BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF THUNDERBOLT PETROLEUM, LLC FOR APPROVAL OF A WATERFLOOD PROJECT AND TO QUALIFY THE PROJECT FOR THE RECOVERED OIL TAX RATE PURSUANT TO THE ENHANCED OIL RECOVERY ACT, EDDY COUNTY, NEW MEXICO. **Case No. 12,250**

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 stated 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 mailing them, by certified mail, copies of the Application. 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 and Form C-108.

James Bruce

SUBSCRIBED AND SWORN TO before me this 20th day of October, 1999, by James Bruce.

Notary Public

My Commission Expires:
3/14/2001

EXHIBIT 10

CASE NO.

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

3304 CAMINO LISA
SANTA FE, NEW MEXICO 87501

(505) 982-2043
(505) 982-2151 (FAX)

September 21, 1999

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Commissioner of Public Lands
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

Anadarko Petroleum Corporation
P.O. Box 1330
Houston, Texas 77251

Webb Oil Co.
P.O. Box 1124
Artesia, New Mexico 88211

Sabre Operating, Inc.
P.O. Box 4848
Wichita Falls, Texas 76308

Chi Operating, Inc.
P.O. Box 1799
Midland, Texas 79702

GP II Energy, Inc.
Suite 208
731 West Wadley
Midland, Texas 79705

George A. Denton
P.O. Box 1252
Artesia, New Mexico 88211

Ladies and Gentlemen:

Enclosed is a copy of an application for a waterflood project, etc., filed with the New Mexico Oil Conservation Division by Thunderbolt Petroleum, LLC, regarding the SW¼ of Section 16, Township 18 South, Range 29 East, NMPM, Eddy County, New Mexico. The application will be heard at 8:15 a.m. on Thursday, October 21, 1999, at the Division's offices at 2040 South Pacheco Street, Santa Fe, New Mexico 87505. As an offset interest owner or surface owner, 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.

Very truly yours,

James Bruce

James Bruce

Attorney for Thunderbolt Petroleum, LLC

EXHIBIT
A

PS Form **3800**, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to: Commissioner of Public Lands
Street: 310 Old Santa Fe Trail
Santa Fe, New Mexico 87501
Post Office, State, & ZIP Code

Postage	$ 1.21
Certified Fee	1.40
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$ 2.61
Postmark or Date	SEP 21 1999

USPS - 87501
SANTA FE NM

Z 261 150 529

SENDER:
- ☐ Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- ☐ 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. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

George A. Denton
P.O. Box 1252
Artesia, New Mexico 88211

4a. Article Number: Z 261 150 532

4b. Service Type
☐ Registered ☑ Certified
☐ Express Mail ☐ Insured
☑ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: 9-24-99

5. Received By: *(Print Name)* GEORGE DENTON

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your **RETURN ADDRESS** completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:
- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- 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. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Commissioner of Public Lands
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

4a. Article Number: Z 261 150 529

4b. Service Type
☐ Registered ☑ Certified
☐ Express Mail ☐ Insured
☑ Return Receipt for Merchandise ☐ COD

7. Date of Delivery: SEP 22 1999

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature: *(Addressee or Agent)*
X

SANTA FE NM
USPS - 87501

PS Form **3811**, December 1994 102595-98-B-0229 Domestic Return Receipt

Is your **RETURN ADDRESS** completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form **3800**, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to: George A. Denton
Street: P.O. Box 1252
Artesia, New Mexico 88211
Post Office, State, & ZIP Code

Postage	$ 1.21
Certified Fee	1.40
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$ 2.61
Postmark or Date	SEP 22 1999

USPS - 87501
SANTA FE NM

Z 261 150 532

PS Form **3800**, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to GP II Energy, Inc.
Street & No. Suite 208 731 West Wadley
Post Office, State, & ZIP Code Midland, Texas 79705

Postage	$ 1.21
Certified Fee	1.40
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$ 3.86
Postmark or Date	SEP 21 1995

USPS - 87501

Z 261 150 535

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:
- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:
Chi Operating, Inc.
P.O. Box 1799
Midland, Texas 79702

4a. Article Number Z 261 150 531
4b. Service Type
☐ Registered ☑ Certified
☐ Express Mail ☐ Insured
☑ Return Receipt for Merchandise ☐ COD
7. Date of Delivery
8. Addressee's Address *(Only if requested and fee is paid)*
5. Received By: *(Print Name)*
6. Signature *(Addressee or Agent)*

MIDLAND, TX MOWN STA SEP 22 1995 USPS

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

PS Form **3800**, April 1995

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail (See reverse)

Sent to Chi Operating, Inc.
Street, P. O. Box 1799
Post Office, State, & ZIP Code Midland, Texas 79702

Postage	$ 1.21
Certified Fee	1.40
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$ 3.86
Postmark or Date	SEP 21 1995

USPS - 87501

Z 261 150 534

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:
- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:
Sabre Operating, Inc.
P.O. Box 4848
Wichita Falls, Texas 76308

4a. Article Number Z 261 150 534
4b. Service Type
☐ Registered ☑ Certified
☑ Express Mail ☐ Insured
☑ Return Receipt for Merchandise ☐ COD
7. Date of Delivery
8. Addressee's Address *(Only if requested and fee is paid)*
5. Received By: *(Print Name)*
6. Signature *(Addressee or Agent)*

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

PS Form **3800**, April 1995

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent Anadarko Petroleum Corporation

Street P.O. Box 1330

Houston, Texas 77251

Post Office, State, & ZIP Code

Postage	$ 1.21
Certified Fee	1.40
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.25
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$ 3.86
Postmark & Date	SEP 21 1999

USPS - 87501

Z 261 150 533

SENDER:

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Anadarko Petroleum Corporation
P.O. Box 1330
Houston, Texas 77251

4a. Article Number Z 261 150 533

4b. Service Type
☐ Registered ☑ Certified
☐ Express Mail ☐ Insured
☑ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: *(Print Name)*

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)*

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

SENDER:

- ☐ Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b.
- ☐ 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. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

Webb Oil Co.
P.O. Box 1124
Artesia, New Mexico 88211

4a. Article Number Z 261 150 530

4b. Service Type
☐ Registered ☑ Certified
☐ Express Mail ☐ Insured
☑ Return Receipt for Merchandise ☐ COD

7. Date of Delivery 9-24-99

5. Received By: *(Print Name)* SARAH WEBB

8. Addressee's Address *(Only if requested and fee is paid)*

6. Signature *(Addressee or Agent)* Sarah Webb

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form **3800**, April 1995

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent Webb Oil Co.

Street P.O. Box 1124

Artesia, New Mexico 88211

Post Office, State, & ZIP Code

Postage	$ 1.21
Certified Fee	1.40
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	SARAH FETNER
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	$ 2.61
Postmark & Date	SEP 24 1999

USPS - 87501

Z 261 150 530

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or additional services. Complete items 3, 4a, al
- ☐ 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 ser (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

3. Article Addressed to:

GP II Energy, Inc.
Suite 208
731 West Wadley
Midland, Texas 79705

4a. Article Number
Z 261 150 535

4b. Service Type
☐ Registered ☑ Certified
☐ Express Mail ☐ Insured
☑ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
9-29-99

5. Received By: *(Print Name)*
Marie Pavitte

6. Signature *(Addressee or Agent)*

8. Addressee's Address *(Only if requested and fee is paid)*

PS Form **3811**, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 261 150 534

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail *(See reverse)*

Sent to: Sabre Operating, Inc.
Street P.O. Box 4848
Wichita Falls, Texas 76308
Post Office, State, & ZIP Code

Postage	$ 1.21
Certified Fee	1.40
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.25
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	$ 3.86
Postmark or Date	OCT 21 1999

USPS 79501

PS Form **3800**, April 1995