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

APPLICATION OF CHESAPEAKE OPERATING INC. FOR AN UNORTHODOX OIL WELL LOCATION LEA COUNTY, NEW MEXICO.

CASE NO. 11894

CERTIFICATE OF MAILING AND COMPLIANCE WITH ORDER R-8054

STATE OF NEW MEXICO)

Output

W. Thomas Kellahin, being first duly sworn, hereby certifies that he is an attorney for the Applicant and responsible for notification in this matter and that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on November 11, 1997, he caused to be mailed by certified mail return-receipt requested the attached notice of this hearing and a copy of the first amended application for the above referenced case, at least twenty days prior to the hearing of this case set for December 4, 1997 to the parties shown in said application and as evidenced by the attached copies of return receipt cards and/or receipts of certified mailing, and that pursuant to Division Rule 1207, notice has been given at the correct addresses provided by such rule.

W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me this 3rd day of December, 1997, by W. Thomas Kellahin.

Lynda Kellahin, Notary Public

OFFICIAL SEAL
Lynda Kellahin

NOTARY PUBLIC
STATE OF NEW MEXICO
My Commission Expires: 6/14/2000

BEFORE THE
OIL CONSERVATION COMMISSION
Case No.11894 Exhibit No.
Submitted By:
Chesapeake Inc.

Hearing Date: December 4, 1997

Is your <u>RETURN ADDRESS</u> completed on the reverse side?													
6. Signature (Addressee or Agent) X D (D) M To () () () () () () () () () (5. Received BXIVITY MANAILS (35)			Artesia, NM 88210	109 South Fourth Street	106 Said F	Vates Petrolous	3. Article Addressed to:	deli	■ Wr	•Att December 4, 1997 11/11/97		SET Chesapeake Operating
Domestic Return Receipt	8. Addressee's Address (Only if requested and fee is paid)	7. Date of Delivery	☐ Return Receipt for Merchandise ☐ COD	☐ Express Mail ☐ Insured	☐ Registered ☐ Certified	4b. Service Type	1 21/24 8/3 170	4a. Article Number	Consult postmaster for fee.	number. 2. Restricted Delivery	does not 1. Addressee's Address	an return this extra fee):	I also wish to receive the
-	Thank	you fo	ru:	sing		ا etu	rn F	i ec	eipt	Se	rvic	e.	