

CASE NO. 22672

**APPLICATION OF MEWBOURNE OIL COMPANY FOR COMPULSORY POOLING
EDDY COUNTY, NEW MEXICO**

MEWBOURNE OIL COMPANY'S EXHIBIT LIST

1. Application and Proposed Notice
2. Landman's Affidavit
3. Geologist's Affidavit
4. Affidavit of Mailing
5. Publication Affidavit
6. Pooling Checklist

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

**APPLICATION OF MEWBOURNE OIL COMPANY
FOR COMPULSORY POOLING, EDDY COUNTY,
NEW MEXICO.**

Case No. 22672**APPLICATION**

Mewbourne Oil Company applies for an order pooling all uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S $\frac{1}{2}$ SW $\frac{1}{4}$ of Section 28 and the S $\frac{1}{2}$ S $\frac{1}{2}$ of Section 29, Township 20 South, Range 27 East, N.M.P.M., Eddy County, New Mexico, and in support thereof, states:

1. Applicant is an interest owner in the S $\frac{1}{2}$ SW $\frac{1}{4}$ of Section 28 and the S $\frac{1}{2}$ S $\frac{1}{2}$ of Section 29, and has the right to drill a well thereon.
2. Applicant proposes to drill the Pinta 28/29 B3NM Fed. Com. Well No. 1H to a depth sufficient to test the Bone Spring formation, and to dedicate the S $\frac{1}{2}$ SW $\frac{1}{4}$ of Section 28 and the S $\frac{1}{2}$ S $\frac{1}{2}$ of Section 29 to the well. The well is a horizontal well, with a first take point in the SE $\frac{1}{4}$ SW $\frac{1}{4}$ of Section 28 and a last take point in the SW $\frac{1}{4}$ SW $\frac{1}{4}$ of Section 29.
3. Applicant has in good faith sought to obtain the voluntary joinder of all other mineral interest owners in the S $\frac{1}{2}$ SW $\frac{1}{4}$ of Section 28 and the S $\frac{1}{2}$ S $\frac{1}{2}$ of Section 29 for the purposes set forth herein.
4. Although applicant attempted to obtain voluntary agreements from all mineral interest owners to participate in the drilling of the well or to otherwise commit their interests to the well, certain interest owners have failed or refused to join in dedicating their interests. Therefore, applicant seeks an order pooling all mineral interest owners in the Bone Spring

EXHIBIT |

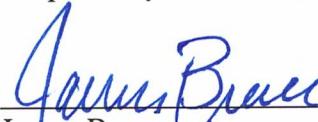
formation underlying S $\frac{1}{2}$ SW $\frac{1}{4}$ of Section 28 and the S $\frac{1}{2}$ S $\frac{1}{2}$ of Section 29, pursuant to NMSA 1978 §70-2-17.

5. The pooling of all mineral interest owners in the Bone Spring formation underlying the S $\frac{1}{2}$ SW $\frac{1}{4}$ of Section 28 and the S $\frac{1}{2}$ S $\frac{1}{2}$ of Section 29 will prevent the drilling of unnecessary wells, prevent waste, and protect correlative rights.

WHEREFORE, applicant requests that, after notice and hearing, the Division enter its order:

- A. Pooling all mineral interest owners in the Bone Spring formation underlying the S $\frac{1}{2}$ SW $\frac{1}{4}$ of Section 28 and the S $\frac{1}{2}$ S $\frac{1}{2}$ of Section 29;
- B. Designating applicant as operator of the well;
- C. Considering the cost of drilling, completing, and equipping the well, and allocating the cost among the well's working interest owners;
- D. Approving actual operating charges and costs charged for supervision, together with a provision adjusting the rates pursuant to the COPAS accounting procedure; and
- E. Setting a 200% charge for the risk involved in drilling, completing, and equipping the well in the event a working interest owner elects not to participate in the well.

Respectfully submitted,



James Bruce
Post Office Box 1056
Santa Fe, New Mexico 87504
(505) 982-2043

Attorney for Mewbourne Oil Company

Application of Mewbourne Oil Company for compulsory pooling, Eddy County, New Mexico.

Mewbourne Oil Company seeks an order pooling all uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S/2SW/4 of Section 28 and the S/2S/2 of Section 29, Township 20 South, Range 27 East, NMPM. The unit will be dedicated to the Pinta 28/29 B3NM Fed. Com. Well No. 1H, a horizontal well with a first take point in the SE/4SW/4 of Section 28 and a last take point in the SW/4SW/4 of Section 29. Also to be considered will be the cost of drilling, completing, and equipping the well and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the well, and a 200% charge for the risk involved in drilling, completing, and equipping the well. The unit is located approximately 8-1/2 miles southeast of Lakewood, New Mexico.

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

IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION FOR
THE PURPOSE OF CONSIDERING:

APPLICATION OF MEWBOURNE OIL COMPANY
FOR COMPULSORY POOLING, EDDY COUNTY,
NEW MEXICO.

Case No. 22672

SELF-AFFIRMED STATEMENT OF BRAXTON BLANDFORD

Braxton Blandford deposes and states:

1. I am a landman for Mewbourne Oil Company ("Mewbourne"), and have personal knowledge of the matters stated herein. My educational and work experience is as follows:

I graduated from Texas Tech University in May 2021 from the Energy Commerce program in the Rawls College of Business. I started working full time for Mewbourne Oil Company June 21, 2021, following my internship in the Summer of 2020.

2. Pursuant to Division Rules, the following information is submitted in support of the compulsory pooling application filed herein:

3. The purpose of this application is to force pool working interest owners into the Bone Spring horizontal spacing unit described below, and in wells to be drilled in the unit.

4. No opposition is expected because the interest owners being pooled have been contacted regarding the proposed wells, but have failed or refused to voluntarily commit their interests to the well.

5. A plat outlining the units being pooled is submitted as Attachment A. Mewbourne seeks orders pooling all mineral interests in the Bone Spring formation underlying a horizontal spacing unit comprised of the S/2 SW/4 of Section 28 and the S/2 S/2 of Section 29, Township 20 South, Range 27 East, NMPM. The unit will be dedicated to the Pinta 28/29 B3NM Fed Com. Well No. 1H, with a first take point in the SE/4 SW/4 of Section 28 and a last take point in the SW/4 SW/4 of Section 27. There is no depth severance in the Bone Spring formation.

A form C-102 for the well is also submitted as part of Attachment A.

EXHIBIT
2

6. The parties being pooled, and their interests, are set forth in Attachment B. Attachment C is a summary of communications and a sample copy of the proposal letters sent to the uncommitted working interest owners.

7. Some interest owners may be unlocatable. In order to locate the interest owners Mewbourne examined the records of Eddy County and the Bureau of Land Management records. In addition, we conducted internet searches using Drilling Info, Accurint, and generic name searches on Google.

Mewbourne has made a good faith effort to locate and obtain the voluntary joinder of the working interest owners in the proposed well.

8. Mewbourne has the right to pool the overriding royalty owners in the well unit.

9. Attachment D contains the Authorization for Expenditure for the proposed well. The estimated costs of the wells set forth therein are fair and reasonable, and comparable to the costs of other wells of similar depth and length drilled in this area of Eddy County.

10. Mewbourne requests overhead and administrative rates of \$8000/month for a drilling well and \$800/month for a producing well. These rates are fair, and comparable to the rates charged by other operators for wells of this type in this portion of Eddy County. They are also the rates set forth in the Joint Operating Agreement for the well unit. Mewbourne requests that these rates be adjusted periodically as provided in the COPAS Accounting Procedure.

11. Mewbourne requests that the maximum cost plus 200% risk charge be assessed against non-consenting working interest owners.

12. Mewbourne requests that it be designated operator of the well.

13. The attachments to this affidavit were prepared by me, or compiled from company business records.

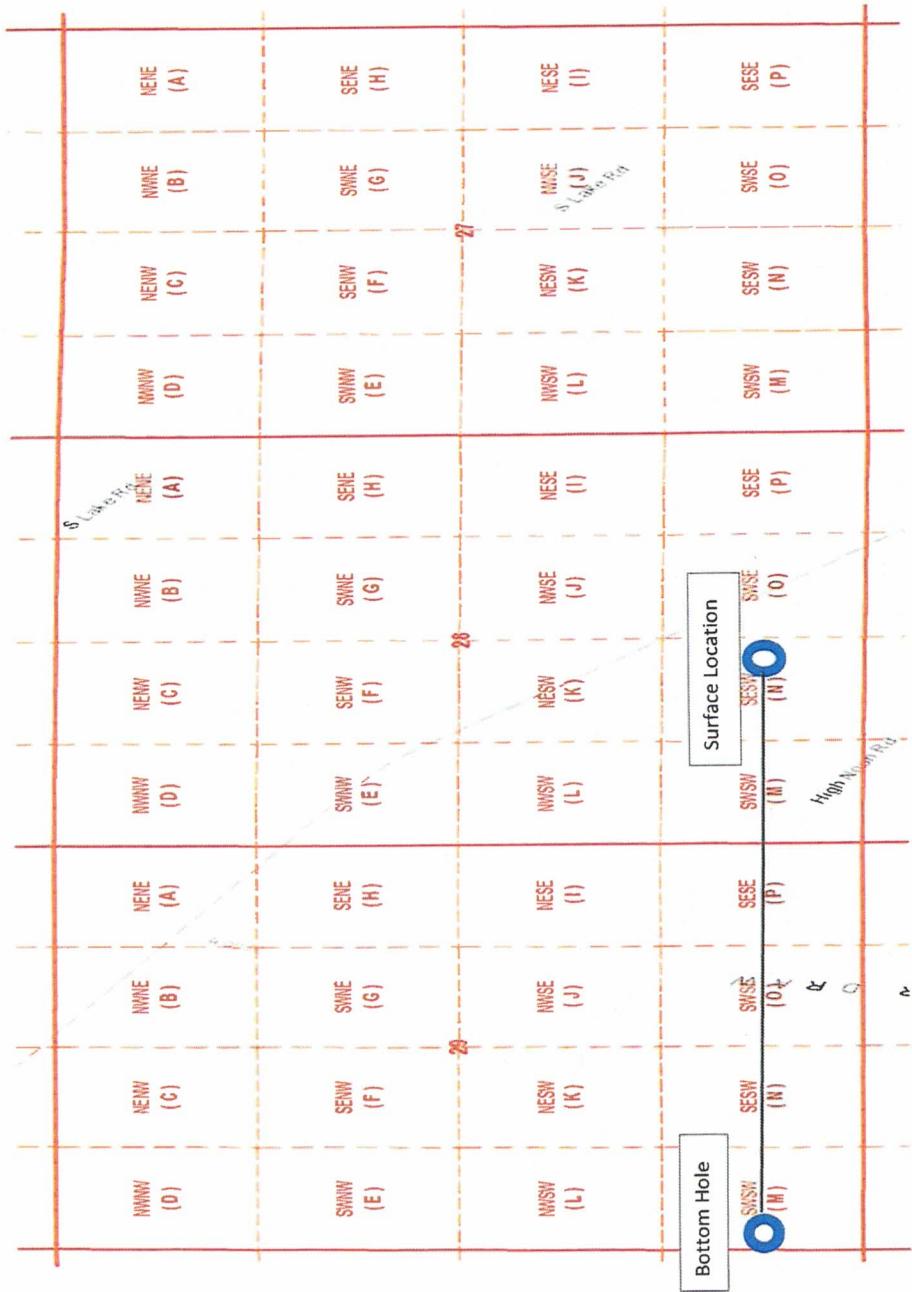
14. The granting of this application is in the interests of conservation and the prevention of waste.

I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 14 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date: 4/6/2022

Braxton Blandford
Braxton Blandford

Pinta 28-29 B3NM FED COM #1H



ATTACHMENT A

District I
1625 N. French Dr., Hobbs, NM 88240
Phone: (575) 393-6161 Fax: (575) 393-0720

District II
811 S. First St., Artesia, NM 88210
Phone: (575) 748-1283 Fax: (575) 748-9720

District III
1000 Rio Brazos Road, Aztec, NM 87410
Phone: (505) 334-6178 Fax: (505) 334-6170

District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102

Revised August 1, 2011
Submit one copy to appropriate
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

1 API Number		2 Pool Code	3 Pool Name
4 Property Code	5 Property Name PINTO 28/29 B3NM FED COM		6 Well Number 1H
7 OGRID NO.	8 Operator Name MEWBURNE OIL COMPANY		9 Elevation 3209'

10 Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet From the	East/West line	County
N	28	20S	27E		970	SOUTH	2540	WEST	EDDY

11 Bottom Hole Location If Different From Surface

UL or lot no. M	Section 29	Township 20S	Range 27E	Lot Idn 440		Feet from the SOUTH	North/South line 100	Feet from the WEST	East/West line EDDY	County
12 Dedicated Acres	13 Joint or Infill	14 Consolidation Code	15 Order No.							

No allowable will be assigned to this completion until all interest have been consolidated or a non-standard unit has been approved by the division.

GEODETIC DATA		CORNER DATA		OPERATOR CERTIFICATION	
NAD 83 GRID - NM EAST		NAD 83 GRID - NM EAST		I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.	
SURFACE LOCATION N: 560156.1 - E: 555712.3 LAT: 32.5399183° N LONG: 104.2866859° W		A: FOUND BRASS CAP "1942" N 559221.5 - E 547863.1 B: FOUND BRASS CAP "1942" N 561873.2 - E 547901.5 C: FOUND BRASS CAP "1942" N 564526.0 - E 547939.6 D: CALCULATED CORNER N 564525.5 - E 553189.8 E: FOUND BRASS CAP "1942" N 564496.2 - E 555846.6 F: FOUND BRASS CAP "1942" N 564470.0 - E 558504.7		G: FOUND BRASS CAP "1942" N 561826.2 - E 558488.9 H: FOUND BRASS CAP "1942" N 559153.2 - E 558477.3 I: FOUND BRASS CAP "1942" N 559185.0 - E 555823.3 J: FOUND BRASS CAP "1934" N 559216.9 - E 553169.5 K: FOUND BRASS CAP "1942" N 559219.2 - E 550516.0 L: FOUND BRASS CAP "1942" N 561871.2 - E 553179.3	
BOTTOM HOLE N: 559661.3 - E: 547969.4 LAT: 32.5385650° N LONG: 104.3118125° W				Signature _____ Date _____ Printed Name _____ E-mail Address _____	
				© 18 SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.	
				04/05/2022 Date of Survey Signature and Seal of Professional Surveyor  19680 Certificate Number (H)	

© N 89°59'41" W 5251.54' N 89°22'03" W 2657.62' N 89°26'05" W 2658.79'

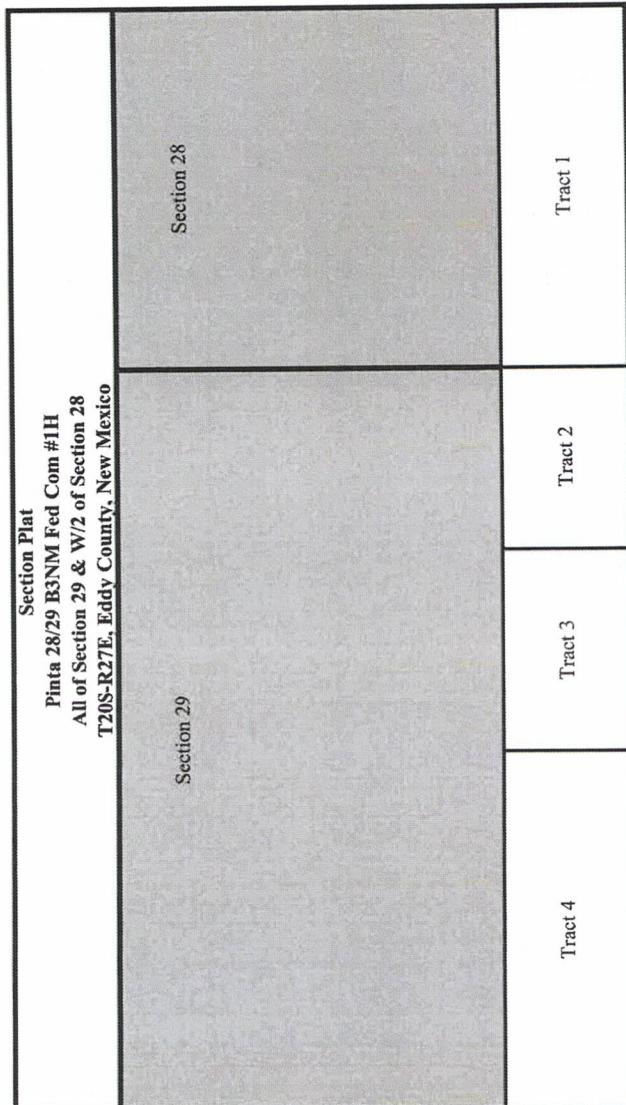
© N 00°49'19" E 2653.70' N 00°49'52" E 2652.59' N 00°49'52" E 2652.59'

© N 00°12'48" E 2654.96' N 00°13'36" E 2654.99' N 00°14'56" E 2673.63' N 00°20'27" E 2644.50'

© N 80°56'55" W 2653.54' N 80°57'24" W 2654.14' N 80°18'30" W 2654.73' N 80°18'52" W 2654.83' N 80°18'52" W 2654.83'

© 29 28 970' 2540'

© B.H. 440' 100' (K) (J) (L) (D) (E)



Tract 1: S/2 SW/4 of Section 28-Fed Lease NMNM-081606

Mewbourne Oil Company
A&S Operating, Inc
SEP Permian LLC

Tract 2: SE/4 SE/4 of Section 29-Fed Lease NMNM-084711

COG Operating LLC
OXY USA WTP LP

ATTACHMENT *B*

Tract 3: SW/4 SE/4 of Section 29-Fee

Mewbourne Oil Company

Panhandle Properties LLC

Featherstone Development Corporation

Alliance Land and Minerals LLC

OXY USA WTP LP

NimTex Energy, LLC

*The Heirs of Myrtle Stubblefield

* Possibly: Shirley Hoyt Carole Sheats, Kathryn Sheats Johnson, Lena Mae Ellis, Carol Mae Davis, Marie Cleveland George, Edna Laura Criswell Blankenship, Mary Josephine Criswell Lee, John Claude Criswell, Lejee Harold Criswell, The Heirs or Devises of John C Moore, Bobbie S Davis, Velma Walters Moore, Hettie Patton Davis, Billie Beth Moore, Scott Martin Carter, Mary Christi Carter Daniels, Carl Mack Carter

RECAPITULATION FOR PINTA 28/29 B3 NM FED COM #1H

Tract Number	Number of Acres Committed	Percentage of Interest in Communitized Area
1	80	33.333333%
2	40	16.666667%
3	40	16.666667%
4	80	33.333333%
TOTAL	240	100.000000%

TRACT OWNERSHIPS/2 SW/4 of Section 28 & S/2 S/2 of Section 29Bone Spring Formation:

Owner	% of Leasehold Interest
Mewbourne Oil Company, et al.	37.708333%
*COG Operating, LLC	48.958333%
*OXY USA WTP LP	9.375000%
*NimTexEnergy, LLC	0.208333%
*The Heirs of Myrtle Stubblefield	3.750000%
* Possibly: Shirley Hoyt Carole Sheats, Kathryn Sheats Johnson, Lena Mae Ellis, Carol Mae Davis, Marie Cleveland George, Edna Laura Criswell Blankenship, Mary	

Josephine Criswell Lee, John Claude Criswell, Jesse
 Devises of John C Moore, Bobbie S Davis, Velma Walters Moore, Hettie Patton Davis,
 Billie Beth Moore, Scott Martin Carter, Mary Christi Carter Daniels, Carl Mack Carter,

TOTAL	100.0000000%
--------------	---------------------

Total Interest Being Pooled: **62.291666%**

OWNERSHIP BY TRACT

S/2 SW/4 of Section 28

<u>Owner</u>	<u>% of Leasehold Interest</u>
Mewbourne Oil Company, et al	100.000000%

TOTAL

SE/4 SE/4 of Section 29

<u>Owner</u>	<u>% of Leasehold Interest</u>
COG Operating, LLC	93.750000%
OXY USA WTP LP	6.250000%

TOTAL

100.0000000%

SW/4 SE/4 of Section 29

<u>Owner</u>	<u>% of Leasehold Interest</u>
Mewbourne Oil Company, et al	26.250000%
OXY USA WTP LP	50.000000%
NimTex Energy, LLC	1.250000%
*The Heirs of Myrtle Stubblefield	22.500000%

* Possibly: Shirley Hoyt Carole Sheats, Kathryn Sheats Johnson, Lena Mae Ellis,
 Carol Mae Davis, Marie Cleveland George, Edna Laura Criswell Blankenship, Mary
 Josephine Criswell Lee, John Claude Criswell, Jesse Harold Criswell, The Heirs or
 Devises of John C Moore, Bobbie S Davis, Velma Walters Moore, Hettie Patton Davis,
 Billie Beth Moore, Scott Martin Carter, Mary Christi Carter Daniels, Carl Mack Carter,

TOTAL

100.0000000%

<u>S/2 SW/4 of Section 29</u>	<u>% of Leasehold Interest</u>
Owner COG Operating, LLC	100.000000%
TOTAL	100.000000%

Summary of Communications

Nina 28/27 B3OP Fed Com #1H

Pinta 28/29 B3NM Fed Com #1H

T20S-R27E, Eddy County, NM

OXY USA WTP LP

10/26/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

11/11/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

11/17/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

COG Operating, LLC

10/26/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

11/3/2021: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit. Called and left a voicemail.

11/10/2021: Called the above listed party and left a voicemail.

11/16/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

12/3/2021: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

12/16/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

12/22/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/11/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

SSB Production, LC

10/21/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

11/2/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

Attachment C

12/16/2021: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/17/2022: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

Bane Bigbie

10/21/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

11/2/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

12/16/2021: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/17/2022: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

The James K Lusk and Martha L Lusk Trust

12/11/2021: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

Failed to find a good point of contact.

JTD Resources

12/6/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/7/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/11/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

2/3/2022: Called above listed party and left a voicemail.

Sabinal Energy Operating, LLC

11/18/2021: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

12/2/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

12/16/2021: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/12/2022: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

3/2/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

NimTex Energy, LLC

1/26/2022: Phone correspondence with the above listed party regarding the Working interest unit.

1/28/2022: Email correspondence with the above listed party regarding the Working interest unit.

Carol Mae Davis

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

2/25/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

Marie Cleveland George

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

1/25/2022: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/27/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

Edna Laura Criswell Blankenship

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

1/18/2022: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

3/3/2022: Phone/Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

Mary Josephine Criswell Lee

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

1/5/2022: Email correspondence with the above listed party regarding the working interest unit. Proposal is attached

John Claude Criswell

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

1/5/2022: Email correspondence with the above listed party regarding the working interest unit.
Proposal is attached

Jesse Harold Criswell

11/9/2021: Email correspondence with the above listed party regarding the working interest unit.
Proposal is attached

12/1/2021: Phone correspondence with the above listed party regarding the working interest unit.

1/10/2022: Email correspondence with the above listed party regarding the working interest unit.
Proposal is attached

The Heirs or Devisees of John C Moore

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

Failed to find a good point of contact

Bobbie S Davis

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

Failed to find a good point of contact

Velma Walters Moore

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

1/31/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

Billie Beth Moore

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

1/31/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

Scott Martin Carter

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

Failed to find a good point of contact

Mary Christi Carter Daniels

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

Failed to find a good point of contact

Carl Mack Carter

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

Failed to find a good point of contact

Hettie Patton Davis

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

Failed to find a good point of contact

Shirley Carole Hoyt Sheats

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

Failed to find a good point of contact

Kathryn Sheats Johnson

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

1/6/2022: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/10/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

1/18/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

2/25/2022: Email correspondence with the above listed party regarding the Well Proposal and Working interest unit.

Lena Mae Ellis

1/5/2022: Mailed Working Interest Unit, Well Proposal and Joint operating Agreement to the above listed party. Proof of delivery is attached.

1/19/2022: Phone correspondence with the above listed party regarding the Well Proposal and Working interest unit.

MEWBOURNE OIL COMPANY

FASKEN CENTER
500 WEST TEXAS, SUITE 1020
MIDLAND, TX 79701

TELEPHONE (432) 682-3715
FACSIMILE (432) 685-4170

October 8, 2021

Certified Mail

COG Operating, LLC
600 W Illinois Ave
Midland, TX 79701-9808

Re: Nina 28/27 B3OP Fed Com #1H and Pinta 28/29 B3NM Fed Com #1H
440' FSL & 2540' FEL (Section 27) 1970' FSL & 2540' FWL (Section 28)
1000' FSL & 2540' FWL (Section 28) 440' FSL & 100' FWL (Section 29)

Ladies and Gentlemen:

Mewbourne Oil Company ("Mewbourne"), as Operator, proposes to form a 1920.0 acre Working Interest Unit ("WIU") covering all of the captioned Sections 27, 28, and 29 for oil and gas production. The targeted interval for the initial test is the Bone Spring formation. Our records indicate that you own a portion of the operating rights in the WIU, and your working interest is reflected on the enclosed AFE.

In addition, Mewbourne as Operator hereby proposes to drill the captioned Nina 28/27 B3OP Fed Com #1H well at the above referenced surface location (SL) to the referenced bottom hole location (BHL). The proposed well will be drilled to an approximate true vertical depth (TVD) of 8,177 feet subsurface to evaluate the Third Bone Spring Sand Formation. The proposed well will have a measured depth (MD) of approximately 15,878 feet. The S/2SE/4 of Section 28 and the S/2S/2 of Section 27 will be dedicated to the well as the proration unit.

Finally, Mewbourne as Operator hereby proposes to drill the captioned Pinta 28/29 B3NM Fed Com #1H well at the above referenced surface location (SL) to the referenced bottom hole location (BHL). The proposed well will be drilled to an approximate true vertical depth (TVD) of 8,170 feet subsurface to evaluate the Third Bone Spring Sand Formation. The proposed well will have a measured depth (MD) of approximately 15,662 feet. The S/2SW/4 of Section 28 and the S/2S/2 of Section 29 will be dedicated to the well as the proration unit.

Regarding the above, enclosed for your further handling is our Operating Agreement dated October 1, 2021, along with an extra set of signature pages and our AFEs dated September 30, 2019, for the captioned proposed wells. Please sign and return said AFEs and extra set of signature pages at your earliest convenience if you elect to participate in the captioned wells and WIU and return to me within thirty (30) days.

As an alternative to participation, Mewbourne hereby offers to purchase a three (3) year Term Assignment covering all of your interest in the WIU for \$1,000 per net mineral acre (\$1,000 x 430 net acres = \$430,000) and based on delivery of a 75% net revenue interest to Mewbourne. This offer is subject to execution of a mutually acceptable form of assignment and verification of your interest.

If you have any questions regarding the above, please email me at bblandford@mewbourne.com or call me at (432) 682-3715.

Sincerely,

MEWBOURNE OIL COMPANY

Braxton Blandford
Landman



October 13, 2021

Dear Simple Certified:

The following is in response to your request for proof of delivery on your item with the tracking number:
9402 8368 9784 6455 0881 21.

Item Details

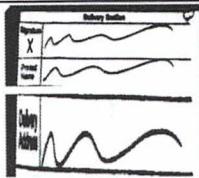
Status: Delivered to Agent for Final Delivery
Status Date / Time: October 13, 2021, 5:13 pm
Location: MIDLAND, TX 79701
Postal Product: Priority Mail®
Extra Services: Certified Mail™, Return Receipt Electronic, Up to \$100 insurance included
Recipient Name: LAND MANAGER

Shipment Details

Weight: 1.0oz

Recipient Signature

Signature of Recipient:
(Authorized Agent)



Address of Recipient:

Note: Scanned image may reflect a different destination address due to Intended Recipient's delivery instructions on file.

Thank you for selecting the United States Postal Service® for your mailing needs. If you require additional assistance, please contact your local Post Office™ or a Postal representative at 1-800-222-1811.

Sincerely,
United States Postal Service®
475 L'Enfant Plaza SW
Washington, D.C. 20260-0004

LAND MANAGER
COG OPERATING, LLC
600 W ILLINOIS AVE
MIDLAND, TX 79701
Reference #: NINA/PINTA

MEWBURNE OIL COMPANY

AUTHORIZATION FOR EXPENDITURE

Well Name:	PINTA 28/29 B3NM FED COM #1H	Prospect:	
Location:	SL: 970 FSL & 2540 FWL (28) ; BHL: 440 FSL & 100 FWL (29)	County:	Eddy
Sec.	28	Blk:	
Survey:		TWP:	20S
RNG:	27E	Prop. TVD:	8170
TMD:	15662		
INTANGIBLE COSTS 0180			
Regulatory Permits & Surveys		CODE	TCP
Location / Road / Site / Preparation		0180-0100	\$20,000
Location / Restoration		0180-0105	\$75,000
Daywork / Turnkey / Footage Drilling	22 days drig / 3 days comp @ \$19500/d	0180-0106	\$200,000
Fuel	1700 gal/day @ \$3/gal	0180-0110	\$460,000
Mud, Chemical & Additives		0180-0114	\$119,800
Horizontal Drillout Services		0180-0120	\$100,000
Cementing		0180-0122	\$200,000
Logging & Wireline Services		0180-0125	\$60,000
Casing / Tubing / Snubbing Service		0180-0130	\$2,300
Mud Logging		0180-0134	\$25,000
Stimulation	38 Stg 14.5 MM gal / 14.5 MM lb	0180-0137	\$30,000
Stimulation Rentals & Other		0180-0241	\$1,250,000
Water & Other		0180-0242	\$150,000
Bits		0180-0245	\$295,000
Inspection & Repair Services		0180-0248	\$5,000
Misc. Air & Pumping Services		0180-0250	\$5,000
Testing & Flowback Services		0180-0254	\$10,000
Completion / Workover Rig		0180-0258	\$24,000
Rig Mobilization		0180-0260	\$10,500
Transportation		0180-0265	\$15,000
Welding Services		0180-0268	\$15,000
Contract Services & Supervision		0180-0270	\$58,100
Directional Services	Includes Vertical Control	0180-0275	\$278,700
Equipment Rental		0180-0280	\$12,500
Well / Lease Legal		0180-0284	
Well / Lease Insurance		0180-0285	
Intangible Supplies		0180-0288	\$1,000
Damages		0180-0290	\$10,000
ROW & Easements		0180-0292	\$5,000
Pipeline Interconnect		0180-0293	
Company Supervision		0180-0295	\$40,000
Overhead Fixed Rate		0180-0296	\$20,000
Well Abandonment		0180-0298	
Contingencies	10% (TCP) 10% (CC)	0180-0299	\$297,560
	TOTAL		\$2,422,090
			\$3,273,160
TANGIBLE COSTS 0181			
Casing (19.1" - 30")		0181-0793	
Casing (10.1" - 19.0")	350' - 13 3/8" 54.5# J-55 ST&C @ \$48/ft	0181-0794	\$17,900
Casing (8.1" - 10.0")	2000' - 9 5/8" 36# J-55 LT&C @ \$38/ft	0181-0795	\$81,200
Casing (6.1" - 8.0")	8400' - 7" 29# HCP-110 LT&C @ \$28.5/ft	0181-0796	\$255,700
Casing (4.1" - 6.0")	7800' - 4 1/2" 13.5# P-110 BPN @ \$15.5/ft	0181-0797	\$129,100
Tubing	8000' - 2 7/8" 6.5# L-80 Tbg @ \$13/ft	0181-0798	\$111,100
Drilling Head		0181-0860	\$35,000
Tubing Head & Upper Section		0181-0870	\$30,000
Horizontal Completion Tools	Completion Liner Hanger	0181-0871	\$50,000
Sucker Rods		0181-0875	
Subsurface Equipment		0181-0880	\$25,000
Artificial Lift Systems	ESP	0181-0884	\$100,000
Pumping Unit		0181-0885	
Surface Pumps & Prime Movers	1/2 VRU/SWD TP	0181-0886	\$55,000
Tanks - Oil	1/2 of 6 - 750 bbl	0181-0890	\$60,000
Tanks - Water	1/2 of 5 - 750 bbl coated	0181-0891	\$50,000
Separation / Treating Equipment	1/2 GB/VRT/Flare	0181-0895	\$150,000
Heater Treaters, Line Heaters	8'x20'x75# HT	0181-0897	\$25,000
Metering Equipment		0181-0898	\$15,000
Line Pipe & Valves - Gathering	1/2 3.5 mile water	0181-0900	\$90,000
Fittings / Valves & Accessories		0181-0906	\$160,000
Cathodic Protection	Automation	0181-0908	\$15,000
Electrical Installation		0181-0909	\$93,750
Equipment Installation		0181-0910	\$93,750
Pipeline Construction	1/2 3.5 mile water	0181-0920	\$125,000
	TOTAL		\$389,800
	SUBTOTAL		\$1,377,700
	TOTAL WELL COST		\$4,650,860
Extra Expense Insurance			
<input type="checkbox"/> I elect to be covered by Operator's Extra Expense Insurance and pay my proportionate share of the premium. Operator has secured Extra Expense Insurance covering costs of well control, clean up and redrilling as estimated in Line item 0180-0185.			
<input type="checkbox"/> I elect to purchase my own well control insurance policy.			
If neither box is checked above, non-operating working interest owner elects to be covered by Operator's well control insurance.			
Prepared by:	G. Edington	Date:	9/30/2021
Company Approval:		Date:	
Joint Owner Interest:	Amount:	Signature:	
Joint Owner Name:			

Attachment D

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

**APPLICATIONS OF MEWBOURNE OIL COMPANY
FOR COMPULSORY POOLING, EDDY COUNTY,
NEW MEXICO.**

Case Nos. 22648 & 22672

SELF-AFFIRMED STATEMENT OF CHARLES CROSBY

COUNTY OF MIDLAND)
) ss.
STATE OF TEXAS)

Charles Crosby deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am a geologist for Mewbourne Oil Company ("Mewbourne"), and I am familiar with the geological matters involved in these cases. I have been qualified by the Division as an expert petroleum geologist.
3. The following geological plats are attached hereto:
 - (a) Attachment A is a structure map on the base of the Third Bone Spring Sand. It shows that structure dips gently to the southeast. It also shows Bone Spring wells in the area, and a line of cross-section.
 - (b) Attachment B is a cross section showing the Third Bone Spring Sand, the target zones for the proposed well. The well logs on the cross-section give a representative sample of the Third Bone Spring Sand in this area. The sand is continuous and uniformly thick across the well unit.
4. I conclude from the maps that:
 - (a) The horizontal spacing units are justified from a geologic standpoint.
 - (b) The target zone is continuous and of relatively uniform thickness across the well units.
 - (c) Each quarter-quarter section in the well units will contribute more or less equally to production.

EXHIBIT

3

(d) There is no faulting or other geologic impediment in the area which will affect the drilling of the subject wells.

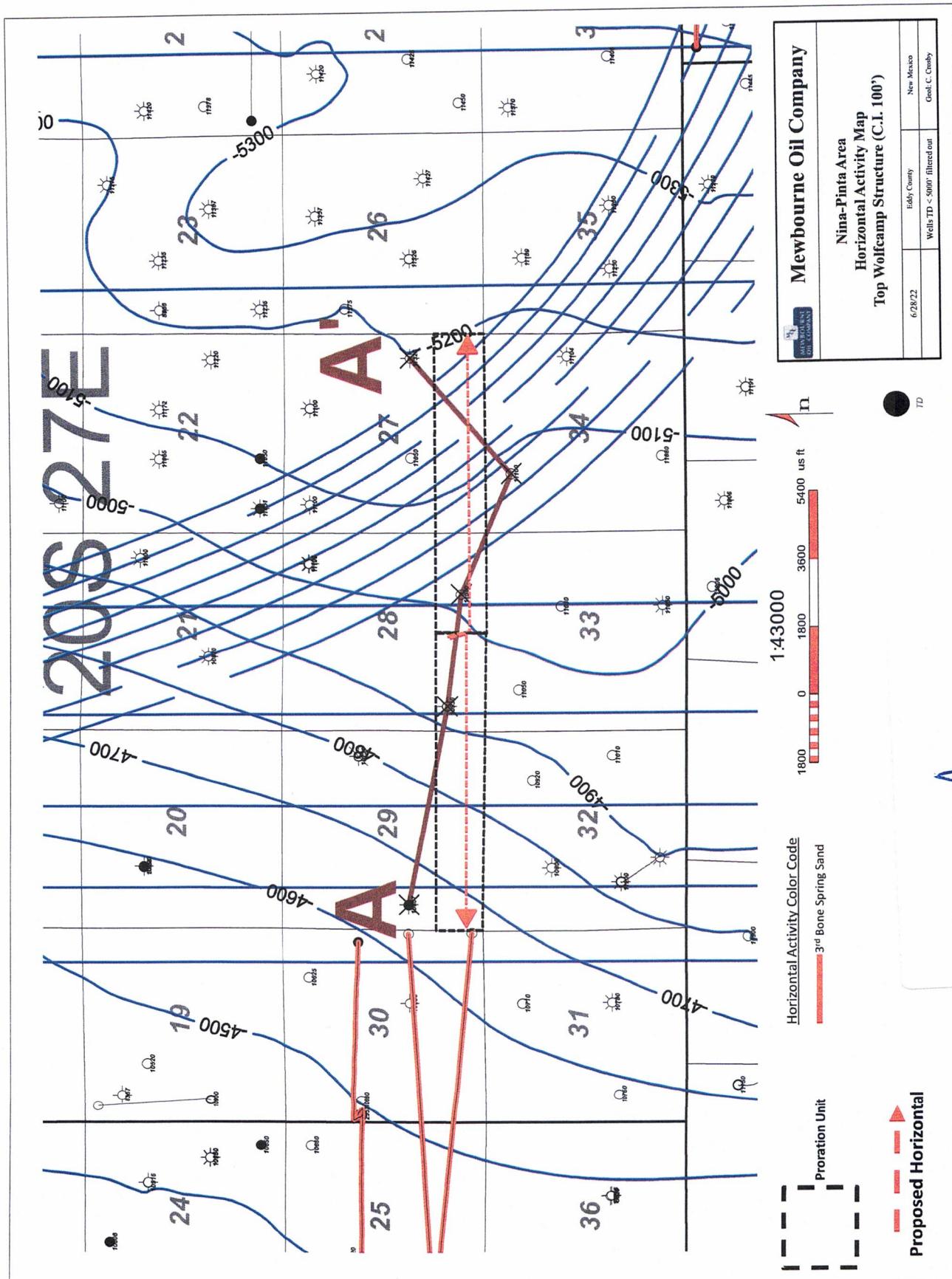
5. Attachment C contains information from other Third Bone Spring Sand wells drilled in this area. There is a preference for laydown wells.

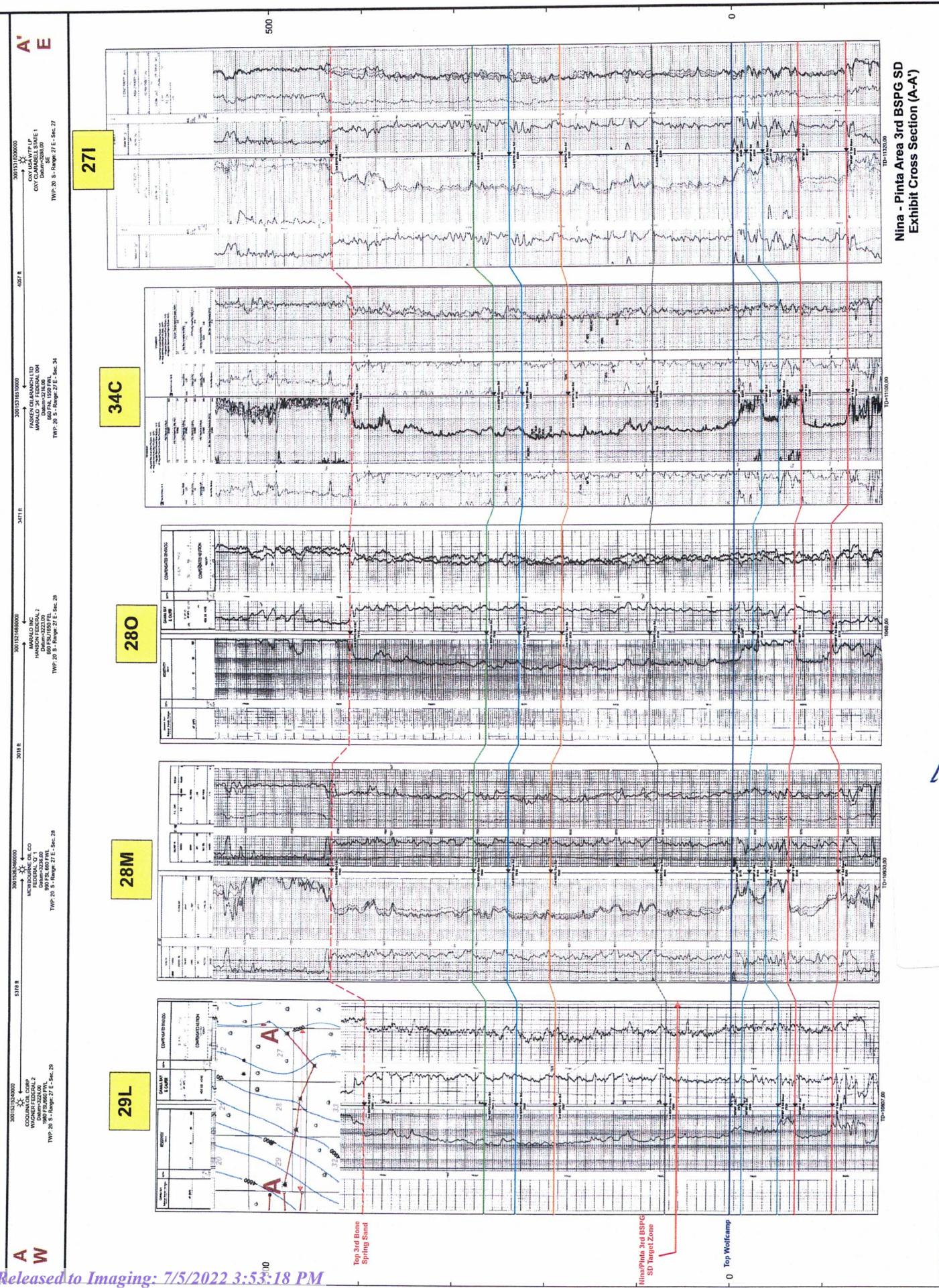
6. Attachment D contains Survey Calculation Reports for the proposed wells. The producing intervals of the wells will be orthodox.

I understand that this Self-Affirmed Statement will be used as written testimony in these cases. I affirm that my testimony in paragraphs 1 through 6 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date: July 5, 2022

/s/ Charles Crosby
Charles Crosby





Nina/Pinta 3rd BSPG SD Horizontal Production Table

Well Name	Operator	API	Location	Completion Date	Cum Oil (Mbo)	Cum Gas (Bcf)	Cum Water (MbW)	NS/EW	Production Zone
Roscoe 6 B3AD Federal Com 1H	Nevboume	30015431680000	6A/21S/27E	6/3/2017	233.5	0.50	619.4	EW	3rd Bone Spring Sand
Catalina 30 EH State 1H	Tascosa	30015476410000	30E/20S/27E	3/29/2021	149.3	0.62	136.5	EW	3rd Bone Spring Sand
Catalina 25 HE State 1H	Tascosa	30015487360000	30E/20S/27E	2/15/2022	76.4	0.31	102.1	EW	3rd Bone Spring Sand
Catalina 25/30 State Com 2H	Tascosa	30015491120000	25L/20S/26E	Pending			EW	3rd Bone Spring Sand	
Catalina 25/30 State Com 3H	Tascosa	30015491250000	25M/20S/26E	Pending			EW	3rd Bone Spring Sand	

ATTACHMENT C

Mewbourne Oil Company

SURVEY CALCULATION REPORT Minimum Curvature Calculations

Operator: Mewbourne Oil Company
Lease Name: Nina 28/27 B3OP Fed Com 1H

KOP 7605.04

SL: 1000 FSL & 2540 FWL; Sec 28/20S/27E
PBHL: 440 FSL & 100 FEL; Sec 27/20S/27E

Target KBTVD: 8,178 Feet 8178.00
Target Angle: 88.47 Degrees 88.47
Section Plane: 94.08 Degrees
Declination Corrected to True North: 6.63 Degrees
Bit to Survey Offset: 44 Feet

Survey No.	Measured Depth-ft	Drift (Deg.)	Azimuth (Deg.)	Course Length	TVD (Feet)	Vertical Section	+N/-S (Feet)	+E/-W (Feet)	Closure Distance	Closure Direction	BUR	DLS	KBTVD	+Above -Below Target		DRIFT (RADIAN\$)	AZIMUTH (RADIAN\$)
														Target	Offset		
T/1	7605.04	0.00	94.08	N/A	7605.0	0.0	0.0	0.0	0.0	N/A	N/A	N/A	7605.0	573.0	1E-12	1.64	#VALUE!
1	7693.51	8.85	94.08	88.471	7693.2	6.8	-0.5	6.8	6.8	94.1	10.0	10.0	7693.0	485.0	0.1544113	1.64	0.1544113
2	7781.98	17.69	94.08	88.471	7779.2	27.1	-1.9	27.0	27.1	94.1	10.0	10.0	7778.5	399.5	0.3088226	1.64	0.1544113
3	7870.46	26.54	94.08	88.471	7861.1	60.4	-4.3	60.2	60.4	94.1	10.0	10.0	7859.5	318.5	0.4632339	1.64	0.1544113
4	7958.93	35.39	94.08	88.471	7936.9	105.9	-7.5	105.6	105.9	94.1	10.0	10.0	7934.0	244.0	0.6176453	1.64	0.1544113
5	8047.40	44.24	94.08	88.471	8004.7	162.4	-11.6	162.0	162.4	94.1	10.0	10.0	8000.4	177.6	0.7720566	1.64	0.1544113
6	8135.87	53.08	94.08	88.471	8063.1	228.8	-16.3	228.2	228.8	94.1	10.0	10.0	8057.0	121.0	0.9264679	1.64	0.1544113
7	8224.34	61.93	94.08	88.471	8110.6	303.4	-21.6	302.6	303.4	94.1	10.0	10.0	8102.5	75.5	1.0808792	1.64	0.1544113
8	8312.81	70.78	94.08	88.471	8146.1	384.3	-27.4	383.3	384.3	94.1	10.0	10.0	8135.8	42.2	1.2352905	1.64	0.1544113
9	8401.28	79.62	94.08	88.471	8168.6	469.8	-33.4	468.6	469.8	94.1	10.0	10.0	8156.1	21.9	1.3897018	1.64	0.1544113
10	8489.75	88.47	94.08	88.471	8177.8	557.7	-39.7	556.3	557.7	94.1	10.0	10.0	8162.9	15.1	1.5441131	1.64	0.1544113
11	8500.00	88.47	94.08	10.246	8178.1	567.9	-40.4	566.5	567.9	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
12	8600.00	88.47	94.08	100	8180.7	667.9	-47.5	666.2	667.9	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
13	8700.00	88.47	94.08	100	8183.4	767.8	-54.6	765.9	767.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
14	8800.00	88.47	94.08	100	8186.1	867.8	-61.8	865.6	867.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
15	8900.00	88.47	94.08	100	8188.7	967.8	-68.9	965.3	967.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
16	9000.00	88.47	94.08	100	8191.4	1067.7	-76.0	1065.0	1067.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
17	9100.00	88.47	94.08	100	8194.1	1167.7	-83.1	1164.7	1167.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
18	9200.00	88.47	94.08	100	8196.7	1267.7	-90.2	1264.4	1267.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
19	9300.00	88.47	94.08	100	8199.4	1367.6	-97.3	1364.2	1367.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
20	9400.00	88.47	94.08	100	8202.1	1467.6	-104.5	1463.9	1467.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
21	9500.00	88.47	94.08	100	8204.7	1567.6	-111.6	1563.6	1567.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
22	9600.00	88.47	94.08	100	8207.4	1667.5	-118.7	1663.3	1667.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
23	9700.00	88.47	94.08	100	8210.1	1767.5	-125.8	1763.0	1767.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
24	9800.00	88.47	94.08	100	8212.8	1867.5	-132.9	1862.7	1867.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
25	9900.00	88.47	94.08	100	8215.4	1967.4	-140.0	1962.4	1967.4	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
26	10000.00	88.47	94.08	100	8218.1	2067.4	-147.1	2062.1	2067.4	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
27	10100.00	88.47	94.08	100	8220.8	2167.3	-154.3	2161.8	2167.3	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
28	10200.00	88.47	94.08	100	8223.4	2267.3	-161.4	2261.6	2267.3	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
29	10300.00	88.47	94.08	100	8226.1	2367.3	-168.5	2361.3	2367.3	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
30	10400.00	88.47	94.08	100	8228.8	2467.2	-175.6	2461.0	2467.2	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
31	10500.00	88.47	94.08	100	8231.4	2567.2	-182.7	2560.7	2567.2	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
32	10600.00	88.47	94.08	100	8234.1	2667.2	-189.8	2660.4	2667.2	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
33	10700.00	88.47	94.08	100	8236.8	2767.1	-196.9	2760.1	2767.1	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
34	10800.00	88.47	94.08	100	8239.4	2867.1	-204.1	2859.8	2867.1	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
35	10900.00	88.47	94.08	100	8242.1	2967.1	-211.2	2959.5	2967.1	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
36	11000.00	88.47	94.08	100	8244.8	3067.0	-218.3	3059.2	3067.0	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
37	11100.00	88.47	94.08	100	8247.4	3167.0	-225.4	3159.0	3167.0	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
38	11200.00	88.47	94.08	100	8250.1	3267.0	-232.5	3258.7	3267.0	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
39	11300.00	88.47	94.08	100	8252.8	3366.9	-239.6	3358.4	3366.9	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
40	11400.00	88.47	94.08	100	8255.4	3466.9	-246.7	3458.1	3466.9	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
41	11500.00	88.47	94.08	100	8258.1	3566.8	-253.9	3557.8	3566.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
42	11600.00	88.47	94.08	100	8260.8	3666.8	-261.0	3657.5	3666.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
43	11700.00	88.47	94.08	100	8263.4	3766.8	-268.1	3757.2	3766.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
44	11800.00	88.47	94.08	100	8266.1	3866.7	-275.2	3856.9	3866.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
45	11900.00	88.47	94.08	100	8268.8	3966.7	-282.3	3956.6	3966.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
46	12000.00	88.47	94.08	100	8271.4	4066.7	-289.4	4056.4	4066.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
47	12100.00	88.47	94.08	100	8274.1	4166.6	-296.5	4156.1	4166.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
48	12200.00	88.47	94.08	100	8276.8	4266.6	-303.7	4255.8	4266.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
49	12300.00	88.47	94.08	100	8279.5	4366.6	-310.8	4355.5	4366.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
50	12400.00	88.47	94.08	100	8282.1	4466.5	-317.9	4455.2	4466.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
51	12500.00	88.47	94.08	100	8284.8	4566.5	-325.0	4554.9	4566.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
52	12600.00	88.47	94.08	100	8287.5	4666.5	-332.1	4654.6	4666.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
53	12700.00	88.47	94.08	100	8290.1	4766.4	-339.2	4754.3	4766.4	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
54	12800.00	88.47	94.08	100	8292.8	4866.4	-346.3	4854.0	4866.4	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10

55	12900.00	88.47	94.08	100	8295.5	4966.3	-353.5	4953.8	4966.3	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
56	13000.00	88.47	94.08	100	8298.1	5066.3	-360.6	5053.5	5066.3	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10

57	13100.00	88.47	94.08	100	8300.8	5166.3	-367.7	5153.2	5166.3	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
58	13200.00	88.47	94.08	100	8303.5	5266.2	-374.8	5252.9	5266.2	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
59	13300.00	88.47	94.08	100	8306.1	5366.2	-381.9	5352.6	5366.2	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
60	13400.00	88.47	94.08	100	8308.8	5466.2	-389.0	5452.3	5466.2	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
61	13500.00	88.47	94.08	100	8311.5	5566.1	-396.2	5552.0	5566.1	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
62	13600.00	88.47	94.08	100	8314.1	5666.1	-403.3	5651.7	5666.1	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
63	13700.00	88.47	94.08	100	8316.8	5766.1	-410.4	5751.4	5766.1	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
64	13800.00	88.47	94.08	100	8319.5	5866.0	-417.5	5851.2	5866.0	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
65	13900.00	88.47	94.08	100	8322.1	5966.0	-424.6	5950.9	5966.0	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
66	14000.00	88.47	94.08	100	8324.8	6066.0	-431.7	6050.6	6066.0	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
67	14100.00	88.47	94.08	100	8327.5	6165.9	-438.8	6150.3	6165.9	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
68	14200.00	88.47	94.08	100	8330.1	6265.9	-446.0	6250.0	6265.9	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
69	14300.00	88.47	94.08	100	8332.8	6365.8	-453.1	6349.7	6365.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
70	14400.00	88.47	94.08	100	8335.5	6465.8	-460.2	6449.4	6465.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
71	14500.00	88.47	94.08	100	8338.1	6565.8	-467.3	6549.1	6565.8	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
72	14600.00	88.47	94.08	100	8340.8	6665.7	-474.4	6648.8	6665.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
73	14700.00	88.47	94.08	100	8343.5	6765.7	-481.5	6748.5	6765.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
74	14800.00	88.47	94.08	100	8346.2	6865.7	-488.6	6848.3	6865.7	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
75	14900.00	88.47	94.08	100	8348.8	6965.6	-495.8	6948.0	6965.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
76	15000.00	88.47	94.08	100	8351.5	7065.6	-502.9	7047.7	7065.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
77	15100.00	88.47	94.08	100	8354.2	7165.6	-510.0	7147.4	7165.6	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
78	15200.00	88.47	94.08	100	8356.8	7265.5	-517.1	7247.1	7265.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
79	15300.00	88.47	94.08	100	8359.5	7365.5	-524.2	7346.8	7365.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
80	15400.00	88.47	94.08	100	8362.2	7465.5	-531.3	7446.5	7465.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
81	15500.00	88.47	94.08	100	8364.8	7565.4	-538.4	7546.2	7565.4	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
82	15600.00	88.47	94.08	100	8367.5	7665.4	-545.6	7645.9	7665.4	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
83	15700.00	88.47	94.08	100	8370.2	7765.4	-552.7	7745.7	7765.4	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
84	15800.00	88.47	94.08	100	8372.8	7865.3	-559.8	7845.4	7865.3	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
85	15886.21	88.47	94.08	86.214	8375.1	7951.5	-565.9	7931.3	7951.5	94.1	0.0	0.0	8162.9	15.1	1.5441131	1.64	1E-10
86	15886.21	88.47	94.08	0	8375.1	7951.5	-565.9	7931.3	7951.5	94.1	#DIV/0!	#DIV/0!	8162.9	15.1	1.5441131	1.64	1E-10

Mewbourne Oil Company

SURVEY CALCULATION REPORT Minimum Curvature Calculations

Operator: Mewbourne Oil Company
 Lease Name: Pinta 28/29 B3NM Fed Com 1H
 KOP 7598.04
 SL: 970 FSL & 2540 FWL; Sec 28/20S/27E
 PBHL: 440 FSL & 100 FEL; Sec 29/20S/27E

Target KBTVD: 8,171 Feet 8171.00
 Target Angle: 92.45 Degrees 92.45
 Section Plane: 266.64 Degrees
 Declination Corrected to True North: 6.63 Degrees
 Bit to Survey Offset: 44 Feet

Survey No.	Measured Depth-ft	Drift (Deg.)	Azimuth (Deg.)	Course Length	TVD (Feet)	Vertical Section	+N/-S (Feet)	+E/-W (Feet)	Closure Distance	Closure Direction	+Above			-Below Target (RADIANS)	DRIFT (RADIANS)	AZIMUTH (RADIANS)
											BUR	DLS	KBTVD			
T/1	7598.04	0.00	266.64	N/A	7598.0	0.0	0.0	0.0	0.0	N/A	N/A	N/A	7598.0	573.0	1E-12	4.65 #VALUE!
1	7690.50	9.25	266.64	92.453	7690.1	7.4	-0.4	-7.4	7.4	266.6	10.0	10.0	7690.4	480.6	0.161361	4.65 0.1613609
2	7782.95	18.49	266.64	92.453	7779.8	29.6	-1.7	-29.5	29.6	266.6	10.0	10.0	7781.0	390.0	0.322722	4.65 0.1613609
3	7875.40	27.74	266.64	92.453	7864.7	65.8	-3.9	-65.7	65.8	266.6	10.0	10.0	7867.5	303.5	0.484083	4.65 0.1613609
4	7967.85	36.98	266.64	92.453	7942.7	115.3	-6.7	-115.1	115.3	266.6	10.0	10.0	7947.6	223.4	0.645444	4.65 0.1613609
5	8060.31	46.23	266.64	92.453	8011.8	176.6	-10.3	-176.3	176.6	266.6	10.0	10.0	8019.3	151.7	0.806805	4.65 0.1613609
6	8152.76	55.47	266.64	92.453	8070.1	248.2	-14.5	-247.8	248.2	266.6	10.0	10.0	8080.7	90.3	0.968166	4.65 0.1613609
7	8245.21	64.72	266.64	92.453	8116.1	328.3	-19.2	-327.7	328.3	266.6	10.0	10.0	8130.2	40.8	1.129527	4.65 0.1613609
8	8337.87	73.96	266.64	92.453	8148.7	414.7	-24.3	-414.0	414.7	266.6	10.0	10.0	8166.5	4.5	1.290887	4.65 0.1613609
9	8430.12	83.21	266.64	92.453	8167.0	505.2	-29.6	-504.3	505.2	266.6	10.0	10.0	8188.6	-17.6	1.452248	4.65 0.1613609
10	8522.57	92.45	266.64	92.453	8170.5	597.5	-35.0	-596.5	597.5	266.6	10.0	10.0	8196.1	-25.1	1.613609	4.65 0.1613609
11	8600.00	92.45	266.64	77.428	8167.2	674.8	-39.5	-673.7	674.8	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
12	8700.00	92.45	266.64	100	8162.9	774.7	-45.4	-773.4	774.7	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
13	8800.00	92.45	266.64	100	8158.6	874.7	-51.2	-873.2	874.7	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
14	8900.00	92.45	266.64	100	8154.3	974.6	-57.0	-972.9	974.6	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
15	9000.00	92.45	266.64	100	8150.0	1074.5	-62.9	-1072.6	1074.5	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
16	9100.00	92.45	266.64	100	8145.8	1174.4	-68.7	-1172.4	1174.4	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
17	9200.00	92.45	266.64	100	8141.5	1274.3	-74.6	-1272.1	1274.3	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
18	9300.00	92.45	266.64	100	8137.2	1374.2	-80.4	-1371.8	1374.2	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
19	9400.00	92.45	266.64	100	8132.9	1474.1	-86.3	-1471.6	1474.1	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
20	9500.00	92.45	266.64	100	8128.6	1574.0	-92.1	-1571.3	1574.0	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
21	9600.00	92.45	266.64	100	8124.4	1673.9	-98.0	-1671.1	1673.9	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
22	9700.00	92.45	266.64	100	8120.1	1773.8	-103.8	-1770.8	1773.8	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
23	9800.00	92.45	266.64	100	8115.8	1873.7	-109.7	-1870.5	1873.7	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
24	9900.00	92.45	266.64	100	8111.5	1973.6	-115.5	-1970.3	1973.6	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
25	10000.00	92.45	266.64	100	8107.2	2073.6	-121.4	-2070.0	2073.6	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
26	10100.00	92.45	266.64	100	8103.0	2173.5	-127.2	-2169.7	2173.5	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
27	10200.00	92.45	266.64	100	8098.7	2273.4	-133.1	-2269.5	2273.4	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
28	10300.00	92.45	266.64	100	8094.4	2373.3	-138.9	-2369.2	2373.3	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
29	10400.00	92.45	266.64	100	8090.1	2473.2	-144.8	-2468.9	2473.2	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
30	10500.00	92.45	266.64	100	8085.8	2573.1	-150.6	-2568.7	2573.1	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
31	10600.00	92.45	266.64	100	8081.6	2673.0	-156.5	-2668.4	2673.0	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
32	10700.00	92.45	266.64	100	8077.3	2772.9	-162.3	-2768.2	2772.9	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
33	10800.00	92.45	266.64	100	8073.0	2872.8	-168.2	-2867.9	2872.8	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
34	10900.00	92.45	266.64	100	8068.7	2972.7	-174.0	-2967.6	2972.7	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
35	11000.00	92.45	266.64	100	8064.4	3072.6	-179.9	-3067.4	3072.6	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
36	11100.00	92.45	266.64	100	8060.2	3172.5	-185.7	-3167.1	3172.5	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
37	11200.00	92.45	266.64	100	8055.9	3272.5	-191.6	-3266.8	3272.5	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
38	11300.00	92.45	266.64	100	8051.6	3372.4	-197.4	-3366.6	3372.4	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
39	11400.00	92.45	266.64	100	8047.3	3472.3	-203.3	-3466.3	3472.3	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
40	11500.00	92.45	266.64	100	8043.0	3572.2	-209.1	-3566.1	3572.2	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
41	11600.00	92.45	266.64	100	8038.8	3672.1	-215.0	-3665.8	3672.1	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
42	11700.00	92.45	266.64	100	8034.5	3772.0	-220.8	-3765.5	3772.0	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
43	11800.00	92.45	266.64	100	8030.2	3871.9	-226.7	-3865.3	3871.9	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
44	11900.00	92.45	266.64	100	8025.9	3971.8	-232.5	-3965.0	3971.8	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
45	12000.00	92.45	266.64	100	8021.6	4071.7	-238.4	-4064.7	4071.7	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
46	12100.00	92.45	266.64	100	8017.4	4171.6	-244.2	-4164.5	4171.6	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
47	12200.00	92.45	266.64	100	8013.1	4271.5	-250.0	-4264.2	4271.5	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
48	12300.00	92.45	266.64	100	8008.8	4371.4	-255.9	-4364.0	4371.4	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
49	12400.00	92.45	266.64	100	8004.5	4471.4	-261.7	-4463.7	4471.4	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
50	12500.00	92.45	266.64	100	8000.2	4571.3	-267.6	-4563.4	4571.3	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
51	12600.00	92.45	266.64	100	7996.0	4671.2	-273.4	-4663.2	4671.2	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
52	12700.00	92.45	266.64	100	7991.7	4771.1	-279.3	-4762.9	4771.1	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
53	12800.00	92.45	266.64	100	7987.4	4871.0	-285.1	-4862.6	4871.0	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10
54	12900.00	92.45	266.64	100	7983.1	4970.9	-291.0	-4962.4	4970.9	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65 1E-10

55	13000.00	92.45	266.64	100	7978.8	5070.8	-296.8	-5062.1	5070.8	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
56	13100.00	92.45	266.64	100	7974.6	5170.7	-302.7	-5161.8	5170.7	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
57	13200.00	92.45	266.64	100	7970.3	5270.6	-308.5	-5261.6	5270.6	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
58	13300.00	92.45	266.64	100	7966.0	5370.5	-314.4	-5361.3	5370.5	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
59	13400.00	92.45	266.64	100	7961.7	5470.4	-320.2	-5461.1	5470.4	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
60	13500.00	92.45	266.64	100	7957.4	5570.3	-326.1	-5560.8	5570.3	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
61	13600.00	92.45	266.64	100	7953.2	5670.3	-331.9	-5660.5	5670.3	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
62	13700.00	92.45	266.64	100	7948.9	5770.2	-337.8	-5760.3	5770.2	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
63	13800.00	92.45	266.64	100	7944.6	5870.1	-343.6	-5860.0	5870.1	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
64	13900.00	92.45	266.64	100	7940.3	5970.0	-349.5	-5959.7	5970.0	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
65	14000.00	92.45	266.64	100	7936.0	6069.9	-355.3	-6059.5	6069.9	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
66	14100.00	92.45	266.64	100	7931.8	6169.8	-361.2	-6159.2	6169.8	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
67	14200.00	92.45	266.64	100	7927.5	6269.7	-367.0	-6259.0	6269.7	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
68	14300.00	92.45	266.64	100	7923.2	6369.6	-372.9	-6358.7	6369.6	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
69	14400.00	92.45	266.64	100	7918.9	6469.5	-378.7	-6458.4	6469.5	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
70	14500.00	92.45	266.64	100	7914.6	6569.4	-384.6	-6558.2	6569.4	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
71	14600.00	92.45	266.64	100	7910.4	6669.3	-390.4	-6657.9	6669.3	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
72	14700.00	92.45	266.64	100	7906.1	6769.2	-396.3	-6757.6	6769.2	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
73	14800.00	92.45	266.64	100	7901.8	6869.2	-402.1	-6857.4	6869.2	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
74	14900.00	92.45	266.64	100	7897.5	6969.1	-408.0	-6957.1	6969.1	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
75	15000.00	92.45	266.64	100	7893.2	7069.0	-413.8	-7056.9	7069.0	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
76	15100.00	92.45	266.64	100	7889.0	7168.9	-419.7	-7156.6	7168.9	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
77	15200.00	92.45	266.64	100	7884.7	7268.8	-425.5	-7256.3	7268.8	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
78	15300.00	92.45	266.64	100	7880.4	7368.7	-431.3	-7356.1	7368.7	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
79	15400.00	92.45	266.64	100	7876.1	7468.6	-437.2	-7455.8	7468.6	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
80	15500.00	92.45	266.64	100	7871.8	7568.5	-443.0	-7555.5	7568.5	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
81	15600.00	92.45	266.64	100	7867.6	7668.4	-448.9	-7655.3	7668.4	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10
82	15687.73	92.45	266.64	87.733	7863.8	7756.1	-454.0	-7742.8	7756.1	266.6	0.0	0.0	8196.1	-25.1	1.613609	4.65	1E-10

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

APPLICATION OF MEWBOURNE OIL
COMPANY FOR COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.

Case No. 22672

SELF-AFFIRMED STATEMENT OF NOTICE

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

James Bruce 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 Mewbourne Oil Company.
3. Mewbourne Oil Company 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 last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules.
6. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 5 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date:

7/5/22

James Bruce

James Bruce

EXHIBIT

4

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

June 16, 2022

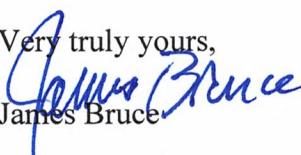
CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling (Case No. 22672), filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, seeking to pool all uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S/2SW/4 of Section 28 and the S/2S/2 of Section 29, Township 20 South, Range 27 East, NMPM. The unit will be dedicated to the Pinta 28/29 B3NM Fed. Com. Well No. 1H.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, July 7, 2022. During the COVID-19 Public Health Emergency, state buildings are closed to the public and the hearing will be conducted remotely. To determine the location of the hearing or to participate in an electronic hearing, go to emnrd.state.nm.us/OCD/hearings or see the instructions posted on the Division's website, <http://emnrd.state.nm.us/OCD/announcements.html>. You are not required to attend this hearing, but as an owner of an interest who 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 five business days before the hearing date. This statement may be filed online with the Division at ocd.hearings@state.nm.us, and should include: The name of the party and his or her attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate time the party will need to present his or her 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

Attachment A

EXHIBIT A

COG Operating, LLC
600 W Illinois Ave
Midland, TX 79701-9808
Attn: Baylor Mitchell

OXY USA WTP Limited Partnership
5 Greenway Plaza, Suite 110
Houston, TX 77046
Attn: Jonathan Gonzales

SEP Permian, LLC
9655 Katy Freeway, Suite 500
Houston, TX 77024
Attn: Drew Oldis

Kathryn Sheats Johnson
100 W Seguin Ave
De Leon, Texas 76444
Attn: Alice Ward

Lena Mae Ellis
4213 Homestead Circle
San Angelo, Texas 76905-7312

Carol Mae Davis
7 Duncan Rd
Pueblo, CO 81001-1647

Marie Cleveland George
417 East 1700 South
Salt Lake City, Utah 84115
Attn: Esther Wardle

Mary Christi Carter Daniels
43 NW Sandy Trail Ln
Lawton, OK 73505-9557

Carl Mack Carter
2360 E US Highway 190
San Saba, TX 76877-7729

Shirley Hoyt Carole Sheats
1319 Academy Dr
Arlington, Texas 76013-2312

Hettie Patton Davis
2851 Coldwater Ct
Midlothian, TX 76065

Edna Laura Criswell Blankenship
PO Box 494
Levelland, TX 79336
Attn: Connie Martin

Mary Josephine Criswell Lee
4519 62nd St
Lubbock, TX 79414-4530

John Claude Criswell
9139 CR 2472
Royce City, TX 75189
Attn: Don Criswell

Jesse Harold Criswell
7 Dellwood Lane
Canyon, TX 79015
Attn: Jerry Criswell

The Heirs or Devisees of John C Moore
16 Benchley Dr
Marlboro, NJ 07746-1785

NimTex Energy, LLC
Box 999
Farwell, TX 79325
Attn: Nichols Thomas

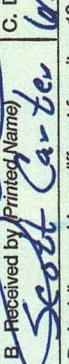
Bobbie S Davis as sole devisee u/w/o Donald Carlos Davis
11231 Spring Pine St Apt 1214
San Antonio, TX 78249-2669

Velma Walters Moore
1148 FM 1383
Schulenburg, TX 78956
Attn: Patti Niesner

Billie Beth Moore
1148 FM 1383
Schulenburg, TX 78956
Attn: Patti Niesner

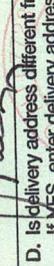
Scott Martin Carter
6711 84th Street
Lubbock, TX 79424-4763

<p>U.S. Postal Service™ CERTIFIED MAIL® RECEIPT</p> <p><i>Domestic Mail Only</i></p> <p>For delivery information, visit our website at www.usps.com.</p>	
<p>OFFICIAL USE</p>	
<p>Certified Mail Fee \$ 6049E0200005602T</p>	
<p>Extra Services & Fees (check box and fee as appropriate)</p>	
<p><input type="checkbox"/> Return Receipt (Hardcopy) \$ _____</p>	
<p><input type="checkbox"/> Return Receipt (Electronic) \$ _____</p>	
<p><input type="checkbox"/> Certified Mail Restricted Delivery \$ _____</p>	
<p><input type="checkbox"/> Adult Signature Required \$ _____</p>	
<p><input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p>	
<p>Postage \$ _____</p>	
<p>Total Postage and Fees \$ _____</p>	
<p>Sent To <i>Laura Criswell Blankenship</i> <i>P O Box 494</i> <i>Levelland, TX 79336</i> <i>Street and Apt. No., or P.O.</i> Attn: Connie Martin <i>City, State, Zip+4</i></p>	
<p>PS Form 3800, April 2015 FSN 7550-02-000-9047 See Reverse for Instructions</p>	

COMPLETE THIS SECTION ON DELIVERY			
A. Signature 	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee	B. Received by (Printed Name) 	C. Date of Delivery 6/27/2020
D. Is delivery address different from item 1? If YES, enter delivery address below:			
<p>SENDER: COMPLETE THIS SECTION</p> <p>Complete items 1, 2, and 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Scott Martin Carter 6711 84th Street Lubbock, TX 79424-4763</p> <p>9590 9402 6746 1074 4007 91</p> <p>2. Article Number: 7021 0950 0002 0364 6317</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery Very Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p> <p>M-P Domestic Return Receipt</p>			

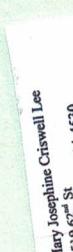
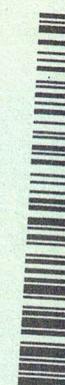
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <u>Connie Martin Blankenship</u> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Connie Martin Blankenship</u></p> <p>C. Date of Delivery <u>11-10-2021</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>1. Article Addressed to:</p> <p>Edna Laura Criswell Blankenship PO Box 494 Levelland, TX 79336 Attn: Connie Martin</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Restricted Delivery</p> <p>4. Delivery Options</p> <p><input checked="" type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> International Mail</p> <p>5. Article Number (Transfer from service label) <u>70221 0950 0002 0364 609</u></p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>			

 U.S. Postal Service™ CERTIFIED MAIL® RECEIVED <i>Domestic Mail Only</i>		 OFFICIAL USE																																					
<p>For delivery information, visit our website at www.usps.com®.</p>																																							
<p>Postmark Here</p>																																							
<table border="1"> <thead> <tr> <th colspan="2">Certified Mail Fee</th> <th colspan="2">Total Postage and Fees</th> </tr> </thead> <tbody> <tr> <td colspan="2">\$</td> <td colspan="2">\$</td> </tr> <tr> <td colspan="2">Extra Services & Fees (check box, add fee as appropriate)</td> <td colspan="2">The Name or Divisives of John C Moore</td> </tr> <tr> <td colspan="2"> <input type="checkbox"/> Return Receipt (handcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____ </td> <td colspan="2"> <hr/> <hr/> <hr/> <hr/> <hr/> </td> </tr> <tr> <td colspan="2">Postage</td> <td colspan="2">Street and Apt. No., or P.O. Box No.</td> </tr> <tr> <td colspan="2">\$</td> <td colspan="2">City, State, ZIP+4</td> </tr> <tr> <td colspan="2">\$</td> <td colspan="2">Sent To</td> </tr> <tr> <td colspan="2">\$</td> <td colspan="2">16 Beachley Dr</td> </tr> <tr> <td colspan="2">\$</td> <td colspan="2">Marlboro, NJ 07746-1785</td> </tr> </tbody> </table>				Certified Mail Fee		Total Postage and Fees		\$		\$		Extra Services & Fees (check box, add fee as appropriate)		The Name or Divisives of John C Moore		<input type="checkbox"/> Return Receipt (handcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____		<hr/> <hr/> <hr/> <hr/> <hr/>		Postage		Street and Apt. No., or P.O. Box No.		\$		City, State, ZIP+4		\$		Sent To		\$		16 Beachley Dr		\$		Marlboro, NJ 07746-1785	
Certified Mail Fee		Total Postage and Fees																																					
\$		\$																																					
Extra Services & Fees (check box, add fee as appropriate)		The Name or Divisives of John C Moore																																					
<input type="checkbox"/> Return Receipt (handcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____		<hr/> <hr/> <hr/> <hr/> <hr/>																																					
Postage		Street and Apt. No., or P.O. Box No.																																					
\$		City, State, ZIP+4																																					
\$		Sent To																																					
\$		16 Beachley Dr																																					
\$		Marlboro, NJ 07746-1785																																					
<p>PS Form 3800, April 2015 PSN 7530-02-000-9047 <i>See Reverse for Instructions</i></p>																																							

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature </p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery 6/28/2021</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: FREIGHTOOL.COM 6/28/2021</p>	
<p>1. Article Addressed to:</p> <p>The Heirs or Beneficiaries of John C Moore 16 Beachley Dr Marlboro, NJ 07746-1785</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input checked="" type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation <input type="checkbox"/> Restricted Delivery</p> <p>6/28/2021</p> <p>4. Insured Mail (over \$500)</p> <p>5. Insured Mail Restricted Delivery (over \$500)</p> <p>6. Article Number 7021 0950 0002 0364 6362</p> <p>7. PS Form 3811, July 2020 PSN 7530-02-000-9053</p> <p>M-F Domestic Return Receipt</p>	

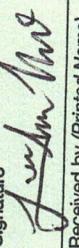
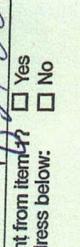
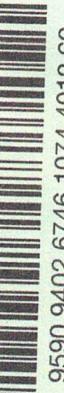
U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>		For delivery information, visit our website at www.usps.com .																													
OFFICIAL USE																															
<input checked="" type="checkbox"/> Certified Mail Fee <input type="checkbox"/> Postmark <input type="checkbox"/> Here																															
<table border="1"> <tr> <td colspan="2">Extra Services & Fees (check box, add fee as appropriate)</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (handcopy)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$ _____</td> </tr> <tr> <td colspan="2">Postage</td> </tr> <tr> <td colspan="2">\$ _____</td> </tr> <tr> <td colspan="2">Total Postage and Fees</td> </tr> <tr> <td colspan="2">\$ _____</td> </tr> <tr> <td colspan="2">Sent To</td> </tr> <tr> <td colspan="2">Shirley Hoy Caple Sleath 1319 Academy Dr Arlington, Texas 76013-2312</td> </tr> <tr> <td colspan="2">Street and Apt. No., or P.O. Box No.</td> </tr> <tr> <td colspan="2">City, State, ZIP+4®</td> </tr> </table>				Extra Services & Fees (check box, add fee as appropriate)		<input type="checkbox"/> Return Receipt (handcopy)	\$ _____	<input type="checkbox"/> Return Receipt (electronic)	\$ _____	<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____	<input type="checkbox"/> Adult Signature Required	\$ _____	<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____	Postage		\$ _____		Total Postage and Fees		\$ _____		Sent To		Shirley Hoy Caple Sleath 1319 Academy Dr Arlington, Texas 76013-2312		Street and Apt. No., or P.O. Box No.		City, State, ZIP+4®	
Extra Services & Fees (check box, add fee as appropriate)																															
<input type="checkbox"/> Return Receipt (handcopy)	\$ _____																														
<input type="checkbox"/> Return Receipt (electronic)	\$ _____																														
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____																														
<input type="checkbox"/> Adult Signature Required	\$ _____																														
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____																														
Postage																															
\$ _____																															
Total Postage and Fees																															
\$ _____																															
Sent To																															
Shirley Hoy Caple Sleath 1319 Academy Dr Arlington, Texas 76013-2312																															
Street and Apt. No., or P.O. Box No.																															
City, State, ZIP+4®																															
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions																															

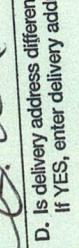
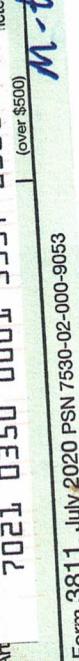
SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY				
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature</p>  <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below:</p> <p>E. Article Addressed to:</p> <p>F. Service Type</p> <p>G. Insured Mail (over \$500)</p>				
<p>John Claude Criswell 9139 CR 2472 Royce City, TX 75189 Attn: Don Criswell</p>		<p>A. Agent</p> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee				
		<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>				
		<p>D. Is delivery address different from item 1? If YES, enter delivery address below:</p>				
		<p>E. Article Addressed to:</p>				
		<p>F. Service Type</p> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>				
		<p>G. Insured Mail (over \$500)</p>				
		<p>H. Article Number</p> <p>7021 0950 0002 0364</p>				
		<p>I. Barcode</p> 				
		<p>J. Domestic Return Receipt</p> <p>M-1</p>				
						PS Form 3811, July 2020 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY		
<p><input type="checkbox"/> Complete item</p> <p><input type="checkbox"/> Print your so +</p>		<p>A. Signature </p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery 6-27-22</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below: </p>		
<p>d 3.</p> <p>Address on the reverse the card to you.</p> <p>back of the mailpiece, use permits.</p> <p>to:</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p>restricted delivery </p> <p>7021 0950 0002 0364 6393</p>		
<p>2. A. </p>		<p>PS Form 3811, July 2020 PSM 7530-02-000-9053</p>		
Domestic Return Receipt 				

<p>U.S. Postal Service™</p> <p>CERTIFIED MAIL® RECEIPT</p> <p><i>Domestic Mail Only</i></p>		<p>For delivery information, visit our website at www.usps.com.</p> <p>OFFICIAL USE</p>																																																
<table border="1"> <tr> <td rowspan="2">Certified Mail Fee</td> <td colspan="3">\$ 98.95</td> </tr> <tr> <td><input type="checkbox"/> Extra Services & Fees (check box, add fee as appropriate)</td> <td>\$ 0.00</td> <td><input type="checkbox"/> Postmark Here</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (hardcopy)</td> <td>\$ 0.00</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic)</td> <td>\$ 0.00</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$ 0.00</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$ 0.00</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$ 0.00</td> <td colspan="2"></td> </tr> <tr> <td>Postage</td> <td colspan="3">\$ 0.00</td> </tr> <tr> <td>Total Postage and Fees</td> <td colspan="3">\$ 98.95</td> </tr> <tr> <td>Sent To</td> <td colspan="3"> John Claude Criswell 9139 CR 2472 Royce City, TX 75189 Attn: Don Criswell </td> </tr> <tr> <td>Street and Apt. No., or P.O. Box</td> <td colspan="3"></td> </tr> <tr> <td>City, State, ZIP/PL4®</td> <td colspan="3"></td> </tr> </table>				Certified Mail Fee	\$ 98.95			<input type="checkbox"/> Extra Services & Fees (check box, add fee as appropriate)	\$ 0.00	<input type="checkbox"/> Postmark Here	<input type="checkbox"/> Return Receipt (hardcopy)	\$ 0.00			<input type="checkbox"/> Return Receipt (electronic)	\$ 0.00			<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 0.00			<input type="checkbox"/> Adult Signature Required	\$ 0.00			<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 0.00			Postage	\$ 0.00			Total Postage and Fees	\$ 98.95			Sent To	John Claude Criswell 9139 CR 2472 Royce City, TX 75189 Attn: Don Criswell			Street and Apt. No., or P.O. Box				City, State, ZIP/PL4®			
Certified Mail Fee	\$ 98.95																																																	
	<input type="checkbox"/> Extra Services & Fees (check box, add fee as appropriate)	\$ 0.00	<input type="checkbox"/> Postmark Here																																															
<input type="checkbox"/> Return Receipt (hardcopy)	\$ 0.00																																																	
<input type="checkbox"/> Return Receipt (electronic)	\$ 0.00																																																	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ 0.00																																																	
<input type="checkbox"/> Adult Signature Required	\$ 0.00																																																	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ 0.00																																																	
Postage	\$ 0.00																																																	
Total Postage and Fees	\$ 98.95																																																	
Sent To	John Claude Criswell 9139 CR 2472 Royce City, TX 75189 Attn: Don Criswell																																																	
Street and Apt. No., or P.O. Box																																																		
City, State, ZIP/PL4®																																																		
<p>PS Form 3800, April 2015 PSN 7530-02-000-9047</p> <p>See Reverse for Instructions</p>																																																		

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com . OFFICIAL USE	
<input type="checkbox"/> Certified Mail Fee <input type="checkbox"/> Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____ <input type="checkbox"/> Postmark Here	
Total Postage and Fees Postage \$ 0.50 Sent To OXY USA WTP Limited Partnership Street and Apt. No. 5 Greenway Plaza, Suite 110 Houston, TX 77046 Attn: Jonathan Gonzales City, State, Zip+4	
PS Form 3800, April 2015 PSN 7530-02-000-9037 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION	
A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
B. Received by (Printed Name)  C. Date of Delivery 	
D. Is delivery address different from item 4? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No	
E. Article Addressed to: SEP Permian, LLC 9655 Katy Freeway, Suite 500 Houston, TX 77024 Attn: Drew Oldis	
 9590 9402 6746 1074 4012 62	
2. Art  7021 0350 0001 3337 6328 M-8 Domestic Return Receipt	
PS Form 3811, July 2020 PSN 7530-02-000-9053	

RECIPIENT: COMPLETE THIS SECTION ON DELIVERY	
A. Signature  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
B. Received by (Printed Name)  C. Date of Delivery  <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
D. Is delivery address different from item 1? If YES, enter delivery address below: <input type="checkbox"/> Yes <input type="checkbox"/> No	
SENDER: COMPLETE THIS SECTION	
1. Article Addressed to: SEP Permian, LLC 9655 Katy Freeway, Suite 500 Houston, TX 77024 Attn: Jonathan Gonzales	
 9590 9402 6746 1074 4012 55	
2. Art  7021 0350 0001 3337 6335 M-8 Domestic Return Receipt	
PS Form 3811, July 2020 PSN 7530-02-000-9053 See Reverse for Instructions	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
For delivery information, visit our website at www.usps.com . OFFICIAL USE	
<input type="checkbox"/> Certified Mail Fee <input type="checkbox"/> Extra Services & Fees (check box, add fee as appropriate) <input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____ <input type="checkbox"/> Postage Total Postage and Fees Postage \$ 0.50 Sent To SEP Permian, LLC 9655 Katy Freeway, Suite 500 Houston, TX 77024 Attn: Drew Oldis Street and Apt. No. or Box City, State, Zip+4	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

TEF	LEEE	T000	0560	T202
7	7	0	0	0

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

Carol Mae Davis
7 Duncan Rd
Pueblo, CO 81001-1647

3. Service Type
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery
 Restricted Delivery

4. Article Addressed to:

2. Art. 7021 0950 0002 0364 6461
 Insured Mail Restricted Delivery
 Insured Mail (over \$500)
M-8 Domestic Return Receipt

PS Form 3811, July 2020 PSN 7530-02-000-9053

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

TEF	LEEE	T000	0560	T202
7	7	0	0	0

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Kathryn Sheats Johnson* Agent Addressee

B. Recited by (Printed Name) *Hilce* C. Date of Delivery *6-26-22*

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

1. Article Addressed to:

2. Art. 9590 9402 6746 1074 4012 93
 Insured Mail Restricted Delivery

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

OFFICIAL USE

TEF	LEEE	T000	0560	T202
7	7	0	0	0

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Kathryn Sheats Johnson* Agent Addressee

B. Recited by (Printed Name) *Hilce* C. Date of Delivery *6-26-22*

C. Service Type
 Adult Signature
 Adult Signature Restricted Delivery
 Certified Mail®
 Certified Mail Restricted Delivery
 Collect on Delivery
 Collect on Delivery Restricted Delivery
 Collect on Delivery Restricted Delivery
 Priority Mail Express®
 Registered Mail™
 Registered Mail Restricted Delivery
 Signature Confirmation™
 Signature Confirmation Restricted Delivery
 Restricted Delivery

D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

1. Article Addressed to:

2. Art. Number (Transfer from service label) *9590 9402 6746 1074 4012 79*

PS Form 3811, July 2020 PSN 7530-02-000-9053

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	
<p>■ Complete items 1, 2, and 3. ■ 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.</p> <p>1. Article Addressed to:</p> <p>Carl Mack Carter 2360 E US Highway 190 San Saba, TX 76877-7729</p> <p>9590 9402 6746 1074 4013 23</p> <p>2. 7021 0950 0002 0364 6430 (over \$500) M - P Domestic Return Receipt</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Every Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Restricted Delivery</p>	
<p>4. Postage</p> <p>555 4950 2000 0560 7202</p>	
<p>5. Total Postage and Fees</p> <p>\$ 0.50</p>	
<p>6. Sent To</p> <p>NinTex Energy, LLC Box 999 Farwell, TX 79325 Attn: Nichols Thomas</p>	
<p>7. Street and Apt. No., or P.O. Box City, State, ZIP+4®</p>	
<p>PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions</p>	

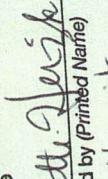
COMPLETE THIS SECTION ON DELIVERY		
A. Signature X WJ	<input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Addressee
B. Received by (Printed Name) WJ	C. Date of Delivery	
D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: Carl Mack Carter 2360 E US Highway 190 San Saba, TX 76877-7729	<input type="checkbox"/> No	
E. Service & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (handcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
F. Postage		
G. Total Postage and Fees		
H. Sent To		
I. Street and Apt. No., or P.O. Box City, State, ZIP+4®		
J. PS Form 3800, April 2015 PSN 7530-02-000-9047		See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY	
A. Signature X	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name) WJ	C. Date of Delivery 6-29-22
D. Is delivery address different from item 1? If YES, enter delivery address below: Carl Mack Carter 2360 E US Highway 190 San Saba, TX 76877-7729	<input type="checkbox"/> Yes <input type="checkbox"/> No
E. Service Type	
<input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Every Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Restricted Delivery	<input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Every Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Restricted Delivery
F. Postage	
G. Total Postage and Fees	
H. Sent To	
I. Street and Apt. No., or P.O. Box City, State, ZIP+4®	
J. PS Form 3800, April 2015 PSN 7530-02-000-9047	See Reverse for Instructions

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
<p>For delivery information, visit our website at www.usps.com.</p> <p>555 4950 2000 0560 7202</p>	
<p>6. Postage</p> <p>555 4950 2000 0560 7202</p>	
<p>7. Total Postage and Fees</p> <p>\$ 0.50</p>	
<p>8. Sent To</p> <p>NinTex Energy, LLC Box 999 Farwell, TX 79325 Attn: Nichols Thomas</p>	
<p>9. Street and Apt. No., or P.O. Box City, State, ZIP+4®</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	

<p>U.S. Postal Service™</p> <p>CERTIFIED MAIL® RECEIPT</p> <p><i>Domestic Mail Only</i></p> <p>OFFICIAL USE</p>	
<p>For delivery information, visit our website at www.usps.com.</p>	
<p>Certified Mail Fee</p> <p>\$ 2259 4960 2000 0560 7207</p>	<p>Extra Services & Fees (check box and fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (radiocopy) \$ _____</p> <p><input type="checkbox"/> Return Receipt (electronic) \$ _____</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery \$ _____</p> <p><input type="checkbox"/> Adult Signature Required \$ _____</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p> <p>Postage</p> <p>\$ 2259 4960 2000 0560 7207</p>
<p>Total Postage and Fees</p> <p>\$ 2259 4960 2000 0560 7207</p>	
<p>Sent To</p> <p>Bilie Beth Moore 1148 FM 1383 Schlemburg, TX 78956 Attn: Pati Niestner</p>	
<p>Street and Apt. No., or P.O. Box</p> <p>City, State, Zip+4®</p>	
<p>PS Form 3800, April 2015 FSN 7530-02-000-9047</p> <p>See Reverse for Instructions</p>	

COMPLETE THIS SECTION ON DELIVERY			
<p>PRINT ITEMS 1, 2, AND 3.</p> <p>Print your name and address on the reverse so that we can return the card to you.</p> <p>Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p>Jerry Criswell 7 Dellwood Lane Canyon, TX 79015 Attn: Jerry Criswell</p> <p>A. Signature </p> <p>B. Received by (Printed Name) Jerry Criswell</p> <p>C. Date of Delivery 07-28-22</p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>			
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Restricted Delivery</p> <p>4. Payment</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>			
<p>5. Signature </p> <p>6. Domestic Return Receipt</p>			
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>			

SENDER: COMPLETE THIS SECTION		RECIPIENT: COMPLETE THIS SECTION ON DELIVERY	
<p>A. Signature</p>  <p>B. Received by (Printed Name)</p> <p><i>Patti Niesner</i></p> <p>C. Date of Delivery</p> <p><i>6-28-22</i></p>		<p>D. Is delivery address different from item 1?</p> <p>If YES, enter delivery address below:</p> <p>D. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Billie Beth Moore 1148 FM 1383 Schulenburg, TX 78956 Attn: Patti Niesner</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail®</p> <p><input checked="" type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Priority Restricted Delivery</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation</p> <p><input type="checkbox"/> Restricted Delivery</p>	
<p>2. Article Number</p> <p>7021 0950 0002 0364 6324</p>		<p>Priority Mail Express®</p> <p>Domestic Return Receipt</p> <p><i>M-B</i></p> <p>(Over \$500)</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>			

<p>U.S. Postal Service™ CERTIFIED MAIL® RECEIVED</p> <p><i>Domestic Mail Only</i></p>													
<p>For delivery information, visit our website at www.usps.com.</p>													
<h1>OFFICIAL USE</h1>													
<p style="text-align: center;">Certified Mail Fee</p>													
<table border="1"> <tr> <td>Extra Services & Fees (check box, add fee as appropriate)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (hardcopy)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$ _____</td> </tr> </table>		Extra Services & Fees (check box, add fee as appropriate)	\$ _____	<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____	<input type="checkbox"/> Return Receipt (electronic)	\$ _____	<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____	<input type="checkbox"/> Adult Signature Required	\$ _____	<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Extra Services & Fees (check box, add fee as appropriate)	\$ _____												
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____												
<input type="checkbox"/> Return Receipt (electronic)	\$ _____												
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____												
<input type="checkbox"/> Adult Signature Required	\$ _____												
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____												
<p style="text-align: right;">Postmark Here</p>													
<p style="text-align: right;"><i>Street and Apt. No., or P.O. Box No.</i></p>													
<p style="text-align: right;"><i>City, State, ZIP+4®</i></p>													
<p style="text-align: right;"><i>PS Form 3800, April 2015 PSN 7530-02-000-9047</i></p>													
<p style="text-align: right;"><i>See Reverse for Instructions</i></p>													

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Velma Walters Moore
1148 FM 1383
Schulenburg, TX 78956
Attn: Patti Niesner



9590 9402 6746 1074 4008 14

2. Article # 7021 0950 0002 0364 6331

PS Form 3801, July 2020 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature	X <i>Velma Walters</i>	Agent <input type="checkbox"/>
B. Received by (Printed Name)	<i>Patti Niesner</i>	Addresssee <input type="checkbox"/>
C. Date of Delivery		6-28-22
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

If YES, enter delivery address below:

3. Service Type	Priority Mail Express® <input type="checkbox"/>
	Registered Mail™ <input type="checkbox"/>
	Adult Signature Restricted Delivery <input type="checkbox"/>
	Certified Mail® <input checked="" type="checkbox"/>
	Certified Mail Restricted Delivery <input type="checkbox"/>
	Delivery <input type="checkbox"/>
	Signature Confirmation™ <input type="checkbox"/>
	Signature Confirmation <input type="checkbox"/>
	Restricted Delivery <input type="checkbox"/>
	Insured Mail Restricted Delivery <input type="checkbox"/>
	(over \$500) <input type="checkbox"/>

Domestic Return Receipt

M-A

U.S. Postal Service™ CERTIFIED MAIL® RECEIVED	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com	
OFFICIAL USE	
Certified Mail Fee	
\$ 000000	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (Handcopy) \$ _____	
<input type="checkbox"/> Return Receipt (Electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$ 000000	
Total Postage and Fees \$ 000000	Velma Walters Moore 1148 FM 1383 Schulenburg, TX 78956 Attn: Patti Niesner
Sent To _____	Street and Apt. No., or P.O. Box _____ City, State, Zip+4 _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0950 0002 0364 6348

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com.
OFFICIAL USE

Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To Bobbie S Davis as sole devisee w/o Donald Carlos Davis 11231 Spring Pine St Apt 1214 San Antonio, TX 78249-2669	
Street and Apt. No., or PO Box	
City, State, ZIP+4	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

U.S. Postal Service™**CERTIFIED MAIL® RECEIPT***Domestic Mail Only*For delivery information, visit our website at www.usps.com.**OFFICIAL USE**

Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To Hettie Patton Davis 2851 Coldwater Ct Midlothian, TX 76065	
Street and Apt. No., or PO Box	
City, State, ZIP+4	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0950 0002 0364 6478

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com.
OFFICIAL USE

Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To Lena Mae Ellis 4213 Homestead Circle San Angelo, Texas 76905-7312	
Street and Apt. No., or PO Box	
City, State, ZIP+4	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0950 0002 0364 6454

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com.
OFFICIAL USE

Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To Marie Cleveland George 417 East 1700 South Salt Lake City, Utah 84115 Attn: Esther Wardle	
Street and Apt. No., or PO Box	
City, State, ZIP+4	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0950 0002 0364 6447

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com.
OFFICIAL USE

Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To Mary Christi Carter Daniels 43 NW Sandy Trail Ln Lawton, OK 73505-9557	
Street and Apt. No., or PO Box	
City, State, ZIP+4	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7021 0350 0001 3337 6452

**U.S. Postal Service™
CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com.
OFFICIAL USE

Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy) \$ _____	
<input type="checkbox"/> Return Receipt (electronic) \$ _____	
<input type="checkbox"/> Certified Mail Restricted Delivery \$ _____	
<input type="checkbox"/> Adult Signature Required \$ _____	
<input type="checkbox"/> Adult Signature Restricted Delivery \$ _____	
Postage \$	
Total Postage and Fees \$	
Sent To COG Operating, LLC 600 W Illinois Ave Midland, TX 79701-9808 Attn: Baylor Mitchell	
Street and Apt. No., or PO Box	
City, State, ZIP+4	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

Carlsbad Current Argus.

PART OF THE USA TODAY NETWORK

Affidavit of Publication

Ad # 0005263668

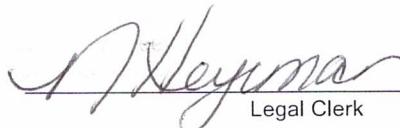
This is not an invoice

JAMES BRUCE ATTORNEY AT LAW
POBOX 1056

SANTA FE, NM 87504

I, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof in editions dated as follows:

05/19/2022



Legal Clerk

Subscribed and sworn before me this May 19, 2022:



State of WI, County of Brown

NOTARY PUBLIC

1-7-05

My commission expires

KATHLEEN ALLEN
Notary Public
State of Wisconsin

Ad # 0005263668

PO #: 5263668

of Affidavits 1

This is not an invoice

EXHIBIT

5

NOTICE

To: COG Operating LLC, OXY USA WTP Limited Partnership, SEP Permian LLC, Kathryn Sheats Johnson, Lena Mae Ellis, Carol Mae Davis, Marie Cleveland George, Edna Laura Criswell Blankenship, Mary Josephine Criswell Lee, John Claude Criswell, Jesse Harold Criswell, John C. Moore, NimTex Energy LLC, Bobbie S. Davis, Donald Carlos Davis, Velma Waters Moore, Billie Beth Moore, Scott Martin Carter, Mary Christi Carter Daniels, Carl Mack Carter, Shirley Hoyt Carole Sheats, and Hettie Patton Davis, or your heirs, devisees, successors, or assigns: Mewbourne Oil Company has filed an application with the New Mexico Oil Conservation Division seeking an order pooling all uncommitted mineral interest owners in the Bone Spring formation in a horizontal spacing unit comprised of the S/2SW/4 of Section 28 and the S/2S/2 of Section 29, Township 20 South, Range 27 East, NMPM. The unit will be dedicated to the Pinta 28/29 B3NM Fed. Com. Well No. 1H. Also to be considered will be the cost of drilling, completing, and equipping the well and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the well, and a 200% charge for the risk involved in drilling, completing, and equipping the well. This matter is scheduled for hearing at 8:15 a.m. on Thursday, June 2, 2022. During the COVID-19 Public Health Emergency, state buildings are closed to the public and the hearing will be conducted remotely. To determine the location of the hearing or to participate in an electronic hearing, go to emnrd.state.nm.us/OCD/hearings or see the instructions posted on the Division's website, <http://emnrd.state.nm.us/OCD/announcements.html>. 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. A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, May 26, 2022. This statement may be filed online with the Division at ocd.hearings@state.nm.us. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date. The attorney for applicant is James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504, jamesbruc@aol.com. The unit is located approximately 8-1/2 miles southeast of Lakewood, New Mexico. #5263668, Current Argus, May 19, 2022

COMPULSORY POOLING APPLICATION CHECKLIST

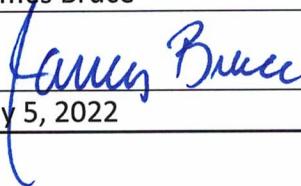
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS

Case:	22672
Date:	July 5, 2022
Applicant	Mewbourne Oil Company
Designated Operator & OGRID (affiliation if applicable)	Mewbourne Oil Company/OGRID No.14744
Applicant's Counsel:	James Bruce
Case Title:	Application of Mewbourne Oil Company for Compulsory Pooling, Eddy County, New Mexico
Entries of Appearance/Intervenors:	
Well Family	Pinta Bone Spring well
Formation/Pool	
Formation Name(s) or Vertical Extent:	Bone Spring Formation
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Bone Spring formation
Pool Name and Pool Code:	
Well Location Setback Rules:	Statewide rules and current horizontal well rules
Spacing Unit Size:	Quarter-quarter sections/40 acres
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	240 acres
Building Blocks:	
Orientation:	West - East
Description: TRS/County	S/2S/2 §29 and S/2SW/4 §28-20S-27E, NMPM, Eddy County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	No
Proximity Tracts: If yes, description	No
Proximity Defining Well: if yes, description	
Applicant's Ownership in Each Tract	Exhibit 2-A
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Pinta 28/29 B3NM Fed. Com. Well No. 1H API No. 30-015-Pending SHL: 970 FSL & 2540 FWL §28 BHL: 440 FSL & 100 FWL §29 FTP: 440 FSL & 2540 FWL §28 LTP: 440 FSL & 100 FWL §29 Third Bone Spring/TVD 8170 feet/MD 15662 feet

EXHIBIT

6

Horizontal Well First and Last Take Points	See above
Completion Target (Formation, TVD and MD)	See above
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$8000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Cha648	Cost + 200%/Exhibit 2, page 2
Notice of Hearing	
Proposed Notice of Hearing	Exhibit 1
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit 4
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit 5
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibit 2-B
Tract List (including lease numbers and owners)	Exhibit 2-B
Pooled Parties (including ownership type)	Exhibit 2-B
Unlocatable Parties to be Pooled	
Ownership Depth Severance (including percentage above & below)	None
Joinder	
Sample Copy of Proposal Letter	Exhibit 2-C
List of Interest Owners (<i>i.e.</i> Exhibit A of JOA)	Exhibit 2-B
Chronology of Contact with Non-Joined Working Interests	Exhibit 2-C
Overhead Rates In Proposal Letter	
Cost Estimate to Drill and Complete	Exhibit 2-C
Cost Estimate to Equip Well	Exhibit 2-C
Cost Estimate for Production Facilities	Exhibit 2-C
Geology	
Summary (including special considerations)	Exhibit 3
Spacing Unit Schematic	Exhibits 2-A and 3-A
Gunbarrel/Lateral Trajectory Schematic	Exhibit 3-C
Well Orientation (with rationale)	Laydown/Exhibit 3
Target Formation	Bone Spring
HSU Cross Section	Exhibit 3-C
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibit 2-A
Tracts	Exhibit 2-B
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-B

General Location Map (including basin)	Exhibits 2-A and 3-A
Well Bore Location Map	Exhibits 2-A and 3-A
Structure Contour Map - Subsea Depth	Exhibit 3-A
Cross Section Location Map (including wells)	Exhibits 3-B and 3-C
Cross Section (including Landing Zone)	Exhibit 3-C
Additional Information	
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	James Bruce
Signed Name (Attorney or Party Representative):	
Date:	July 5, 2022