

BEFORE THE

OIL CONSERVATION DIVISION

NEW MEXICO DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES

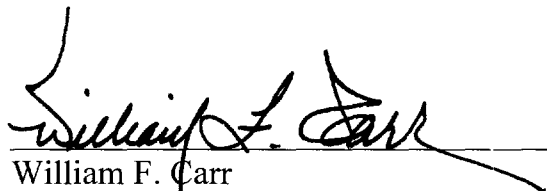
IN THE MATTER OF THE APPLICATION
OF ANSON GAS CORPORATION FOR
COMPULSORY POOLING, DIRECTIONAL
DRILLING AND AN UNORTHODOX
BOTTOMHOLE OIL WELL LOCATION,
LEA COUNTY, NEW MEXICO.

CASE NO. 11372

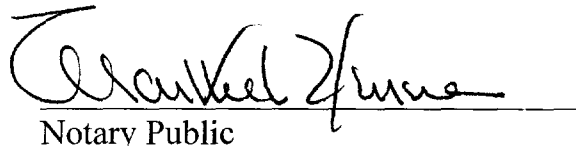
AFFIDAVIT

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

William F. Carr, attorney in fact and authorized representative of AnSon Gas Corporation, the Applicant herein, being first duly sworn, upon oath, states that in accordance with the notice provisions of Rule 1207 of the New Mexico Oil Conservation Division the Applicant has attempted to find the correct addresses of all interested persons entitled to receive notice of this application and that notice has been given at the addresses shown on Exhibit "A" attached hereto as provided in Rule 1207.


William F. Carr

SUBSCRIBED AND SWORN to before me this 20th day of September, 1995.


Notary Public

My Commission Expires:

August 19, 1999

EXHIBIT A

E. Lila Snow
Post Office Box 700987
Tulsa, OK 74170

CAMPBELL, CARR & BERGE, P.A.
LAWYERS

MICHAEL B. CAMPBELL
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POST OFFICE BOX 2208
SANTA FE, NEW MEXICO 87504-2208
TELEPHONE: (505) 988-4421
TELECOPIER: (505) 983-6043

August 30, 1995

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

E. Lila Snow
Post Office Box 700987
Tulsa, OK 74170

Re: Case No. 11372:
Amended Application of AnSon Gas Corporation for Compulsory Pooling,
Directional Drilling and an Unorthodox Bottomhole Location, Lea County,
New Mexico

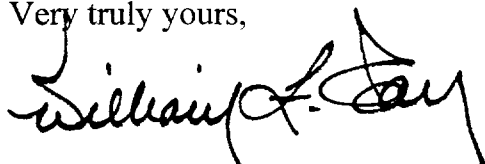
Dear Ms. Snow:

This letter is to advise you that AnSon Gas Corporation has filed the enclosed application with the New Mexico Oil Conservation Division in the above-referenced case.

This application has been set for hearing before a Division Examiner on September 21, 1995. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases have been requested by the Division (Memorandum 2-90) to file a Prehearing Statement substantially in the form prescribed by the Division. Prehearing statements should be filed by 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,



WILLIAM F. CARR
ATTORNEY FOR ANSON GAS CORPORATION
WFC:mlh

Enc.

cc: Al Swanson

P 176 015 403



Receipt for
Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

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Street and No. Post Office Box 700987	
P.O., State and ZIP Code Tulsa, OK 74170	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt (with or without certificate)	
Return Receipt (with or without certificate) Date and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date August 30, 1995	

PS Form 3800, June 1991

Is your RETURN ADDRESS completed on the reverse side?

SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: E. Lila Snow Post Office Box 700987 Tulsa, OK 74170		4a. Article Number P 176 015 403	
5. Signature (Addressee) 		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature (Agent) 		7. Date of Delivery 8-6-95	
PS Form 3811, December 1991 *U.S. GPO: 1993-352-714		8. Addressee's Address (Only if requested and fee is paid)	

DOMESTIC RETURN RECEIPT

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