, California 94534

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Walter F. Parker

C. Date of Delivery

10/19/09

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)

7008 3230 0000 2324 2846

PS Form 3811, February 2004

Domestic Return Receipt

MOC - L 15K 102595-02-M-1540

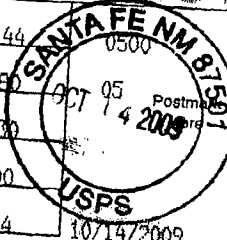
U.S. Postal ServiceTM
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FAIRFIELD CA 94534

OFFICIAL USE

Postage	\$	\$0.44
Certified Fee		\$2.80
Return Receipt Fee (Endorsement Required)		\$2.30
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$5.54



Sent To

Walter Parker III
Street, Apt. No.,
or PO Box No. 2710 Rockville Road
City, State, ZIP+4 Fairfield, California 94534

PS Form 3800, August 2006

See Reverse for Instructions