

**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. 22648**

**NOTICE OF FILING ADDITIONAL EXHIBITS**

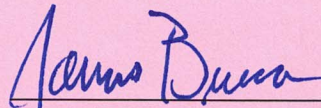
Mewbourne Oil Company hereby submits for filing the following:

Exhibits 2-A (the C-102) and 6 (the pooling checklist). They were revised to include the pool name and pool code.

Revised Exhibit 4, the notice affidavit, which contains all received green cards and returned letters.

Exhibit 7, the certified notice spreadsheet.

Respectfully submitted,



James Bruce  
Post Office Box 1056  
Santa Fe, New Mexico 87504  
(505) 982-2043  
*jamesbruc@aol.com*

Attorney for Mewbourne Oil Company



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

<sup>1</sup> API Number	<sup>2</sup> Pool Code 96381	<sup>3</sup> Pool Name Avalon; Bone Spring
<sup>4</sup> Property Code	<sup>5</sup> Property Name NINA 28/27 B30P FED COM	<sup>6</sup> Well Number 1H
<sup>7</sup> OGRID NO.	<sup>8</sup> Operator Name MEWBOURNE OIL COMPANY	<sup>9</sup> Elevation 3209'

<sup>10</sup> Surface Location

UL or lot no. N	Section 28	Township 20S	Range 27E	Lot Idn	Feet from the 1000	North/South line SOUTH	Feet From the 2540	East/West line WEST	County EDDY
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<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no. P	Section 27	Township 20S	Range 27E	Lot Idn	Feet from the 440	North/South line SOUTH	Feet from the 100	East/West line EAST	County EDDY
--------------------	---------------	-----------------	--------------	---------	----------------------	---------------------------	----------------------	------------------------	----------------

<sup>12</sup> Dedicated Acres	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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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.

<p><sup>16</sup></p> <p><u>CORNER DATA</u> NAD 83 GRID - NM EAST</p> <p><u>GEODETIC DATA</u> NAD 83 GRID - NM EAST</p> <p><u>SURFACE LOCATION</u> N: 560186.1 - E: 555712.4 LAT: 32.5400007° N LONG: 104.2866855° W</p> <p><u>BOTTOM HOLE</u> N: 559585.8 - E: 563668.2 LAT: 32.5383384° N LONG: 104.2608695° W</p> <p>A: FOUND BRASS CAP "1934" N 559216.9 - E 553169.5</p> <p>B: FOUND BRASS CAP "1942" N 561871.2 - E 553179.3</p> <p>C: CALCULATED CORNER N 564525.5 - E 553189.8</p> <p>D: FOUND BRASS CAP "1942" N 564496.2 - E 555846.6</p> <p>E: FOUND BRASS CAP "1942" N 564470.0 - E 558504.7</p> <p>F: FOUND BRASS CAP "1942" N 564416.2 - E 561154.1</p> <p>G: FOUND BRASS CAP "1942" N 564411.2 - E 563796.1</p> <p>H: FOUND BRASS CAP "1942" N 561778.2 - E 563779.6</p> <p>I: FOUND BRASS CAP "1942" N 559145.3 - E 563765.8</p> <p>J: FOUND BRASS CAP "1942" N 559161.8 - E 561127.5</p> <p>K: FOUND BRASS CAP "1942" N 559153.2 - E 558477.3</p> <p>L: FOUND BRASS CAP "1942" N 561826.2 - E 558488.9</p>		<p><sup>17</sup> OPERATOR CERTIFICATION</p> <p>EXHIBIT 2A</p> <p>order heretofore entered by the division.</p> <p>Signature _____ Date _____</p> <p>Printed Name _____</p> <p>E-mail Address _____</p>
<p>© N 89°22'03" W 2657.62' N 89°26'05" W 2658.79' N 88°50'15" W 2650.64' N 89°53'33" W 2642.63'</p> <p>N 00°12'48" E 2654.96' N 00°13'36" E 2654.99' N 00°21'29" E 2633.75'</p> <p>N 00°18'01" E 2633.60'</p> <p>2540'</p> <p>1000'</p> <p>28</p> <p>27</p> <p>100'</p> <p>B.H.</p> <p>440'</p> <p>N 89°18'39" W 2654.72' N 89°18'52" W 2654.83' S 89°48'48" W 2650.86' N 89°38'25" W 2639.02'</p>		<p>© <sup>18</sup> SURVEYOR CERTIFICATION</p> <p>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.</p> <p>04/05/2022 Date of Survey</p> <p>Signature and Seal of Professional Surveyor</p> <p>19680 Certificate Number</p> <p>ROBERT M. HOWETT NEW MEXICO 19880 PROFESSIONAL SURVEYOR</p>

Job No.:LS22040399

**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. 22648**

**SELF-AFFIRMED STATEMENT OF NOTICE**

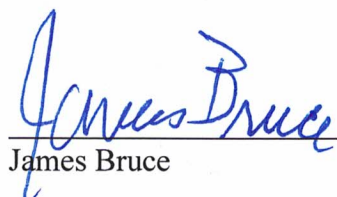
COUNTY OF SANTA FE    )  
                                  ) ss.  
STATE OF NEW MEXICO    )

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

Revised  
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](mailto: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. 22648), 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/2SE/4 of Section 28 and the S/2S/2 of Section 27, Township 20 South, Range 27 East, NMPM. The unit will be dedicated to the Nina 28/27 B3OP 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](http://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](mailto: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

Canyon Draw Resources, LLC  
3333 Lee Parkway, Suite 750  
Dallas, Texas 75219  
Attn: Erin Devlin

Sabinal Energy Operating LC  
1780 Hughes Landing Boulevard, Suite 1200  
The Woodlands, TX 77380  
Attn: Nicole Reeves

SSB Production LC  
PO Box 998  
Ardmore, OK 73402  
Attn: Bane Bigbie

Bane Bigbie  
PO Box 998  
Ardmore, OK 73402-0998

The James K. Lusk and Martha L. Lusk Trust  
PO Box 1310  
Wilsonville, Oregon 97070

JTD Resources  
PO Box 3422  
Midland, TX 79702  
Attn: Dan Leonard

Branko, Inc  
Address Unknown

Permian Basin Investment Corporation  
648 Petroleum Bldg.  
Roswell, NM 88201  
Attn: Land Department



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**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
**Total Postage and Fees** \$  
 Sent To Subinal Energy Operating LC  
 1780 Hughes Landing Boulevard, Suite 1200  
 The Woodlands, TX 77380  
 Attn: Nicole Reeves  
 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

Postmark Here

9629 2EEE 1000 05ED 1202

**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:

Canyon Draw Resources, LLC  
 3333 Lee Parkway, Suite 750  
 Dallas, Texas 75219  
 Attn: Erin Devlin

2. Article Addressed to:

7021 0350 0001 3337 6304

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

**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:

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

Domestic Return Receipt

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Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
**Total Postage and Fees** \$  
 Sent To Subinal Energy Operating LC  
 1780 Hughes Landing Boulevard, Suite 1200  
 The Woodlands, TX 77380  
 Attn: Nicole Reeves  
 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

Postmark Here

**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:

Subinal Energy Operating LC  
 1780 Hughes Landing Boulevard, Suite 1200  
 The Woodlands, TX 77380  
 Attn: Nicole Reeves

2. Article Addressed to:

7021 0350 0001 3337 6298

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

**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:

3. Service Type  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Signature Confirmation™  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Restricted Delivery

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40E9 2EEE 1000 05ED 1202

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Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
**Total Postage and Fees** \$  
 Sent To Canyon Draw Resources, LLC  
 3333 Lee Parkway, Suite 750  
 Dallas, Texas 75219  
 Attn: Erin Devlin  
 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

Postmark Here



**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:

SSB Production LC  
 PO Box 998  
 Ardmore, OK 73402  
 Attn: Bane Bigbie

9590 9402 6746 1074 4017 50

2. Article Number (Transfer from service label)  
 7021 0350 0001 3337 6281

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Bane Bigbie C. Date of Delivery Jun 27 2022

D. Is delivery address different from item 1? ☐ Yes ☐ No 401  
 If YES, enter delivery address below:

3. Service Type  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™ Delivery

Domestic Return Receipt MI - NM

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**OFFICIAL USE**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Postage and Fees \$

Postmark Here

Sent To SSB Production LC  
 PO Box 998  
 Ardmore, OK 73402  
 Attn: Bane Bigbie  
 Street and Apt. No., ci  
 City, State, ZIP+4®

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



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**OFFICIAL USE**

Certified Mail Fee  
\$

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  
Permian Basin Investment Corporation  
648 Petroleum Bldg.  
Roswell, NM 88201  
Attn: Land Department

Street and Apt. No., c  
City, State, ZIP+4®

Postmark Here

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**OFFICIAL USE**

Certified Mail Fee  
\$

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  
JTD Resources  
PO Box 3422  
Midland, TX 79702  
Attn: Dan Leonard

Street and Apt. No., c  
City, State, ZIP+4®

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Certified Mail Fee  
\$

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  
Bane Bigbie  
PO Box 998  
Ardmore, OK 73402-0998

Street and Apt. No., or PO Box No.  
City, State, ZIP+4®

Postmark Here

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

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Certified Mail Fee  
\$

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  
The James K Lusk and Martha L Lusk Trust  
PO Box 1310  
Wilsonville, Oregon 97070

Street and Apt. No., or  
City, State, ZIP+4®

Postmark Here

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



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  <input checked="" type="checkbox"/> <i>Paula Fyfe</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Bane Bigbie            PO Box 998            Ardmore, OK 73402-0998</p>		<p>B. Received by (Printed Name)  <i>Paula Fyfe</i></p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7021 0350 0001 3337 6274</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p>	

Domestic Return Receipt

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  <input checked="" type="checkbox"/> <i>Debbie Green</i> <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>JTD Resources            PO Box 3422            Midland, TX 79702            Attn: Dan Leonard</p>		<p>B. Received by (Printed Name)  <i>Debbie Green</i></p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7021 0350 0001 3337 6250</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes            If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p>	

Domestic Return Receipt

S6259.180

US POSTAGE  
FIRST-CLASS  
062513292292  
87501  
000133528



Permian Basin Investment Corporation  
648 Petroleum Bldg.  
Roswell, NM 88201  
Attn: Land Department

7021 0350 0001 3337 6243

UTF  
87504>1056

.. 9333190245063477

James Bruce  
P.O. Box 1056  
Santa Fe, New Mexico 87504

S86259.170

\$7.33  
US POSTAGE  
FIRST-CLASS  
062513292292  
87501  
000133528



The James K Lusk and Martha L Lusk Trust  
PO Box 1310  
Wilsonville, Oregon 97070

7021 0350 0001 3337 6267

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL®



James Bruce  
P.O. Box 1056  
Santa Fe, New Mexico 87504

9707081310NBO16  
87504>1056



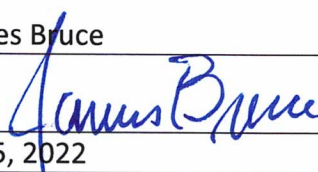
**COMPULSORY POOLING APPLICATION CHECKLIST****ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS**

<b>Case:</b>	<b>22648</b>
<b>Date:</b>	<b>July 5, 2022</b>
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	Nina Bone Spring well
<b>Formation/Pool</b>	
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:	Avalon; Bone Spring (Pool Code 96781)
Well Location Setback Rules:	Statewide rules and current horizontal well rules
Spacing Unit Size:	Quarter-quarter sections/40 acres
<b>Spacing Unit</b>	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	240 acres
Building Blocks:	
Orientation:	West - East
Description: TRS/County	S/2S/2 §27 and S/2SE/4 §28-20S-27E, NMPM, Eddy County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes
<b>Other Situations</b>	
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
<b>Well(s)</b>	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Nina 28/27 B3OP Fed. Com. Well No. 1H API No. 30-015-Pending SHL: 1000 FSL & 2540 FWL §28 BHL: 440 FSL & 100 FEL §27 FTP: 440 FSL & 2540 FEL §28 LTP: 440 FSL & 100 FEL §27 Third Bone Spring/TVD 8177 feet/MD 15878 feet

Revised  
EXHIBIT 6

Horizontal Well First and Last Take Points	See above
Completion Target (Formation, TVD and MD)	See above
<b>AFE Capex and Operating Costs</b>	
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
<b>Notice of Hearing</b>	
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
<b>Ownership Determination</b>	
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
<b>Joinder</b>	
Sample Copy of Proposal Letter	Exhibit 2-C
List of Interest Owners (i.e. 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
<b>Geology</b>	
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
<b>Forms, Figures and Tables</b>	
C-102	Exhibit 2-A
Tracts	Exhibit 2-B
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-B



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
<b>Additional Information</b>	
<b>CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.</b>	
<b>Printed Name</b> (Attorney or Party Representative):	James Bruce
<b>Signed Name</b> (Attorney or Party Representative):	
<b>Date:</b>	July 5, 2022

## CASE NO. 22648

STATUS OF CERTIFIED NOTICE (REVISED)

<u>INTEREST OWNER</u>	<u>MAILING DATE</u>	<u>RECEIPT DATE</u>	<u>CARD RETURNED</u>
Canyon Draw Resources LLC	June 16, 2022	June 27, 2022	Yes
Sabinal Energy Operating LC	"	Unknown	"
SSB Production LC	"	June 27, 2022	"
Bane Bigbie	"	June 30, 2022	
The James K. Lusk and Martha L. Lusk Trust	"	Envelope returned	No
JTD Resources	"	Unknown	Yes
Branko, Inc.	Address Unknown		
Permian Basin Investment Corporation,	June 16, 2022	Envelope returned	No

EXHIBIT

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