

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

**APPLICATIONS OF CAZA OIL PETROLEUM, LLC
FOR COMPULSORY POOLING, LEA COUNTY,
NEW MEXICO.**

Case Nos. 22042 - 22047

NOTICE OF FILING ADDITIONAL EXHIBITS

Caza Petroleum, LLC (“Caza”) hereby submits the following exhibits in the above cases, which were heard on February 17, 2022:

A. Exhibit 4.1, which contains the certified white and green cards which were intended to be attached as part of original Exhibit 4 in each case.

B. Exhibit 6, the pooling checklists in all of the above cases, which were intended to be submitted at the hearing in this matter.

The late filing of these exhibits is due to the undersigned’s printer running empty of toner very late in the evening of the day on which the exhibits were due to be filed. This necessitated a trip the next day to two Office Depot stores to locate the correct toner colors, without which documents would not print from the computer.

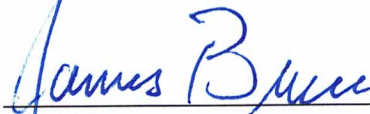
C. Exhibit 7 (new), which are land plats (with a listing of working interest owners), as follows:

Exhibit 7 for Case Nos. 22042 and 22043, covering the E/2SW/4 §8 and E/2W/2 §17;
Exhibit 7 for Case Nos. 22044 and 22045, covering the W/2SE/4 §8 and W/2E/2 §17;
and
Exhibit 7 for Case Nos. 22046 and 22047, covering the E/2SE/4 §8 and E/2E/2 §17.

Each one covers both the both the Bone Spring and Wolfcamp formations, in which there are no depth severances.

D. In addition, in Case Nos. 22042 and 22044, the C-102s for the wells reflect the former 330 foot setbacks for first and last take points, rather than the current 100 foot setbacks. I inquired of Caza’s landman in February whether those C-102 footages were being changed. When I contacted Caza again more recently I learned the landman had taken another job. I have again made a request to determine the correct footages, and will update the Division shortly. In the pooling checklists the C-102 footages submitted at the hearing were used.

Respectfully submitted,



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

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

APPLICATIONS OF CAZA PETROLEUM, LLC
FOR COMPULSORY POOLING, LEA COUNTY,
NEW MEXICO.

Case Nos. 22042 - 22047

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 Caza Petroleum, LLC.
3. Caza Petroleum, LL has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the applications filed herein.
4. Notice of the applications 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: 2/15/22

James Bruce
James Bruce

EXHIBIT 4.1

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

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 **CHLP Interests, LLC**

Attn: **Robbie Christensen**

Street and Apt. No., or P.O. Box **2303 W. Louisiana**

City, State, Zip+4® **Midland, TX 79701**

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

Postmark Here

9726 5960 2000 0560 7202

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Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **CHLP Interests, LLC**

Attn: **Robbie Christensen**

Street and Apt. No., or P.O. Box **2303 W. Louisiana**

City, State, Zip+4® **Midland, TX 79701**

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

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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:

Alpar Energy, LP
Attn: **Brent Allen**
320 S.E. 24th Avenue
Perryton, TX 79070

2. Article Addressed to:

CHLP Interests, LLC
Attn: **Robbie Christensen**
2303 W. Louisiana
Midland, TX 79701

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Restricted Delivery

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Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

CHLP Interests, LLC
Attn: **Robbie Christensen**
2303 W. Louisiana
Midland, TX 79701

2. Article Addressed to:

CHLP Interests, LLC
Attn: **Robbie Christensen**
2303 W. Louisiana
Midland, TX 79701

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

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Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To **Alpar Energy, LP**

Attn: **Brent Allen**

Street and Apt. No., or P.O. Box **320 S.E. 24th Avenue**

City, State, Zip+4® **Perryton, TX 79070**

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

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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To **D & M Snelson Properties, LP**

Attn: Denny Snelson

1510 W Texas

Midland, TX 79701

Street and Apt. No., or P.O. Box

City, State, ZIP+4®

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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:

Kantech Properties, LLC
Attn: Hal Brockett/Ryan McNeel
24 Smith Road, Suite 400
Midland, TX 79705

9590 9402 5019 9063 1828 22

7021 0950 0002 0365 9720

PS Form 3811, July 2015 PSN 7530-02-000-9063

COMPLETE THIS SECTION ON DELIVERY

A. Signature B. Received by (Printed Name) C. Date of Delivery Agent Addressee

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

3. Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Return Receipt for Merchandise

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

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Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To **D & M Snelson Properties, LP**

Attn: Denny Snelson

1510 W Texas

Midland, TX 79701

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

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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:

D & M Snelson Properties, LP
Attn: Denny Snelson
1510 W Texas
Midland, TX 79701

9590 9402 5019 9063 1828 53

7021 0950 0002 0365 9751

PS Form 3811, July 2015 PSN 7530-02-000-9063

COMPLETE THIS SECTION ON DELIVERY

A. Signature B. Received by (Printed Name) C. Date of Delivery Agent Addressee

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

3. Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Return Receipt for Merchandise

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

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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 **Kantech Properties, LLC**

Attn: Hal Brockett/Ryan McNeel

24 Smith Road, Suite 400

Midland, TX 79705

Street and Apt. No.

City, State, ZIP+4®

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SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3.

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Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kantech Properties, LLC
Attn: Hal Brockett/Ryan McNeel
24 Smith Road, Suite 400
Midland, TX 79705

9590 9402 5019 9063 1828 22

7021 0950 0002 0365 9720

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COMPLETE THIS SECTION ON DELIVERY

A. Signature B. Received by (Printed Name) C. Date of Delivery Agent Addressee

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

3. Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Return Receipt for Merchandise

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation 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 **Chevron U.S.A. Inc.**
6301 Deauville Boulevard
Midland, Texas 79706

Street and Apt. No., or P.O. Box No. _____

City, State, ZIP+4® _____

Attention: **Permitting Team**

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

Postmark Here

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *M. Brown*

B. Received by (Printed Name) **Marie Brown** C. Date of Delivery **1-31-22**

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

3. Service Type

Adult Signature Registered Mail™

Adult Signature Restricted Delivery Registered Mail Restricted Delivery

Certified Mail® Certified Mail Restricted Delivery

Collect on Delivery Return Receipt for Merchandise

Insured Mail Restricted Delivery (over \$500)

Priority Mail Express®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Domestic Return Receipt

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:

Chevron U.S.A. Inc.
6301 Deauville Boulevard
Midland, Texas 79706

Attention: **Permitting Team**

2. Article Number (Manual)

7021 0950 0002 0367 1074

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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:

Gary J. Lamb, Inc.
Attn: Gary Lamb
3327 Caldera Blvd.
Midland, TX 79707

7021 0950 0002 0365 9775

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

X *G. Lamb*

B. Received by (Printed Name) **G. Lamb** 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®

Adult Signature Registered Mail™

Adult Signature Restricted Delivery Registered Mail Restricted Delivery

Certified Mail® Certified Mail Restricted Delivery

Collect on Delivery Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail Restricted Delivery (over \$500)

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 **Gary J. Lamb, Inc.**
Attn: Gary Lamb
3327 Caldera Blvd.
Midland, TX 79707

Street and Apt. No., or P.O. Box No. _____

City, State, ZIP+4® _____

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2198 9821
0365 0000 2000 0950 0560 7202

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Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James D. Snelson
1510 W Texas
Midland, TX 79701

2. A. Signature: *[Signature]*
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™
 Restricted Delivery

City, State, Zip+4®
PS Form 3800, April 2015 PSN 7530-02-000-9047

Domestic Return Receipt

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™
 Restricted Delivery

City, State, Zip+4®
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Postmark Here

James D. Snelson
1510 W Texas
Midland, TX 79701

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See Reverse for Instructions

0266 9821
0365 0000 2000 0950 0560 7202

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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To **Marks Oil, Inc.**

Attn: Stephen K. Marks
1775 Sherman Street, Suite 2015
Denver, CO 80203-4319

City, State, Zip+4® _____

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9026 5960 2000 0000 0950 0000 2021

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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 **Marks Oil, Inc.**

Attn: Stephen K. Marks
1775 Sherman Street, Suite 2015
Denver, CO 80203-4319

City, State, Zip+4® _____

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1. Article Addressed to:

Marks Oil, Inc.
Attn: Stephen K. Marks
1775 Sherman Street, Suite 2015
Denver, CO 80203-4319

2. Article Addressed to:

Article Addressed to Restricted Delivery (over \$500)

7021 0950 0002 0365 9706

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Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To **Marshall B. Miller, Jr.**

112 E. Pecan St., Suite 2400
San Antonio, TX 78205

City, State, Zip+4® _____

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6896 5960 2000 0000 0950 0000 2021

7202 0950 0000 0367 1081

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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Postmark Here _____

**Glenbrook Partners DE, LTD.,
Production and Development Series**
Attn: Marshall Miller
112 E. Pecan St., Suite 2400
San Antonio, TX 78205

City, State, ZIP+4® _____

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Article Addressed to:

Broughton Petroleum Inc.
Attn: Lois Krennek
1205 Sillman Street
Sealy, TX 77474

City, State, ZIP+4® _____

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee Date of Delivery

X *Lois Krennek*

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:

77474-0000 POST OFFICE

JAN 31 2022

77474-0000

3. Service Type

Priority Mail Express®

Registered Mail™

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Certified Mail Restricted Delivery

Certified Mail Restricted Delivery (over \$500)

7021 0950 0002 0365 9744

Domestic Return Receipt

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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 \$ _____

Postmark Here _____

Broughton Petroleum Inc.
Attn: Lois Krennek
1205 Sillman Street
Sealy, TX 77474

City, State, ZIP+4® _____

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

7202 0950 0000 0365 9744

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.

Article Addressed to:

**Glenbrook Partners DE, LTD.,
Production and Development Series**
Attn: Marshall Miller
112 E. Pecan St., Suite 2400
San Antonio, TX 78205

City, State, ZIP+4® _____

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee Date of Delivery

X *Arana Garza*

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™

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Certified Mail Restricted Delivery

Certified Mail Restricted Delivery (over \$500)

7021 0950 0002 0367 1081

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 Here \$ _____

Total Postage and Fees \$ _____

Wallico Investments, LLC
Attn: Gary Wallace
627 Eastwood Avenue
Fort Worth, TX 76107

Sent To _____
Street and Apt. N. _____
City, State, ZIP+4 _____

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

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:

Lynn Charuk
P. O. Box 52370
Midland, TX 79710

9590 9402 5019 9063 1828 91

2. Article Addressed to:

7021 0950 0002 0367 1067

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail (over \$500)

Domestic Return Receipt

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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage Here \$ _____

Total Postage and Fees \$ _____

Wallico Investments, LLC
Attn: Gary Wallace
627 Eastwood Avenue
Fort Worth, TX 76107

Sent To _____
Street and Apt. N. _____
City, State, ZIP+4 _____

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

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:

Wallico Investments, LLC
Attn: Gary Wallace
627 Eastwood Avenue
Fort Worth, TX 76107

9590 9402 6746 1074 2436 71

2. Article Addressed to:

7021 0950 0002 0367 1012

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail (over \$500)

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

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 Fee \$ _____

O'Brien Oil & Gas, Inc.

Attn: Mike O'Brien

P. O. Box 1743

Street and Apt. No., or Midland, TX 79702

City, State, Zip+4®

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

9407 2960 2000 0560 7202

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:

Cinco Tierras, LLC
Attn: Pat Crossley
805 N. Richardson Avenue
Roswell, NM 88201

9590 9402 6746 1074 2436 64

7021 0950 0002 0367 1029

2. Article Number (Transfer from service label)

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

A. Signature *[Signature]*

B. Received by (Printed Name) _____

C. Date of Delivery *7/11/20*

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

3. Service Type

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Adult Signature Restricted Delivery

Certified Mail®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Restricted Delivery

Domestic Return Receipt

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

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

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 Fee \$ _____

Cinco Tierras, LLC
Attn: Pat Crossley
805 N. Richardson Avenue
Roswell, NM 88201

9590 9402 5019 9063 1829 21

7021 0950 0002 0367 1036

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

9407 2960 2000 0560 7202

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:

O'Brien Oil & Gas, Inc.
Attn: Mike O'Brien
P. O. Box 1743
Midland, TX 79702

9590 9402 5019 9063 1829 21

7021 0950 0002 0367 1036

2. Article Number (Transfer from service label)

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]*

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™

Registered Mail Restricted Delivery

Adult Signature Restricted Delivery

Certified Mail®

Signature Confirmation™

Signature Confirmation Restricted Delivery

Collect on Delivery

Collect on Delivery Restricted Delivery

Return Receipt for Merchandise

Domestic Return Receipt

**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 \$ _____

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 **Devon Energy Production Company, L.P.**
333 West Sheridan Avenue
Oklahoma City, Oklahoma 73102-5015

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

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

9596 5960 2000 0560 7202

**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 \$ _____

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 **Devon Energy Production Company, L.P.**
333 West Sheridan Avenue
Oklahoma City, Oklahoma 73102-5015

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

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

9596 5960 2000 0560 7202

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

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:

Mayhill Oil Corporation
P.O. Box 5334
Midland, TX 79704

9590 9402 5019 9063 1642 62

7021 0950 0002 0365 9881 (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressed

B. Received by (Printed Name) OFFER Date of Delivery 4/6/2022

D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

3. Service Type

Adult Signature

Adult Signature Restricted Delivery

Certified Mail

Certified Mail Restricted Delivery

Collect on Delivery

Restricted Delivery

Signature Confirmation

Signature Confirmation Restricted Delivery

Priority Mail Express

Registered Mail

Registered Mail Restricted Delivery

Return Receipt for Merchandise

Signature Confirmation Restricted Delivery

**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 \$ _____

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 **Mayhill Oil Corporation**
P.O. Box 5334
Midland, TX 79704

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

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

7202 0950 0002 0365 9881

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

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 \$

Postmark
Here

Postage

Total Postage and

Sent To
Eagle Owl LLC
Attn: Bruce Blakemore
1901 N. Akard
Street and Apt. No.
Dallas, TX 75201
City, State, Zip+4

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

6296 5965 9365 2000 0950 0650 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:

Nance Resources, Inc.
Attn: Brian Cebull
2924 Millennium Circle, Suite A
Billings, MT 59102

9590 9402 6507 0346 2300 39

2. Article Addressed to:
7021 0950 0002 0365 9836

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

COMPLETE THIS SECTION ON DELIVERY

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

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

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

(over \$500)

Domestic Return Receipt

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

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 \$

Postmark
Here

Postage

Total Postage

Sent To
Nance Resources, Inc.
Attn: Brian Cebull
2924 Millennium Circle, Suite A
Billings, MT 59102
Street and Apt. No.
City, State, Zip+4

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

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:

Eagle Owl LLC
Attn: Bruce Blakemore
1901 N. Akard
Dallas, TX 75201

9590 9402 6507 0346 2300 46

2. Article Addressed to:
7021 0950 0002 0365 9829

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

COMPLETE THIS SECTION ON DELIVERY

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

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

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

(over \$500)

Domestic Return Receipt

4986 5965 9365 2000 0950 0650 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:

Dale F. & Jean F. Dorn Testamentary Trust
 f/b/o Dale F. Dorn
 Attn: Tucker Dorn
 421 Morningside Drive
 San Antonio, TX 78209

9590 9402 6507 0346 2300 60

2. Art 7021 0950 0002 0365 9805 (over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature EBB C19 Agent Addressee

B. Received by (Printed Name) _____ C. Date of Delivery 1/31

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Restricted Delivery	
<input type="checkbox"/> Registered Delivery	

Domestic Return Receipt

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 \$ _____

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 \$ _____

Dale F. & Jean F. Dorn Testamentary Trust
 f/b/o Dale F. Dorn
 Attn: Tucker Dorn
 421 Morningside Drive
 San Antonio, TX 78209

Street and Apt. N
 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	\$
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	\$

Postmark
Here

HAT Creek Exploration
 Sent To **Attn: John Dorn**
2900 Wesleyan, Suite 430
 Street and Apt. No., or **Houston, TX 77027**
 City, State, ZIP+4®

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

7021 0950 0002 0365 9799

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	\$
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	\$

Postmark
Here

McMullen Minerals, LLC
 Sent To **Attn: William Malloy**
P.O. Box 470857
 Street and A **Ft. Worth, Texas 76147**
 City, State, ZIP+4®

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

7021 0950 0002 0365 9843

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	\$
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	\$

Postmark
Here

Escondido Oil & Gas, LLC
 Sent To **P.O. Box 51390**
Midland, TX 79710
 Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

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

7021 0950 0002 0365 9867

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	\$
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	\$

Postmark
Here

BriLi, LLC
 Sent To **213 5 Sedona Hills Parkway**
Las Cruces, NM 88011
 Street and Apt. No., or
 City, State, ZIP+4®

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

7021 0950 0002 0365 9874

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	\$
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	\$

Postmark
Here

Dog Tired Investments, LLC
 Sent To **1118 Breckenridge Dr.**
Midland, TX 79705
 Street and Apt. No., or
 City, State, ZIP+4®

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

7021 0950 0002 0365 9904

7021 0950 0002 0365 9911

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

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	\$

Postmark Here

Sent To **Saphire Royalties, Inc.**
P.O. Box 682
Street and Apt. No., or P.O. Box No. **Midland, TX 79702**
City, State, ZIP+4[®]

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

7021 0950 0002 0367 1043

U.S. Postal ServiceTM
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Domestic Mail Only

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

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	\$

Postmark Here

Sent To **JSTM Energy Investments, LLC**
Attn: John Pool
Street and Apt. No. **507 N. Marienfeld Street, Suite 100**
Midland, TX 79701
City, State, ZIP+4[®]

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

7021 0950 0002 0367 1005

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

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	\$

Postmark Here

Sent To **Tiger Creek Capital Partners, LP**
Attn: John Barnidge
Street and Apt. No. **1200 Barton Creek Blvd., No. 24**
Austin, TX 78735
City, State, ZIP+4[®]

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

7021 0950 0002 0365 9737

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

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	\$

Postmark Here

Sent To **Wallace Investment Group, LLC**
Attn: Austin Wallace
Street and Apt. No. **1608 N. K Street**
Midland, Texas 79701
City, State, ZIP+4[®]

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

7021 0950 0002 0365 9768

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
Domestic Mail Only

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

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	\$

Postmark Here

Sent To **America West Resources, LLC**
Attn: Clay Lamb
Street and Apt. No., or P.O. Box No. **P. O. Box 3383**
Midland, TX 79702
City, State, ZIP+4[®]

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

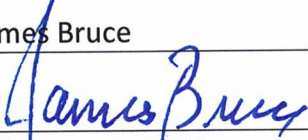
COMPULSORY POOLING APPLICATION CHECKLIST**ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS**

Case:	22042
Date	February 17, 2022
Applicant	Caza Petroleum, LLC
Designated Operator & OGRID (affiliation if applicable)	Caza Operating, LLC/OGRID No. 249099
Applicant's Counsel:	James Bruce
Case Title:	Application of Caza Petroleum, LLC for Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	
Well Family	Desert Rose Wells
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:	Featherstone; Bone Spring/Pool Code 24250
Well Location Setback Rules:	Statewide rules and current horizontal well rules
Spacing Unit Size:	Quarter-quarter Section/40 acre
Spacing Unit	
Type (Horizontal/Vertical)	Vertical
Size (Acres)	240 acres
Building Blocks:	40 acres
Orientation:	South-North
Description: TRS/County	E/2SE/4 §8 and E/2E/2 §17-20S-35E, NMPM, Lea 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	Yes
Proximity Defining Well: if yes, description	
Applicant's Ownership in Each Tract	Exhibit 2-C
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Desert Rose Fed. Com. Well No. 8H API No. 30-025-47759 SHL: 35 FSL & 800 FEL §17 BHL: 2398 FSL & 958 FEL §8 FTP: 330 FSL & 965 FEL §17 LTP: 2338 FSL & 958 FEL §8 Third Bone Spring/TVD 11534 feet/MD 19230 feet

EXHIBIT

6

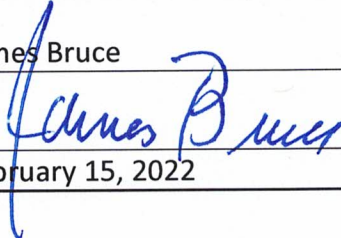
	Desert Rose Fed. Com. Well No. 10H API No. 30-025-47330 SHL: 35 FSL & 740 FEL §17 BHL: 2400 FSL & 360 FEL §8 FTP: 330 FSL & 360 FEL §17 LTP: 2340 FSL & 360 FEL §8 Second Bone Spring/TVD 11534 feet/MD 19230 feet
Horizontal Well First and Last Take Points	See above
Completion Target (Formation, TVD and MD)	See above
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$7500
Production Supervision/Month \$	\$750
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	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	2-C
Tract List (including lease numbers and owners)	Exhibit 2-C
Pooled Parties (including ownership type)	Exhibit 2-C
Unlocatable Parties to be Pooled	
Ownership Depth Severance (including percentage above & below)	None
Joinder	
Sample Copy of Proposal Letter	Exhibit 2-D
List of Interest Owners (<i>i.e.</i> Exhibit A of JOA)	Exhibit 2-C
Chronology of Contact with Non-Joined Working Interests	Exhibit 2
Overhead Rates In Proposal Letter	
Cost Estimate to Drill and Complete	Exhibit 2-E
Cost Estimate to Equip Well	Exhibit 2-E
Cost Estimate for Production Facilities	Exhibit 2-E
Geology	
Summary (including special considerations)	Exhibit 3
Spacing Unit Schematic	Exhibits 2-A and 3-A
Gunbarrel/Lateral Trajectory Schematic	Exhibit 3-A-C
Well Orientation (with rationale)	Standup/Exhibit 3
Target Formation	Bone Spring

HSU Cross Section	Exhibit 3-C
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibits 2-A and 2-B
Tracts	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-C
General Location Map (including basin)	Exhibit 3-A
Well Bore Location Map	Exhibits 2-A and 2-B
Structure Contour Map - Subsea Depth	Exhibit 3-A
Cross Section Location Map (including wells)	Exhibit 3-A
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:	February 15, 2022

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

Case:	22043	
Date	February 17, 2022	
Applicant	Caza Petroleum, LLC	
Designated Operator & OGRID (affiliation if applicable)	Caza Operating, LLC/OGRID No. 249099	
Applicant's Counsel:	James Bruce	
Case Title:	Application of Caza Petroleum, LLC for Compulsory Pooling, Lea County, New Mexico	
Entries of Appearance/Intervenors:		
Well Family	Desert Rose Wells	
Formation/Pool		
Formation Name(s) or Vertical Extent:	Wolfcamp Formation	
Primary Product (Oil or Gas):	Oil	
Pooling this vertical extent:	Entire Wolfcamp formation	
Pool Name and Pool Code:	Klein Ranch; Wolfcamp/Pool Code 96989	
Well Location Setback Rules:	Statewide rules and current horizontal well rules	
Spacing Unit Size:	Quarter-quarter Section/40 acre	
Spacing Unit		
Type (Horizontal/Vertical)	Vertical	
Size (Acres)	240 acres	
Building Blocks:	40 acres	
Orientation:	South-North	
Description: TRS/County	E/2SE/4 §8 and E/2E/2 §17-20S-35E, NMPM, Lea County	
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes	
Other Situations		
Depth Severance: Y/N. If yes, description	No	EXHIBIT 6
Proximity Tracts: If yes, description	Yes	
Proximity Defining Well: if yes, description		
Applicant's Ownership in Each Tract	Exhibit 2-B	
Well(s)		
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Desert Rose Fed. Com. Well No. 16H API No. 30-025-Pending SHL: 100 FSL & 710 FEL §17 BHL: 2633 FSL & 380 FEL §8 FTP: 100 FSL & 380 FEL §17 LTP: 2573 FSL & 380 FEL §8 Wolfcamp /TVD 11692 feet/MD 19530 feet	


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 \$	\$7500
Production Supervision/Month \$	\$750
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	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	2-A
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
Overhead Rates In Proposal Letter	
Cost Estimate to Drill and Complete	Exhibit 2-D
Cost Estimate to Equip Well	Exhibit 2-D
Cost Estimate for Production Facilities	Exhibit 2-D
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)	Standup/Exhibit 3
Target Formation	Wolfcamp
HSU Cross Section	Exhibit 3-C
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibit 2-A

Tracts	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-C
General Location Map (including basin)	Exhibit 3-A
Well Bore Location Map	Exhibit 2-A
Structure Contour Map - Subsea Depth	Exhibit 3-A
Cross Section Location Map (including wells)	Exhibit 3-A
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:	February 15, 2022

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

Case:	22044	
Date	February 17, 2022	
Applicant	Caza Petroleum, LLC	
Designated Operator & OGRID (affiliation if applicable)	Caza Operating, LLC/OGRID No. 249099	
Applicant's Counsel:	James Bruce	
Case Title:	Application of Caza Petroleum, LLC for Compulsory Pooling, Lea County, New Mexico	
Entries of Appearance/Intervenors:		
Well Family	Desert Rose Wells	
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:	Featherstone; Bone Spring/Pool Code 24250	
Well Location Setback Rules:	Statewide rules and current horizontal well rules	
Spacing Unit Size:	Quarter-quarter Section/40 acre	
Spacing Unit		
Type (Horizontal/Vertical)	Vertical	
Size (Acres)	240 acres	
Building Blocks:	40 acres	
Orientation:	South-North	
Description: TRS/County	W/2SE/4 §8 and W/2E/2 §17-20S-35E, NMPPM, Lea County	
Standard Horizontal Well Spacing Unit (Y/N), If No, describe	Yes	
Other Situations		
Depth Severance: Y/N. If yes, description	No	EXHIBIT 6
Proximity Tracts: If yes, description	Yes	
Proximity Defining Well: if yes, description		
Applicant's Ownership in Each Tract	Exhibit 2-C	
Well(s)		
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Desert Rose Fed. Com. Well No. 5H API No. 30-025-Pendong SHL: 90 FSL & 1980 FEL §17 BHL: 2400 FSL & 2275 FEL §8 FTP: 330 FSL & 2264 §17 LTP: 2340 FSL & 2275 FEL §8 Third Bone Spring/TVD 11534 feet/MD 19230 feet	

	Desert Rose Fed. Com. Well No. 7H API No. 30-025-Pending SHL: 90 FSL & 1920 FEL §17 BHL: 2400 FSL & 1675 FEL §8 FTP: 330 FSL & 1680 FEL §17 LTP: 2340 FSL & 1675 FEL §8 Second Bone Spring/TVD 11534 feet/MD 19230 feet
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 \$	\$7500
Production Supervision/Month \$	\$750
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	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	2-C
Tract List (including lease numbers and owners)	Exhibit 2-C
Pooled Parties (including ownership type)	Exhibit 2-C
Unlocatable Parties to be Pooled	
Ownership Depth Severance (including percentage above & below)	None
Joinder	
Sample Copy of Proposal Letter	Exhibit 2-D
List of Interest Owners (<i>i.e.</i> Exhibit A of JOA)	Exhibit 2-C
Chronology of Contact with Non-Joined Working Interests	Exhibit 2
Overhead Rates In Proposal Letter	
Cost Estimate to Drill and Complete	Exhibit 2-E
Cost Estimate to Equip Well	Exhibit 2-E
Cost Estimate for Production Facilities	Exhibit 2-E
Geology	
Summary (including special considerations)	Exhibit 3
Spacing Unit Schematic	Exhibits 2-A and 3-A
Gunbarrel/Lateral Trajectory Schematic	Exhibit 3-A-C
Well Orientation (with rationale)	Standup/Exhibit 3
Target Formation	Bone Spring

HSD Cross Section	Exhibit 3-C
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibits 2-A and 2-B
Tracts	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-C
General Location Map (including basin)	Exhibit 3-A
Well Bore Location Map	Exhibits 2-A and 2-B
Structure Contour Map - Subsea Depth	Exhibit 3-A
Cross Section Location Map (including wells)	Exhibit 3-A
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:	February 15, 2022

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

Case:	22045
Date	February 17, 2022
Applicant	Caza Petroleum, LLC
Designated Operator & OGRID (affiliation if applicable)	Caza Operating, LLC/OGRID No. 249099
Applicant's Counsel:	James Bruce
Case Title:	Application of Caza Petroleum, LLC for Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	
Well Family	Desert Rose Wells
Formation/Pool	
Formation Name(s) or Vertical Extent:	Wolfcamp Formation
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Wolfcamp formation
Pool Name and Pool Code:	Klein Ranch; Wolfcamp/Pool Code 96989
Well Location Setback Rules:	Statewide rules and current horizontal well rules
Spacing Unit Size:	Quarter-quarter Section/40 acre
Spacing Unit	
Type (Horizontal/Vertical)	Vertical
Size (Acres)	240 acres
Building Blocks:	40 acres
Orientation:	South-North
Description: TRS/County	W/2SE/4 §8 and W/2E/2 §17-20S-35E, NMPM, Lea 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	Yes
Proximity Defining Well: if yes, description	
Applicant's Ownership in Each Tract	Exhibit 2-B
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non- standard)	Desert Rose Fed. Com. Well No. 15H API No. 30-025-Pending SHL: 90 FSL & 1890 FEL §17 BHL: 2632 FSL & 1708 FEL §8 FTP: 100 FSL & 1700 FEL §17 LTP: 2572 FSL & 1708 FEL §8 Wolfcamp /TVD 11692 feet/MD 19530 feet

EXHIBIT

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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 \$	\$7500
Production Supervision/Month \$	\$750
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	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	2-A
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.e. Exhibit A of JOA)	Exhibit 2-B
Chronology of Contact with Non-Joined Working Interests	Exhibit 2
Overhead Rates In Proposal Letter	
Cost Estimate to Drill and Complete	Exhibit 2-D
Cost Estimate to Equip Well	Exhibit 2-D
Cost Estimate for Production Facilities	Exhibit 2-D
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)	Standup/Exhibit 3
Target Formation	Wolfcamp
HSU Cross Section	Exhibit 3-C
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibit 2-A

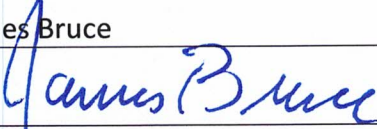
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-C
General Location Map (including basin)	Exhibit 3-A
Well Bore Location Map	Exhibit 2-A
Structure Contour Map - Subsea Depth	Exhibit 3-A
Cross Section Location Map (including wells)	Exhibit 3-A
Cross Section (including Landing Zone)	Exhibit 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):	<i>James Bruce</i>
Date:	February 15, 2022

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

Case:	22046
Date	February 17, 2022
Applicant	Caza Petroleum, LLC
Designated Operator & OGRID (affiliation if applicable)	Caza Operating, LLC/OGRID No. 249099
Applicant's Counsel:	James Bruce
Case Title:	Application of Caza Petroleum, LLC for Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	
Well Family	Desert Rose Wells
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:	WC-025 G-08 S203506D; Bone Spring/Pool Code 97983
Well Location Setback Rules:	Statewide rules and current horizontal well rules
Spacing Unit Size:	Quarter-quarter Section/40 acre
Spacing Unit	
Type (Horizontal/Vertical)	Vertical
Size (Acres)	240 acres
Building Blocks:	40 acres
Orientation:	South-North
Description: TRS/County	E/2SW/4 §8 and E/2W/2 §17-20S-35E, NMPPM, Lea 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	Yes
Proximity Defining Well: if yes, description	
Applicant's Ownership in Each Tract	Exhibit 2-C
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non- standard)	Desert Rose Fed. Com. Well No. 11H API No. 30-025-Pending SHL: 190 FSL & 1930 FWL §17 BHL: 2623 FSL & 1687 FWL §8 FTP: 100 FSL & 1690 FWL §17 LTP: 2563 FSL & 1687 FWL §8 Third Bone Spring/TVD 11534 feet/MD 19230 feet

EXHIBIT 6

	Desert Rose Fed. Com. Well No. 13H API No. 30-025-Pending SHL: 190 FSL & 2000 FWL §17 BHL: 2630 FSL & 2210 FWL §8 FTP: 100 FSL & 2210 FWL §17 LTP: 2570 FSL & 2210 FWL §8 Second Bone Spring/TVD 11534 feet/MD 19230 feet
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 \$	\$7500
Production Supervision/Month \$	\$750
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	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	2-C
Tract List (including lease numbers and owners)	Exhibit 2-C
Pooled Parties (including ownership type)	Exhibit 2-C
Unlocatable Parties to be Pooled	
Ownership Depth Severance (including percentage above & below)	None
Joinder	
Sample Copy of Proposal Letter	Exhibit 2-D
List of Interest Owners (<i>i.e.</i> Exhibit A of JOA)	Exhibit 2-C
Chronology of Contact with Non-Joined Working Interests	Exhibit 2
Overhead Rates In Proposal Letter	
Cost Estimate to Drill and Complete	Exhibit 2-E
Cost Estimate to Equip Well	Exhibit 2-E
Cost Estimate for Production Facilities	Exhibit 2-E
Geology	
Summary (including special considerations)	Exhibit 3
Spacing Unit Schematic	Exhibits 2-A and 3-A
Gunbarrel/Lateral Trajectory Schematic	Exhibit 3-A-C
Well Orientation (with rationale)	Standup/Exhibit 3

Target Formation	Bone Spring
HSU Cross Section	Exhibit 3-C
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibits 2-A and 2-B
Tracts	
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-C
General Location Map (including basin)	Exhibit 3-A
Well Bore Location Map	Exhibits 2-A and 2-B
Structure Contour Map - Subsea Depth	Exhibit 3-A
Cross Section Location Map (including wells)	Exhibit 3-A
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:	February 15, 2022

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

Case:	22047
Date	February 17, 2022
Applicant	Caza Petroleum, LLC
Designated Operator & OGRID (affiliation if applicable)	Caza Operating, LLC/OGRID No. 249099
Applicant's Counsel:	James Bruce
Case Title:	Application of Caza Petroleum, LLC for Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors:	
Well Family	Desert Rose Wells
Formation/Pool	
Formation Name(s) or Vertical Extent:	Wolfcamp Formation
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Wolfcamp formation
Pool Name and Pool Code:	WC-025 G-08 S203517M; Upper Wolfcamp/Pool Code 98176
Well Location Setback Rules:	Statewide rules and current horizontal well rules
Spacing Unit Size:	Quarter-quarter Section/40 acre
Spacing Unit	
Type (Horizontal/Vertical)	Vertical
Size (Acres)	240 acres
Building Blocks:	40 acres
Orientation:	South-North
Description: TRS/County	E/2SW/4 §8 and E/2W/2 §17-20S-35E, NMPM, Lea 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	Yes
Proximity Defining Well: if yes, description	
Applicant's Ownership in Each Tract	Exhibit 2-B
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non- standard)	Desert Rose Fed. Com. Well No. 14H API No. 30-025-Pending SHL: 190 FSL & 2030 FWL §17 BHL: 2627 FSL & 2265 FWL §8 FTP: 100 FSL & 2265 FWL §17 LTP: 2567 FSL & 2265 FWL §8 Wolfcamp /TVD 11692 feet/MD 19530 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 \$	\$7500
Production Supervision/Month \$	\$750
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	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	2-A
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
Overhead Rates In Proposal Letter	
Cost Estimate to Drill and Complete	Exhibit 2-D
Cost Estimate to Equip Well	Exhibit 2-D
Cost Estimate for Production Facilities	Exhibit 2-D
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)	Standup/Exhibit 3
Target Formation	Wolfcamp
HSU Cross Section	Exhibit 3-C
Depth Severance Discussion	Not Applicable
Forms, Figures and Tables	
C-102	Exhibit 2-A

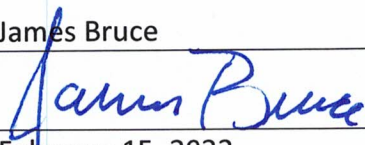
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit 2-C
General Location Map (including basin)	Exhibit 3-A
Well Bore Location Map	Exhibit 2-A
Structure Contour Map - Subsea Depth	Exhibit 3-A
Cross Section Location Map (including wells)	Exhibit 3-A
Cross Section (including Landing Zone)	Exhibit 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:	February 15, 2022

EXHIBIT 1
Section Plat

Desert Rose 17-8 Federal Com #11H, #13H and #14H
E2 SW4 of Section 8 and E2 W2 of Section 17
T-20-S R-35-E, Lea County, NM

Section 8

	Tract 1 NMNM-004786 40 acres		
	Tract 2 NMNM-137464 40 acres		
	Tract 3 NMNM-86172 160 acres		

Section 17

EXHIBIT **7**
Cases 22042+22043

** Indicates parties being pooled.

EXHIBIT 1 Section Plat

Tract 1: NE4 SW4 of Section 8 – Federal Lease NMNM-004786

Lynn Charuk	Kantech Properties, LLC
True North Exploration, Inc. (formerly SDX)	CHLP Interests, LLC
JSTM Energy Investments, LLC	Marks Oil, Inc.
O'Brien Oil & Gas Inc.	Marshall B. Miller, Jr.
Cinco Tierras, LLC	Glenbrook Partners DE, LTD
Wallco Investments LLC	Alpar Energy, LP
Tiger Creek Capital Partners, LP	Hat Creek Exploration
Gary J. Lamb, Inc.	Maverick Oil & Gas Equity, LLC
America West Resources, LLC	Nance Resources, Inc.
D&M Snelson Properties, LP	Chevron U.S.A. Inc. **
Broughton Petroleum Inc.	Caza Petroleum, LLC
Wallace Investment Group, LLC	

Tract 2: SE4 SW4 of Section 8 – Federal Lease NMNM-137464

Lynn Charuk	Kantech Properties, LLC
True North Exploration, Inc. (formerly SDX)	CHLP Interests, LLC
JSTM Energy Investments, LLC	Marks Oil, Inc.
O'Brien Oil & Gas Inc.	Marshall B. Miller, Jr.
Cinco Tierras, LLC	Glenbrook Partners DE, LTD
Wallco Investments LLC	Alpar Energy, LP
Tiger Creek Capital Partners, LP	Hat Creek Exploration
Gary J. Lamb, Inc.	Dale H & Jean F Dorn Testamentary Trust
America West Resources, LLC	Maverick Oil & Gas Equity, LLC
D&M Snelson Properties, LP	Eagle Owl LLC
Broughton Petroleum Inc.	Nance Resources, Inc.
Wallace Investment Group, LLC	Caza Petroleum, LLC

Tract 3: E2 W2 of Section 17 – Federal Lease NMNM-86172

Lynn Charuk	D&M Snelson Properties, LP
True North Exploration, Inc. (formerly SDX)	Broughton Petroleum Inc.
JSTM Energy Investments, LLC	Wallace Investment Group, LLC
O'Brien Oil & Gas Inc.	Kantech Properties, LLC
Cinco Tierras, LLC	CHLP Interests, LLC
Wallco Investments LLC	Marks Oil, Inc.
Tiger Creek Capital Partners, LP	Chevron U.S.A. Inc. **
Gary J. Lamb, Inc.	Caza Petroleum, LLC
America West Resources, LLC	

** Indicates parties being pooled.

EXHIBIT 1
Section Plat

Desert Rose 17-8 Federal Com #5H, #7H and #15H
W2 SE4 of Section 8 and W2 E2 of Section 17
T-20-S R-35-E, Lea County, NM

Section 8

		Tract 1 NMNM-004786 80 acres	
		Tract 2 NMNM-86172 120 acres	
		Tract 3 NMNM-134883 40 acres	

Section 17

** Indicates parties being pooled.

EXHIBIT **7**
Cases 22044+22045

EXHIBIT 1 Section Plat

Tract 1: W2 SE4 of Section 8 – Federal Lease NMNM-004786

Lynn Charuk	Kantech Properties, LLC
True North Exploration, Inc. (formerly SDX)	CHLP Interests, LLC
JSTM Energy Investments, LLC	Marks Oil, Inc.
O'Brien Oil & Gas Inc.	Marshall B. Miller, Jr.
Cinco Tierras, LLC	Glenbrook Partners DE, LTD
Wallco Investments LLC	Alpar Energy, LP
Tiger Creek Capital Partners, LP	Hat Creek Exploration
Gary J. Lamb, Inc.	Maverick Oil & Gas Equity, LLC
America West Resources, LLC	Nance Resources, Inc.
D&M Snelson Properties, LP	Chevron U.S.A. Inc. **
Broughton Petroleum Inc.	Caza Petroleum, LLC
Wallace Investment Group, LLC	

Tract 2: W2 NE4 and NW4 SE4 of Section 17 – Federal Lease NMNM-86172

Lynn Charuk	D&M Snelson Properties, LP
True North Exploration, Inc. (formerly SDX)	Broughton Petroleum Inc.
JSTM Energy Investments, LLC	Wallace Investment Group, LLC
O'Brien Oil & Gas Inc.	Kantech Properties, LLC
Cinco Tierras, LLC	CHLP Interests, LLC
Wallco Investments LLC	Marks Oil, Inc.
Tiger Creek Capital Partners, LP	Chevron U.S.A. Inc. **
Gary J. Lamb, Inc.	Caza Petroleum, LLC
America West Resources, LLC	

Tract 3: SW4 SE4 of Section 17 – Federal Lease NMNM-134883

Lynn Charuk	D&M Snelson Properties, LP
True North Exploration, Inc. (formerly SDX)	Broughton Petroleum Inc.
JSTM Energy Investments, LLC	Wallace Investment Group, LLC
O'Brien Oil & Gas Inc.	Kantech Properties, LLC
Cinco Tierras, LLC	CHLP Interests, LLC
Wallco Investments LLC	Marks Oil, Inc.
Tiger Creek Capital Partners, LP	Caza Petroleum, LLC
Gary J. Lamb, Inc.	

** Indicates parties being pooled.

**EXHIBIT 1
Section Plat**

**Desert Rose 17-8 Federal Com #8H, #10H and #16H
E2 SE4 of Section 8 and E2 E2 of Section 17
T-20-S R-35-E, Lea County, NM**

Section 8

			Tract 1 NMNM-004786 80 acres
			Tract 2 E-1921 40 acres
			Tract 3 NMNM-86172 80 acres
			Tract 4 NMNM-134883 40 acres

Section 17

EXHIBIT **7**
Cases 22046 + 22047

** Indicates parties being pooled.

EXHIBIT 1 Section Plat

Tract 1: E2 SE4 of Section 8 – Federal Lease NMNM-004786

Lynn Charuk	America West Resources, LLC	Glenbrook Partners DE, LTD
True North Exploration, Inc. (formerly SDX)	D&M Snelson Properties, LP	Alpar Energy, LP
JSTM Energy Investments, LLC	Broughton Petroleum Inc.	Hat Creek Exploration
O'Brien Oil & Gas Inc.	Wallace Investment Group, LLC	Maverick Oil & Gas Equity, LLC
Cinco Tierras, LLC	Kantech Properties, LLC	Nance Resources, Inc.
Wallco Investments LLC	CHLP Interests, LLC	Chevron U.S.A. Inc. **
Tiger Creek Capital Partners, LP	Marks Oil, Inc.	Caza Petroleum, LLC
Gary J. Lamb, Inc.	Marshall B. Miller, Jr.	

Tract 2: NE4 NE4 of Section 17 – State Lease E-1921

Lynn Charuk	D&M Snelson Properties, LP
True North Exploration, Inc. (formerly SDX)	Broughton Petroleum Inc.
JSTM Energy Investments, LLC	Wallace Investment Group, LLC
O'Brien Oil & Gas Inc.	Kantech Properties, LLC
Cinco Tierras, LLC	CHLP Interests, LLC
Wallco Investments LLC	Marks Oil, Inc.
Tiger Creek Capital Partners, LP	Chevron U.S.A. Inc. **
Gary J. Lamb, Inc.	Caza Petroleum, LLC
America West Resources, LLC	

Tract 3: SE4 NE4 and NE4 SE4 of Section 17 – Federal Lease NMNM-86172

Lynn Charuk	D&M Snelson Properties, LP
True North Exploration, Inc. (formerly SDX)	Broughton Petroleum Inc.
JSTM Energy Investments, LLC	Wallace Investment Group, LLC
O'Brien Oil & Gas Inc.	Kantech Properties, LLC
Cinco Tierras, LLC	CHLP Interests, LLC
Wallco Investments LLC	Marks Oil, Inc.
Tiger Creek Capital Partners, LP	Chevron U.S.A. Inc. **
Gary J. Lamb, Inc.	Caza Petroleum, LLC
America West Resources, LLC	

Tract 4: SE4 SE4 of Section 17 – Federal Lease NMNM-134883

Lynn Charuk	D&M Snelson Properties, LP
True North Exploration, Inc. (formerly SDX)	Broughton Petroleum Inc.
JSTM Energy Investments, LLC	Wallace Investment Group, LLC
O'Brien Oil & Gas Inc.	Kantech Properties, LLC
Cinco Tierras, LLC	CHLP Interests, LLC
Wallco Investments LLC	Marks Oil, Inc.
Tiger Creek Capital Partners, LP	Caza Petroleum, LLC
Gary J. Lamb, Inc.	

** Indicates parties being pooled.