

CASE NO. 23690

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

EXHIBITS

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

Part II of II

4. The following geological plats are attached hereto:

(a) Attachment 3-A is a structure map on the top of the Wolfcamp formation. It shows that structure dips gently to the east-southeast. It also shows a line of cross-section.

(b) Attachment 3-B is a cross section showing the Third Bone Spring Sand, the target zone for the proposed wells. The well logs on the cross-section give a representative sample of the Third Bone Spring Sand in this area. The sand is continuous and uniformly thick across the well units.

5. I conclude from the maps that:

(a) The horizontal spacing units are justified from a geologic standpoint.

(b) The target zone is continuous and of relatively uniform thickness across each well unit.

(c) Each quarter-quarter section in the well units will contribute more or less equally to production.

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

6. Attachment 3-A shows that all Third Bone Spring Sand wells adjacent or close to the proposed well units are laydown wells. Based on our geological examination and information from offsetting wells, Mewbourne believes laydown well units are reasonable.

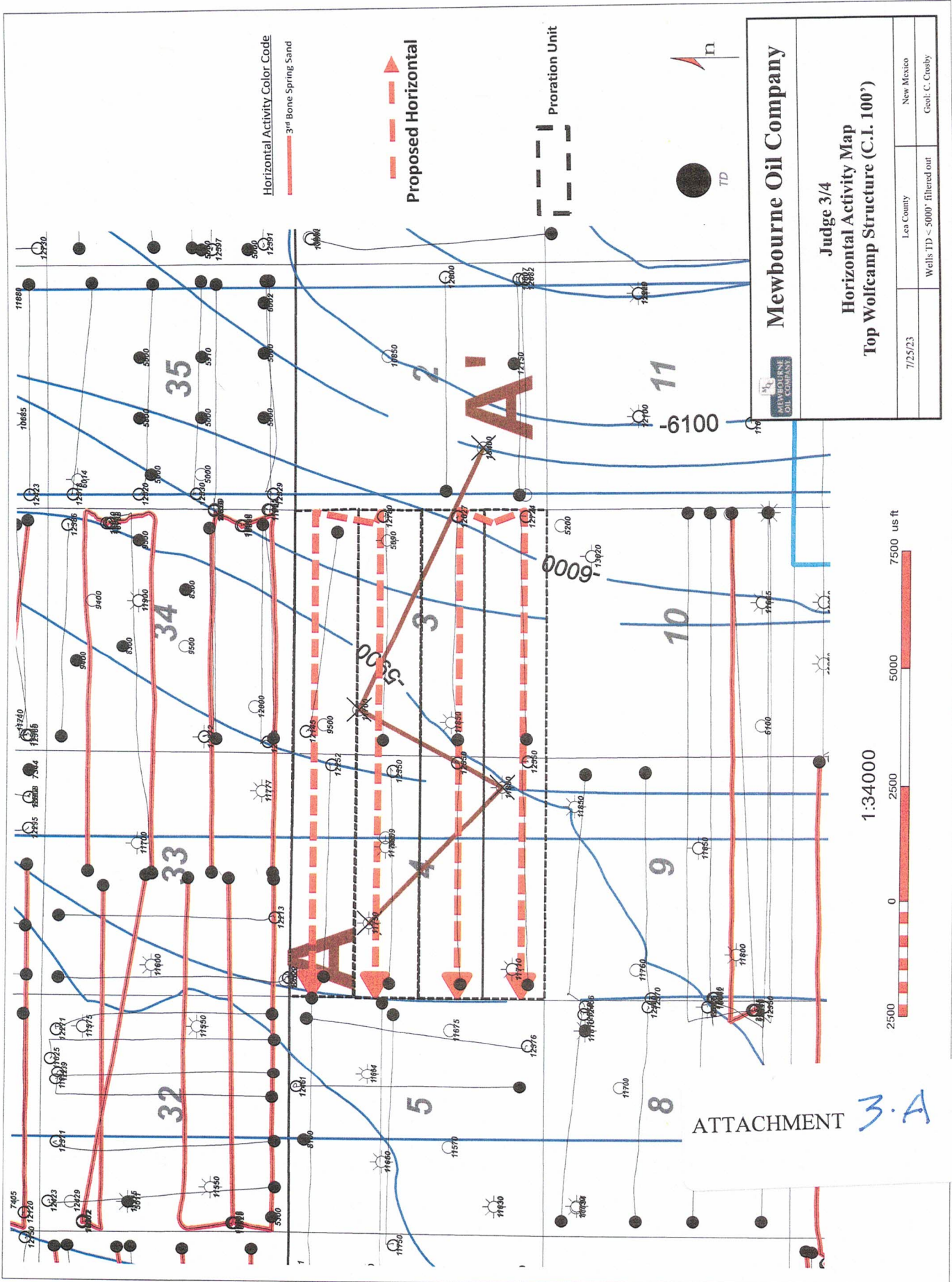
7. Attachment 3-C contains horizontal drilling plans for the proposed wells. The producing intervals of the wells will be orthodox.

I understand that this Self-Affirmed Statement will be used as written testimony in these cases. I affirm that my testimony in paragraphs 1 through 7 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.

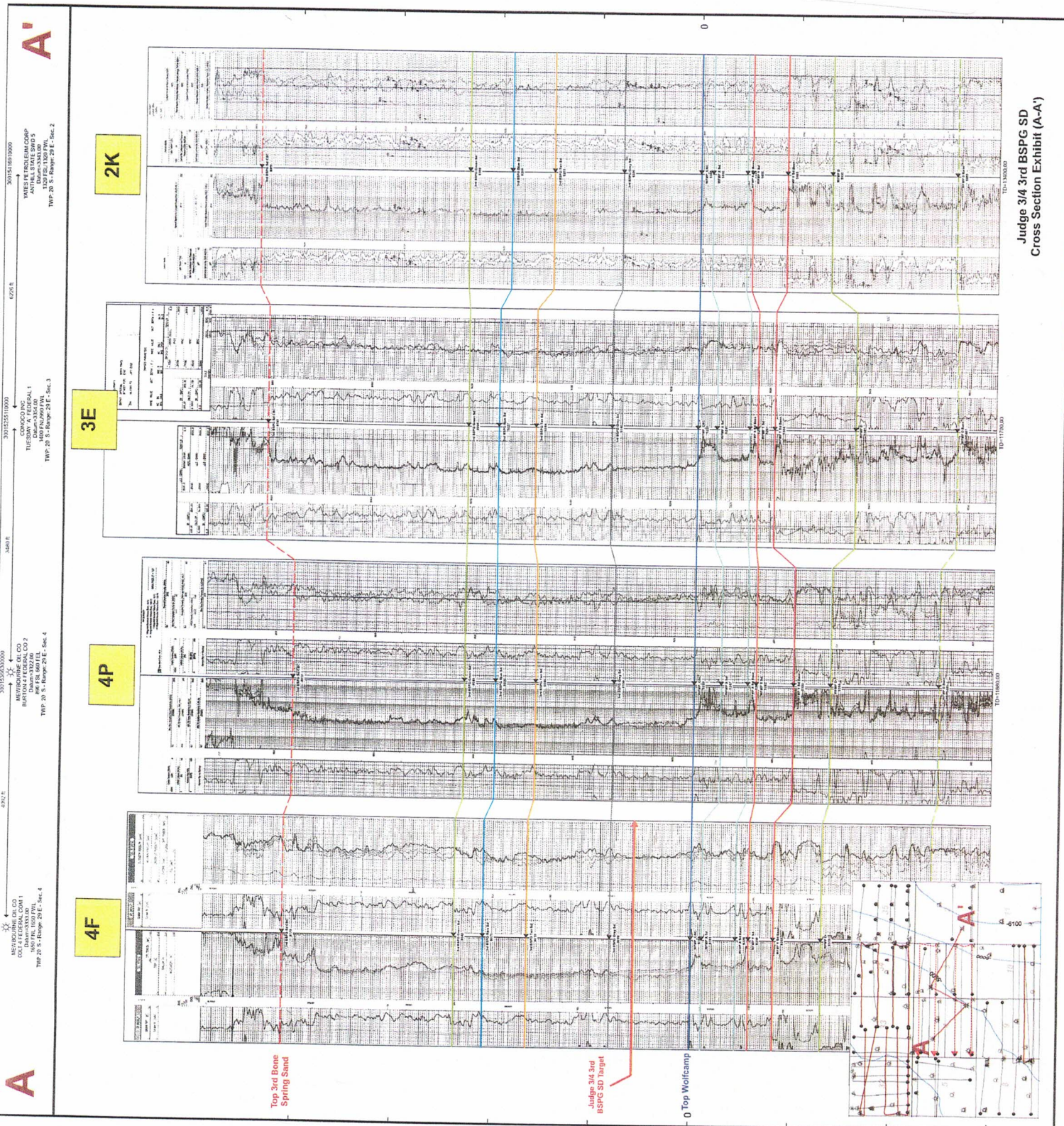
9/13/23



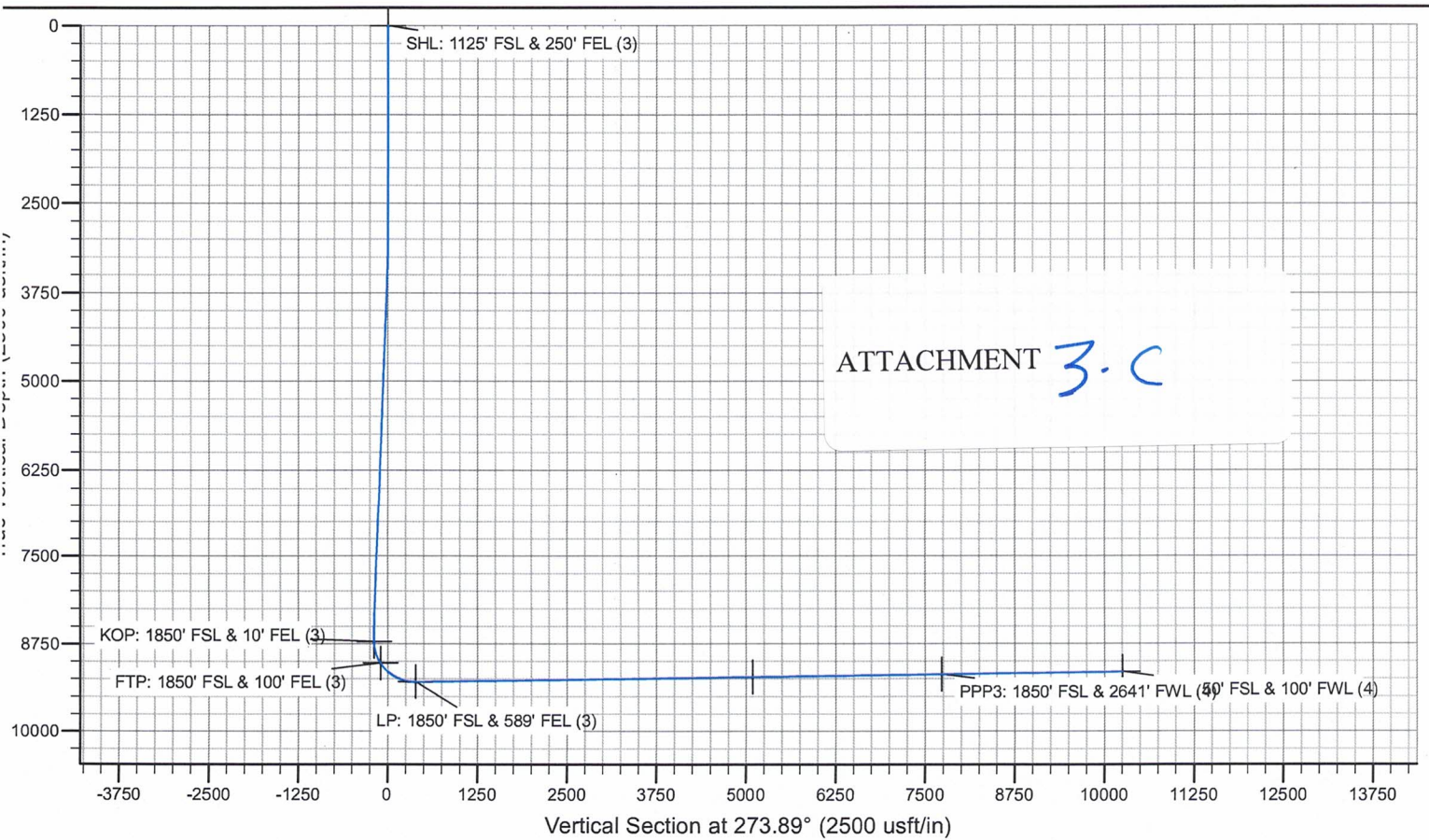
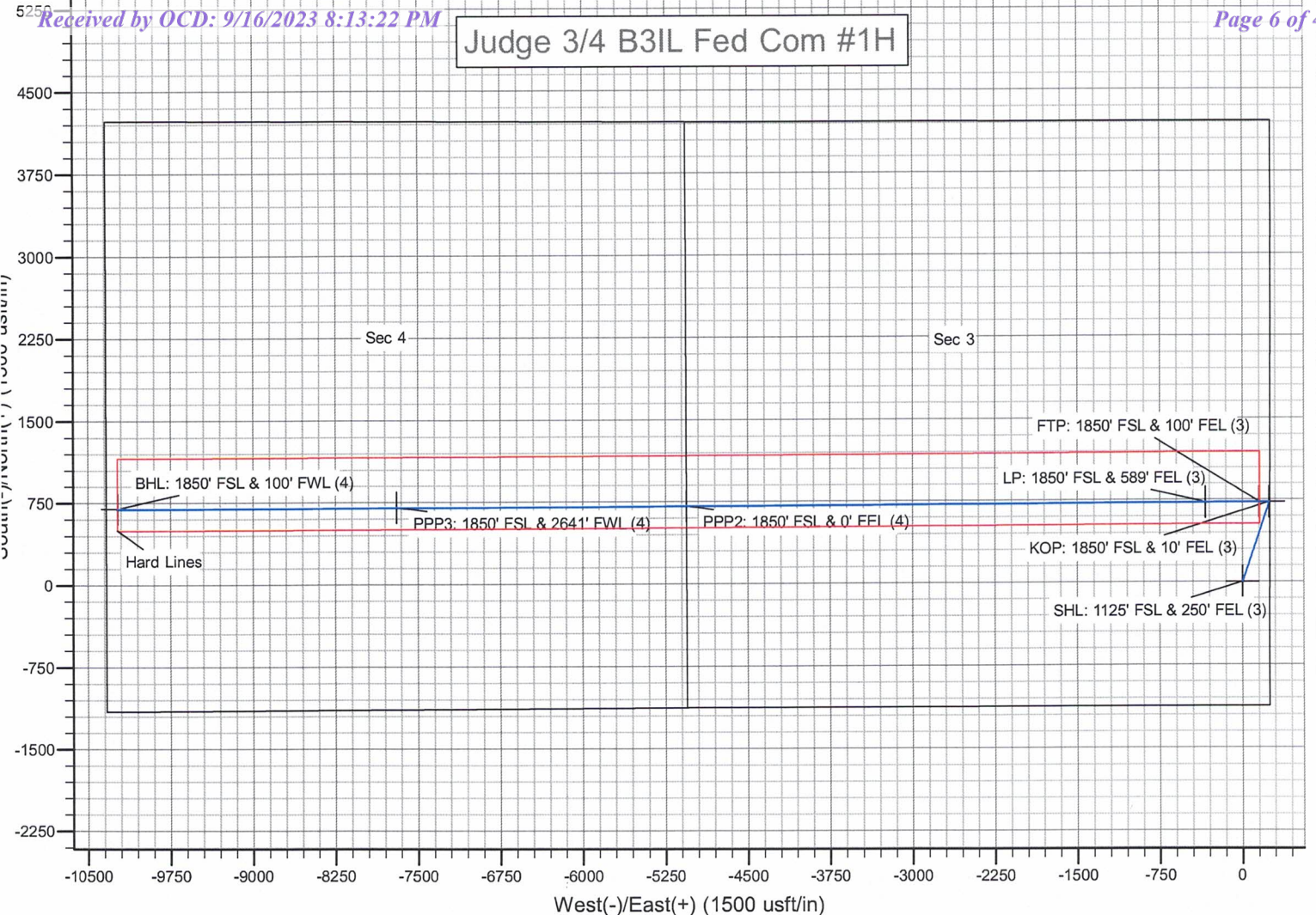
Charles Crosby



ATTACHMENT 3-B



Judge 3/4 B3IL Fed Com #1H



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

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

Case No. 23689 - 23691

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 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 letters and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules.

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: 9/16/23

James Bruce
James Bruce

EXHIBIT 4

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruc@aol.com

July 13, 2023

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of four applications for compulsory pooling, filed by Mewbourne Oil Company with the Oil Conservation Division, seeking to pool the Bone Spring formation underlying the following horizontal spacing units:

(i) Case No. 23688: Lots 1-4 (the N/2N/2) of Section 3 and Lots 1-4 (the N/2N/2) of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3AD Fed. Com. Well No. 1H. Applicant also seeks to vacate Order No. R-21575;

(ii) Case No. 23689: The S/2N/2 of Section 3 and the S/2N/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3HE Fed. Com. Well No. 1H;

(ii) Case No. 23690: The N/2S/2 of Section 3 and the N/2S/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3IL Fed. Com. Well No. 1H; and

(iv) Case No. 23691: The S/2S/2 of Section 3 and the S/2S/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3PM Fed. Com. Well No. 1H

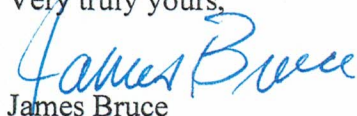
These matters are scheduled for hearing at 8:15 a.m. on Thursday, August 3, 2023. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. You are not required to attend this hearing, but as an owner

ATTACHMENT

4-A

of an interest who may be affected by the applications, 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@emnr.dnm.gov, 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

EXHIBIT A

Colgate Production, LLC
300 N Marienfeld Suite 1000
Midland, TX 79701
Attn: Land Department

Devon Energy Production Co., LP
WPX Energy Permian, LLC
333 West Sheridan Ave.
Oklahoma City, OK 73102
Attn: Land Department

Magnum Hunter Production, Inc.
600 N Marienfeld Suite 600
Midland, TX 79701
Attn: Land Department

Sara Elizabeth Baker and Anthony M. Baker Trust
630 Paseo Del Pueblo Sur #170
Taos, NM 97571

C-W Flow, LLC
738 H St
Anchorage, AK 99501-3401
Attn: Land Department

Christine B. Motycka
1004 N. Big Spring Suite 500
Midland, TX 79701

Julie Ellen Barnes
P.O. Box 505
Midland, TX 79702

Steven Clement Barnes
P.O. Box 505
Midland, TX 79702

Sarah Schreiber
505 13th St SE Apt 4
Washington D.C., 20003-2248

Suzanne Schreiber
3111 E 58th Pl.
Tulsa, OK 74105-7414

TTCZ Properties, LLC
201 Main Street Suite 400
Fort Worth, TX 76102

Diane Denish
2604 Morrow Rd NE
Albuquerque, NM 87106

Viola Elaine Barnes
1004 N. Big Spring Suite 500
Midland, TX 79701

Mill Neck Associates
3867 Plaza Tower Dr.
Baton Rouge, LA 70816

Heritage Trust Company of New Mexico, Trustee of the Michael A. Baker Irrevocable Trust, By and through its Agent, Douglas Buchanan
630 Paseo Del Pueblo Sur #170
Taos, NM 97571

Heritage Trust Company of New Mexico, Trustee of the Josephine Laughlin Living Trust, By and through its Agent, Douglas Buchanan
P.O. Box 80190
Midland, TX 79708
Attn: Douglas Buchanan

2

Heritage Trust Company of New Mexico, Trustee of the Sarah Anne Baker Irrevocable Trust
630 Paseo Del Pueblo Sur #170
Taos, NM 97571

Great Western Drilling, Ltd.
P.O. Box 1659
Midland, TX 79702
Attn: Land Department

Finley Production Co., LP
P.O. Box 2200
Fort Worth, TX 76113
Attn: Land Department

Veronica Olson Continuation Trust
42011 SD Highway 27
Langford, SD 57454-5930

Estate of Ralph E. Williamson
P.O. Box 50498
Austin, TX 78763-0498

Eric Chancy Croft and Elizabeth Ann Williamson, Co-Trustees of the Charla Geraldine Williamson Trust
738 H St
Anchorage, AK 99501-3401

Rick and Dee Ann Carlisle
738 H St
Anchorage, AK 99501-3401

RECORD TITLE OWNERS

Barnes Adelante Trust
P.O. Box 505
Midland, Texas 79702-0505

Barnes J C Trust
P.O. Box 505
Midland, Texas 79702-0505

EOG Resources, Inc.
5509 Champions Drive
Midland, Texas 79706

Marathon Oil Permian, LLC
990 Town and Country Blvd.
Houston, Texas 77024

3

Burlington Resources Oil & Gas Co., LP
P.O. Box 7500
Battlesville, Oklahoma 74005-7500

Alexander Resources, Inc.
3804 Shady Valley Dr.
Arlington, Texas 76013

Petroleum Corporation
207 S. 4th Street
Artesia, New Mexico 88210

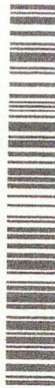
4

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:

Colgate Production, LLC
 300 N Maricopa Blvd Suite 1000
 Midland, TX 79701
 Attn: Land Department



9590 9402 7635 2122 8863 78

2. Article Number (Transfer from PSN Form 3811, July 2020 PSN 7530-02-000-9053)

7022 1670 0002 1188 2403

(over \$500)

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *L. Kalosh* Agent Addressee
- B. Received by (Printed Name) *L. Kalosh* C. Date of Delivery *7/21/23*
- 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
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

3. Article Number (Transfer from PSN Form 3811, July 2020 PSN 7530-02-000-9053)

7022 1670 0002 1187 8406

(over \$500)

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

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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

Rick and Dee Ann Cantale
 738 H St
 Anchorage, AK 99501-3401

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

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:

Rick and Dee Ann Cantale
 738 H St
 Anchorage, AK 99501-3401



9590 9402 7635 2122 8781 37

2. Article Number (Transfer from PSN Form 3811, July 2020 PSN 7530-02-000-9053)

7022 1670 0002 1187 8406

(over \$500)

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Brenda Marko* Agent Addressee
- B. Received by (Printed Name) *Brenda Marko* C. Date of Delivery *7-20-23*
- 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
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

3. Article Number (Transfer from PSN Form 3811, July 2020 PSN 7530-02-000-9053)

7022 1670 0002 1187 8406

(over \$500)

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

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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.
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1. Article Addressed to:

Eric Chaney Croft and Elizabeth Ann Williamson, Co-Trustees
 738 H St
 Anchorage, AK 99501-3401



9590 9402 7635 2122 8781 20

2. Article # 7022 1670 0002 1187 8390

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressed to
Brenda Marked

B. Received by (Printed Name) C. Date of Delivery
Brenda Marked 7-20-23

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™
 - Signature Confirmation Restricted Delivery

- Insured Mail (over \$500)
- Insured Mail Restricted Delivery

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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 _____

Street and _____

City, State, ZIP+4® _____

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Eric Chaney Croft and Elizabeth Ann Williamson, Co-Trustees
 738 H St
 Anchorage, AK 99501-3401

PS Form 3800, April 2015 PSN 7530-02-200-9047

See Reverse for Instructions

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- 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:

Devon Energy Production Co., LP
 WPX Energy Permian, LLC
 333 West Sheridan Ave.
 Oklahoma City, OK 73102
 Attn: Land Department



9590 9402 7635 2122 8863 85

2. Article # 7022 1670 0002 1188 2410

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressed to
[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™
 - Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

Collect on Delivery Restricted Delivery

1 Delivery

0668 2977 2000 0290 2202

U.S. Postal Service™
CERTIFIED MAIL® 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 _____

Street and Apt. No. _____

City, State, ZIP+4® _____

Postmark Here

Devon Energy Production Co., LP
 WPX Energy Permian, LLC
 333 West Sheridan Ave.
 Oklahoma City, OK 73102
 Attn: Land Department

PS Form 3800, April 2015 PSN 7530-02-200-9047

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:

Sara Elizabeth Baker and Anthony M. Baker Trust
 630 Paseo Del Pueblo Sur #170
 Taos, NM 97571

9590 9402 7635 2122 8779 32

2. Article No 7022 1670 0002 1188 2434

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

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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 \$

Postmark Here

Total Postage and Fees \$

Sent To Sara Elizabeth Baker and Anthony M. Baker Trust
 630 Paseo Del Pueblo Sur #170
 Taos, NM 97571

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

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

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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 \$

Postmark Here

Total Postage and Fees \$

Sent To C-W Flow, LLC
 738 H St
 Anchorage, AK 99501-3401
 Attn: Land Department

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

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

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 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:

C-W Flow, LLC
 738 H St
 Anchorage, AK 99501-3401
 Attn: Land Department

9590 9402 7635 2122 8779 49

2. Article No 7022 1670 0002 1188 2441

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

Postmark Here

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

B. Received by (Printed Name) Drenda Mabel C. Date of Delivery 1-20-23

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

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:

Steven Clement Barnes
 P.O. Box 305
 Midland, TX 79702



9590 9402 7635 2122 8779 94

2. Article Number (Transfer from reverse side)
 7022 1670 0002 1188 2472
 (over \$500)

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
- B. Received by (Printed Name)
 JOSEPH MONTES
- C. Date of Delivery
 7-24-23
- 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 restricted Delivery

(over \$500)

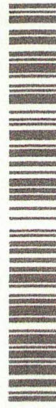
Domestic Return Receipt

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:

Suzanne Schnelker
 3111 E. 58th Pl.
 Tulsa, OK 74105-7414



9590 9402 7635 2122 8779 94

2. Article Number (Transfer from reverse side)
 7022 1670 0002 1188 2496
 (over \$500)

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

Domestic Return Receipt

U.S. Postal Service™
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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
 Suzanne Schnelker
 3111 E 58th Pl.
 Tulsa, OK 74105-7414

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

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
- B. Received by (Printed Name)
 Suzanne Schnelker
- C. Date of Delivery
 7-24-23
- 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™
 - Signature Confirmation Restricted Delivery

7022 1670 0002 1188 2496
 (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
Mill Neck Associates
3867 Plaza Tower Dr.
Baton Rouge, LA 70816
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

2022 0297 2000 1788 0881 0001

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Diane Demish
2604 Morrow Rd NE
Albuquerque, NM 87106

2. Article Number 7022 1670 0002 1188 3288
(over \$500)

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

Domestic Return Receipt

U.S. Postal Service™
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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)
 Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$
Postage \$
Total Postage and Fees \$

Sent To
Diane Demish
2604 Morrow Rd NE
Albuquerque, NM 87106
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

2022 0297 2000 1788 0881 0001

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Mill Neck Associates
3867 Plaza Tower Dr.
Baton Rouge, LA 70816

2. Article 7022 1670 0002 1188 3301
(over \$500)

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [Signature] Agent Addressee

B. Received by (Printed Name) Ashlynn [Signature] C. Date of Delivery 7/24/23

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

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 \$

Heritage Trust Company of New Mexico, Trustee
its Agent, Douglas Buchanan
P.O. Box 80190
Midland, TX 79708
Street and Apt. No., Attn: Douglas Buchanan
City, State, ZIP+4®

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

Postmark Here

5226 8977 2000 0297 2202

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.

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

Adult Signature

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Priority Mail Express®

Registered Mail™

Registered Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Insured Mail (over \$500)

Insured Mail Restricted Delivery

Domestic Return Receipt

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



9590 9402 7635 2122 8780 52

Article 7022 1670 0002 1188 3318

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 Fees \$

Heritage Trust Company of New Mexico, Trustee
through its Agent, Douglas Buchanan
630 Paseo Del Pueblo Sur #170
Taos, NM 97571
Street and Apt. No., Attn: Douglas Buchanan
City, State, ZIP+4®

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

Postmark Here

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.

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

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

Article 7022 1670 0002 1188 3325

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

Domestic Return Receipt

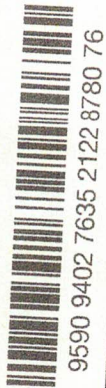
8977 2000 0297 2202

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:

Heritage Trust Company of New Mexico, Trustee of
630 Paseo Del Pueblo Sur #170
Tues, NM 97571



2. Article Number (Transfer from service label)
7022 1670 0002 1187 8345
(over \$500)

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

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

Total Postage and Fees

Sent To
Heritage Trust Company of New Mexico, Trustee
630 Paseo Del Pueblo Sur #170
Tues, NM 97571

City, State, ZIP+4®

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
- B. Received by (Printed Name) Addressee
Finley Production Co., LP
- C. Date of Delivery 7/20/23
- 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
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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

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

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

Official USE

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

Total Postage and Fees

Sent To
Finley Production Co., LP
P.O. Box 2200
Fort Worth, TX 76113
Attn: Land Department

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:

Finley Production Co., LP
P.O. Box 2200
Fort Worth, TX 76113
Attn: Land Department



2. Article Number (Transfer from service label)
7022 1670 0002 1187 8369

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent
- B. Received by (Printed Name) Addressee
Finley Production Co., LP
- C. Date of Delivery 7/20/23
- 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
- Insured Mail
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

City, State, ZIP+4®

Domestic Return Receipt

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:

Agent
 Addressee

2. Article 7022 1670 0002 1187 8437 (over \$500)

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

Domestic Return Receipt

3. Service Type

Priority Mail Express®
 Registered Mail™
 Adult Signature Restricted Delivery
 Certified Mail®
 Signature Confirmation™
 Restricted Delivery

4. 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

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-8947 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)

Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-8947 See Reverse for Instructions

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:

Agent
 Addressee

2. Article 7022 1670 0002 1187 8444 (over \$500)

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

Domestic Return Receipt

3. Service Type

Priority Mail Express®
 Registered Mail™
 Adult Signature Restricted Delivery
 Certified Mail®
 Signature Confirmation™
 Restricted Delivery

4. 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

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-8947 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)

Return Receipt (hardcopy) \$
 Return Receipt (electronic) \$
 Certified Mail Restricted Delivery \$
 Adult Signature Required \$
 Adult Signature Restricted Delivery \$

Postage \$

Total Postage and Fees \$

Sent To

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-8947 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

Postmark Here

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 **Barnes J C Trust**

P.O. Box 505

Midland, Texas 79702-0505

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

0268 2877 2000 0297 2202

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent

Addressee

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

CARSON BENNY **7-27-23**

D. Is delivery address different from item 1? If YES, enter delivery address below:

Yes No

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Postage \$

Total Postage and Fees \$

Sent To **Barnes J C Trust**

P.O. Box 505

Midland, Texas 79702-0505

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9057 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

Postmark Here

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 **Great Western Drilling, Ltd.**

P.O. Box 1659

Midland, TX 79702

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9057 See Reverse for Instructions

0268 2877 2000 0297 2202

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Agent

Addressee

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

CARSON BENNY **7-27-23**

D. Is delivery address different from item 1? If YES, enter delivery address below:

Yes No

3. Service Type

Priority Mail Express®

Registered Mail™

Adult Signature Restricted Delivery

Certified Mail®

Certified Mail Restricted Delivery

Signature Confirmation™

Signature Confirmation Restricted Delivery

Postage \$

Total Postage and Fees \$

Sent To **Barnes J C Trust**

P.O. Box 505

Midland, Texas 79702-0505

Street and Apt. No., or PO Box No.

City, State, ZIP+4®

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

7022 1670 0002 1187 8352

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
 B. Received by (Printed Name) Jasmin Montes
 C. Date of Delivery 7-24-23
 D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Julie Ellen Barnes
 P.O. Box 505
 Midland, TX 79702

2. Article # 7022 1670 0002 1188 2465
 (over \$500)

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

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 Fees \$
 Julie Ellen Barnes
 P.O. Box 505
 Midland, TX 79702
 Sent To
 Street and Apt. No., or PO Box No.
 City, State, ZIP+4®

Postmark Here

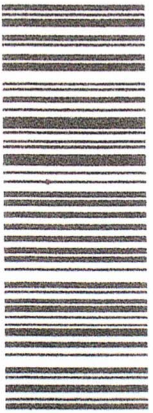
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

5942 8871 2000 0297 2202

\$9.73
US POSTAGE
FIRST-CLASS
062513292292
87501
000137895



Veronica Olson Continuation Trust
42011 SD Highway 27
Langford, SD 57454-5930



7022 1670 0002 1187 8376

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:

Veronica Olson Continuation Trust
42011 SD Highway 27
Langford, SD 57454-5930



9590 9402 7635 2122 8781 06

2. Article

7022 1670 0002 1187 8376
(over 3000)

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
- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery

Postage

Postmark Here

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 Fees

Veronica Olson Continuation Trust
42011 SD Highway 27
Langford, SD 57454-5930

Sent To

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

REFUSED

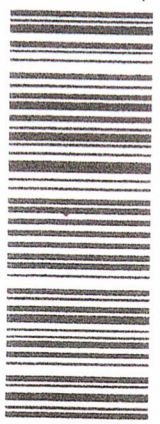
James Bruce
P.O. Box 1056
Santa Fe, NM 87504

S90891.018

\$9.73
US POSTAGE
FIRST CLASS
062513292292
87501
000137902



Magnum Hunter Production, Inc.
600 N Marienfeld Suite 600
Midland, TX 79701
Attn: Land Department



7022 1670 0002 1188 2427

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:

Magnum Hunter Production, Inc.
600 N Marienfeld Suite 600
Midland, TX 79701
Attn: Land Department



9590 9402 7635 2122 8863 92

2. Article Number (Transfer from service label)
7022 1670 0002 1188 2427 (over \$500)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Agent
 Addressee

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below:

3. Service Type
- Priority Mail
 - Registered Delivery
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Restricted Delivery

Domestic R

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	\$

Postmark Here

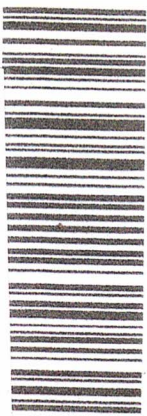
Magnum Hunter Production, Inc.
600 N Marienfeld Suite 600
Midland, TX 79701
Attn: Land Department

City, State, ZIP+4®

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

7504-1056

Mr. James Bruce
P.O. Box 1056
Santa Fe, NM 87504



7022 1670 0002 1187 8475

Petroleum Corporation
207 S. 4th Street
Artesia, New Mexico 88210

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:

Petroleum Corporation
207 S. 4th Street
Artesia, New Mexico 88210



9590 9402 7635 2122 8782 05

2. Article

7022 1670 0002 1187 8475

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

- Adult Signature
- Registered Mail™ Delivery
- Certified Mail®
- Collect on Delivery
- Collect on Delivery Restricted Delivery

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
- Adult Signature
- Registered Mail™ Delivery
- Certified Mail®
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Priority Mail Express
- Registered Mail™ Delivery
- Signature Confirmation
- Signature Confirmation Restricted Delivery

Domestic Return Receipt

7022 1670 0002 1187 8475

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

Petroleum Corporation

207 S. 4th Street
Artesia, New Mexico 88210

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

City, State, ZIP+4®

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

NIXIE 731 DC 1 0007/24/23

RETURN TO SENDER
UNDELIVERED

08/2

US POSTAGE
FIRST CLASS
06251329282
87501
000137914



\$9.73

7022 1670 0002 1187 8468

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	\$

Postmark
Here

Postage	\$
Total Postage and Fees	\$

Sent To **Alexander Resources, Inc.**
3804 Shady Valley Dr.
Arlington, Texas 76013

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

7022 1670 0002 1188 2502

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	\$

Postmark
Here

Postage	\$
Total Postage and Fees	\$

Sent To **TTCZ Properties, LLC**
201 Main Street Suite 400
Fort Worth, TX 76102

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

7022 1670 0002 1187 8383

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	\$

Postmark
Here

Postage	\$
Total Postage and Fees	\$

Sent To **Estate of Ralph E. Williamson**
P.O. Box 50498
Austin, TX 78763-0498

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

7022 1670 0002 1188 2458

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	\$

Postmark
Here

Postage	\$
Total Postage and Fees	\$

Sent To **Christine B. Motycka**
1004 N. Big Spring Suite 500
Midland, TX 79701

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

7022 1670 0002 1188 2489

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	\$

Postmark
Here

Postage	\$
Total Postage and Fees	\$

Sent To **Sarah Schreiber**
505 13th St SE Apt 4
Washington D.C., 20003-2248

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

7022 1670 0002 1188 3295

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	\$

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Postage	\$
Total Postage and Fees	\$

Sent To **Viola Elaine Barnes**
1004 N. Big Spring Suite 500
Midland, TX 79701

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

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

August 29, 2023

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of four applications for compulsory pooling, filed by Mewbourne Oil Company with the Oil Conservation Division, seeking to pool the Bone Spring formation underlying the following horizontal spacing units:

(i) Case No. 23688: Lots 1-4 (the N/2N/2) of Section 3 and Lots 1-4 (the N/2N/2) of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3AD Fed. Com. Well No. 1H. Applicant also seeks to vacate Order No. R-21575;

(ii) Case No. 23689: The S/2N/2 of Section 3 and the S/2N/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3HE Fed. Com. Well No. 1H;

(ii) Case No. 23690: The N/2S/2 of Section 3 and the N/2S/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3IL Fed. Com. Well No. 1H; and

(iv) Case No. 23691: The S/2S/2 of Section 3 and the S/2S/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3PM Fed. Com. Well No. 1H

These matters are scheduled for hearing at 8:15 a.m. on Thursday, September 21, 2023. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. You are not required to attend this hearing, but

as an owner of an interest who may be affected by the applications, 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@emnrd.nm.gov, 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

EXHIBIT A

TTCZ Properties LLC
c/o Private Wealth Asset Management
Suite 1075
801 Cherry Street
Fort Worth, Texas 76102

Attention: Pedie Monta

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 \$ _____

Sent To TTCZ Properties LLC
c/o Private Wealth Asset Management
Suite 1075
 Street and Apt. No., or 801 Cherry Street
 City, State, ZIP+4® Fort Worth, Texas 76102

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

7022 0090 0000 0862 5645

8/29

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:

TTCZ Properties, LLC
 201 Main Street Suite 400
 Fort Worth, TX 76102

9590 9402 7635 2122 8780 07

2. Article Number (Transfer from service label)
 7022 1670 0002 1188 2502

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) LUKE CRUMMEL

C. Date of Delivery 08/14/23

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

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Signature Confirmation™

Collect on Delivery Signature Confirmation Restricted Delivery

Collect on Delivery Restricted Delivery

ed Delivery

Domestic Return Receipt

CASE NOS. 23689 - 23691

STATUS OF CERTIFIED NOTICE

<u>INTEREST OWNER</u>	<u>MAILING DATE</u>	<u>RECEIPT DATE</u>	<u>CARD RETURNED</u>
<u>Working Interest Owners</u> Colgate Production, LLC	7/13/23	7/21/23	Y
Devon Energy Production Co., L.P.	7/13/23	7/22/23	Y
WPX Energy Permian, LCC	7/13/23	Not returned	N
Magnum Hunter Production, Inc.	7/13/23	Undelivered	N
Sarah Elizabeth Baker and Anthony M. Baker Trust	7/13/23	7/20/23	Y
C-W Flow, LLC	7/13/23	7/20/23	Y
Christine B. Motycka	7/13/23	Not returned	N
Julie Ellen Barnes	7/13/23	7/24/23	Y
Steven Clement Barnes	7/13/23	7/24/23	Y
Sarah Schreiber	7/13/23	7/20/23	Y
Suzanne Schreiber	7/13/23	Not returned	No
TTCZ Properties, LLC	8/29/23	Unknown	Y
Diane Denish	7/13/23	7/18/23	Y
Viola Elaine Barnes	7/13/23	Not returned	N
Mill Neck Associates	7/13/23	7/24/23	Y
Heritage Trust Company of New Mexico as Trustee of The Michael A. Baker Irrevocable Trust (Agent: Douglas Buchannan)	7/13/23	Unknown	Y

EXHIBIT

5

Heritage Trust Company of New Mexico as Trustee of The Josephine Laughlin Living Trust (Agent: Douglas Buchanan)	7/13/23	7/21/23	Y
Heritage Trust Company of New Mexico as Trustee of The Sarah Anne Baker Irrevocable Trust	7/13/23	7/20/23	Y
Great Western Drilling, Ltd.	7/13/23	7/27/23	Y
Finley Production Company, LP	7/13/23	7/21/23	Y
Veronica Olson Continuation Trust	7/13/23	Service refused	N
Estate of Ralph E. Williamson	7/13/23	Not returned	N
Eric Chancy Croft and Elizabeth Ann Williamson as Trustees of the Charla Geraldine Williamson Trust	7/13/23	7/20/23	Y
Rick Carlisle and Dee Ann Carlisle	7/13/23	7/20/23	Y
<u>Record Title Owners</u>			
Barnes Adelante Trust	7/13/23	7/24/23	Y
Barnes JC Trust	7/13/23	7/24/23	Y
EOG Resources, Inc.	7/13/23	7/21/23	Y
Marathon Oil Permian, LLC	7/13/23	7/21/23	Y
Burlington Resources Oil & Gas Co., LP	7/13/23	7/20/23	Y
Alexander Resources, Inc.	7/13/23	Not returned	N

Petroleum Corporation

7/13/23

Unclaimed

N

Carlsbad Current Argus.

PART OF THE USA TODAY NETWORK

Affidavit of Publication

Ad # 0005779098

This is not an invoice

JAMES BRUCE ATTORNEY AT LAW
POBOX 1056

SANTA FE, NM 87504

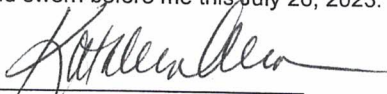
I, a legal clerk of the **Carlsbad Current Argus**, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements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

07/26/2023



Legal Clerk

Subscribed and sworn before me this July 26, 2023:



State of WI, County of Brown
NOTARY PUBLIC

1-7-26

My commission expires

KATHLEEN ALLEN
Notary Public
State of Wisconsin

EXHIBIT 6

Ad # 0005779098
PO #: Colgate Production, LLC
of Affidavits 1

This is not an invoice

NOI

To: (a) Colgate Production, LLC, Devon Energy Production Co., L.P., WPX Energy Permian, LCC, Magnum Hunter Production, Inc., Sarah Elizabeth Baker and Anthony M. Baker Trust, C-W Flow, LLC, Christine B. Motycka, Julie Ellen Barnes, Steven Clement Barnes, Sarah Schreiber, Suzanne Schreiber, TTCZ Properties, LLC, Diane Denish, Viola Elaine Barnes, Mill Neck Associates, Heritage Trust Company of New Mexico as Trustee of the Michael A. Baker Irrevocable Trust (Agent: Douglas Buchannan), Heritage Trust Company of New Mexico as Trustee of the Josephine Laughlin Living Trust (Agent: Douglas Buchannan), Heritage Trust Company of New Mexico as Trustee of the Sarah Anne Baker Irrevocable Trust, Great Western Drilling, Ltd., Finley Production Company, LP, Veronica Olson Continuation Trust, Estate of Ralph E. Williamson, Eric Chancy Croft and Elizabeth Ann Williamson as Trustees of the Charla Geraldine Williamson Trust, Rick Carlisle, Dee Ann Carlisle (Working Interest Owners), and (b) Barnes Adelante Trust, Barnes JC Trust, EOG Resources, Inc., Marathon Oil Permian, LLC, Burlington Resources Oil & Gas Co., LP, Alexander Resources, Inc., and Petroleum Corporation (Record Title Owners), or your heirs, devisees, successors, or assigns: Mewbourne Oil Company has filed four applications with the New Mexico Oil Conservation Division seeking orders as follows:

(i) Case No. 23688: Seeking an order (a) vacating Order No. R-21575, and (b) pooling all uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of Lots 1-4 (the N/2N/2) of Section 3 and Lots 1-4 (the N/2N/2) of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3AD Fed. Com. Well No. 1H;

(ii) Case No. 23689: Seeking an order pooling all uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S/2N/2 of Section 3 and the S/2N/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3HE Fed. Com. Well No. 1H;

(iii) Case No. 23690: Seeking an order pooling all uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the N/2S/2 of Section 3 and the N/2S/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3IL Fed. Com. Well No. 1H; and

(iv) Case No. 23691: Seeking an order pooling all uncommitted mineral interest owners in the Bone Spring formation underlying a horizontal spacing unit comprised of the S/2S/2 of Section 3 and the S/2S/2 of Section 4, Township 20 South, Range 29 East, NMPM. The unit will be dedicated to the Judge 3/4 B3PM Fed. Com. Well No. 1H.

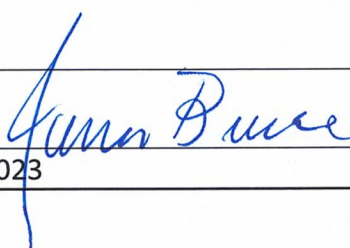
Also to be considered will be the cost of drilling, completing, testing, and equipping the wells and the allocation of the cost thereof, as well as actual operating costs and charges for supervision, designation of applicant as operator of the wells, and a 200% charge for the risk involved in drilling, completing, testing, and equipping the wells. These matters are scheduled for hearing on August 3, 2023 at 8:15 a.m. During the current circumstances, state buildings are closed to the public and the hearing will be conducted remotely. To view the hearing docket and to determine how to participate in an electronic hearing, go to <https://www.emnrd.nm.gov/ocd/hearing-info/>, or contact Marlene Salvidrez at Marlene.Salvidrez@emnrd.nm.gov. 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@emnrd.nm.gov, 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 attorney for applicant, James Bruce, P.O. Box 1056, Santa Fe, New Mexico 87504, jamesbruc@aol.com. The units are located approximately 17-1/2 miles east-southeast of Lakewood, New Mexico.
#5779098, Current Argus, July 26, 2023

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Case: 23690	APPLICANT'S RESPONSE
Date: September 21, 2023	
Applicant	Mewbourne Oil Company
Designated Operator & OGRID (affiliation if applicable)	Mewbourne Oil Company/OGRID 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	Judge Bone Spring wells
Formation/Pool	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	Entire Bone Spring formation
Pool Name and Pool Code:	Parkway; Bone Spring/Pool Code 49622
Well Location Setback Rules:	Statewide Rules for horizontal wells – 330' and 100' setbacks
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	320 acres
Building Blocks:	40 acres
Orientation:	East-West
Description: TRS/County	N/2S/2 §3 and N/2S/2 §4, Township 20 South, Range 29 East, NMPM, Eddy County
Standard Horizontal Well Spacing Unit (Y/N), If No, describe and is approval of non-standard unit requested in this application?	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	N
Proximity Tracts: If yes, description	N

EXHIBIT 7

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)	Add wells as needed
Well #1	Judge 3/4 B31L Federal Com. Well No. 1H API No. 30-015-53849 SHL: 1125 FSL & 250 FEL §3 BHL: 1850 FSL & 100 FWL §4 FTP: 1850 FSL & 100 FEL §3 LTP: 1850 FSL & 100 FWL §4 Third Bone Spring/TVD 9152 feet/MD 19291 feet
Well #2	
Horizontal Well First and Last Take Points	See above
Completion Target (Formation, TVD and MD)	See above
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$8000
Production Supervision/Month \$	\$800
Justification for Supervision Costs	Exhibit 2, page 2
Requested Risk Charge	Cost plus 200%
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 6
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibit 2-B
Tract List (including lease numbers and owners)	Exhibit 2-B
If approval of Non-Standard Spacing Unit is requested, Tract List (including lease numbers and owners) of Tracts subject to	

notice requirements.	
Pooled Parties (including ownership type)	Exhibits 2-B and 2-C; Working Interest Owners and Record Title Owners (to obtain approval of communitization agreement)
Unlocatable Parties to be Pooled	Yes
Ownership Depth Severance (including percentage above & below)	No Depth Severance
Joinder	
Sample Copy of Proposal Letter	Exhibit 2-D
List of Interest Owners (i.e. Exhibit A of JOA)	Exhibit 2-B
Chronology of Contact with Non-Joined Working Interests	Exhibit 2-D
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-B
Well Orientation (with rationale)	East-West; Exhibits 3 and 3-A
Target Formation	Third Bone Spring Sand
HSU Cross Section	Exhibit 3-B
Depth Severance Discussion	N/A
Forms, Figures and Tables	
C-102	Exhibit 2-A
Tracts	Exhibit 2-B
Summary of Interests, Unit Recapitulation (Tracts)	Exhibits 2-B
General Location Map (including basin)	Exhibit 3-A
Well Bore Location Map	Exhibit 3-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-B
Additional Information	
Special Provisions/Stipulations	
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:	September 16, 2023