

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF OCEAN ENERGY,  
INC. FOR COMPULSORY POOLING,  
LEA COUNTY, NEW MEXICO.

Case No. 12,872

AFFIDAVIT REGARDING NOTICE

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

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

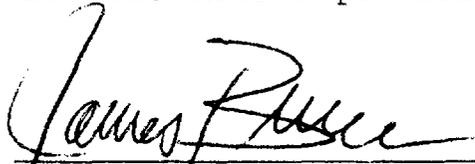
1. I am over the age of 18, and have personal knowledge of the matters set forth herein.

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 owner at its correct address by certified mail. Copies of the notice letter and certified return receipt are attached hereto as Exhibit A.

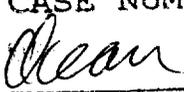
5. Applicant has complied with the notice provisions of Division Rule 1207.

  
\_\_\_\_\_  
James Bruce

SUBSCRIBED AND SWORN TO before me this 28th day of May, 2002, by James Bruce.

  
\_\_\_\_\_  
Notary Public

My Commission Expires:  
3/14/2005

OIL CONSERVATION DIVISION  
CASE NUMBER \_\_\_\_\_  
 EXHIBIT 4

**JAMES BRUCE**  
ATTORNEY AT LAW

POST OFFICE BOX 1056  
SANTA FE, NEW MEXICO 87504

324 MCKENZIE STREET  
SANTA FE, NEW MEXICO 87501

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

May 8, 2002

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

Exxon Mobil Corporation  
Mobil Producing Texas & New Mexico Inc.  
P.O. Box 4697  
Houston, Texas 77210-4697

Attention: Paul Keffer

Ladies and Gentlemen:

Enclosed is an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Ocean Energy, Inc., regarding the E $\frac{1}{2}$  of Section 8, Township 17 South, Range 35 East, NMPM, Lea County, New Mexico. This application is scheduled to be heard at 8:00 a.m. on Thursday, May 30, 2002 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the proposed well, 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, May 24, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,



James Bruce

Attorney for Ocean Energy, Inc.



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

7001 2510 0006 5981 2751

Postage	\$ 0.50	
Certified Fee	2.00	
Return Receipt Fee (Endorsement Required)	1.50	
Restricted Delivery Fee (Endorsement Required)	4.17	
<b>Total Postage &amp; Fees</b>	<b>\$ 8.17</b>	

Sent To: Exxon Mobil Corporation  
 Mobil Producing Texas & New Mexico Inc.  
 Street, Apt. No., or PO Box No.: P.O. Box 4697  
 City, State, ZIP+4: Houston, Texas 77210-4697

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature                  X GEE <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span></p> <p>B. Received by (Printed Name) _____ C. Date of Delivery                  _____ MAY 13 2007</p> <p>D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes                  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Exxon Mobil Corporation                  Mobil Producing Texas &amp; New Mexico Inc.                  P.O. Box 4697                  Houston, Texas 77210-4697</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number                  (Transfer from service label) 7001 2510 0006 5981 2751</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

*CEI*