

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

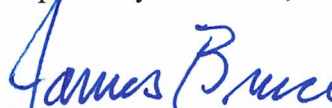
**APPLICATION OF MEWBOURNE OIL COMPANY  
FOR COMPULSORY POOLING, EDDY COUNTY,  
NEW MEXICO.**

**Case No. 22836**

**NOTICE OF FILING SUPPLEMENTAL EXHIBIT**

The undersigned filed exhibits in this case on July 5, 2022, but neglected to attach the certified green card from LeaCo New Mexico Exploration and Production LLC (a pooled party) to the notice affidavit (Exhibit 3). The green card is attached hereto.

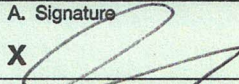
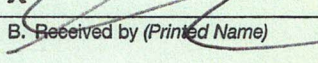
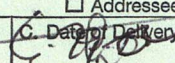

Respectfully submitted,



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Santa Fe, New Mexico 87504  
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*jamesbruc@aol.com*

Attorney for Mewbourne Oil Company

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>■ Complete items 1, 2, and 3.</li> <li>■ Print your name and address on the reverse so that we can return the card to you.</li> <li>■ Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature </p> <p><input checked="" type="checkbox"/> Addressee <input type="checkbox"/> Agent</p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery </p>
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <p>LeaCo New Mexico Exploration &amp; Production LLC          Suite 100          2000 Post Oak Boulevard          Houston, Texas 77056</p> </div>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes          If YES, enter delivery address below: <input type="checkbox"/> No</p>
<div style="text-align: center;">             9590 9402 6746 1074 4012 48         </div> <p>2. Arti 7021 0950 0002 0367 5751</p>	<p>3. Service Type</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Adult Signature</li> <li><input type="checkbox"/> Adult Signature Restricted Delivery</li> <li><input checked="" type="checkbox"/> Certified Mail®</li> <li><input type="checkbox"/> Certified Mail Restricted Delivery</li> <li><input type="checkbox"/> Collect on Delivery</li> <li><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</li> <li><input type="checkbox"/> Priority Mail Express®</li> <li><input type="checkbox"/> Registered Mail™</li> <li><input type="checkbox"/> Registered Mail Restricted Delivery</li> <li><input type="checkbox"/> Signature Confirmation™</li> <li><input type="checkbox"/> Signature Confirmation Restricted Delivery</li> </ul>
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 <span style="float: right;">M - NWDL #7 Domestic Return Receipt</span></p>	