

**BEFORE THE  
OIL CONSERVATION DIVISION  
NEW MEXICO ENERGY, MINERALS AND  
NATURAL RESOURCES DEPARTMENT**

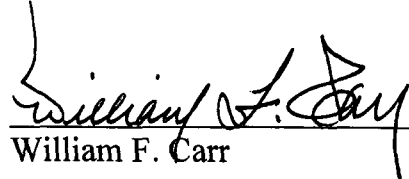
**IN THE MATTER OF THE APPLICATION  
OF MEWBOURNE OIL COMPANY FOR  
COMPULSORY POOLING, EDDY  
COUNTY, NEW MEXICO.**

**CASE NO. 13519**

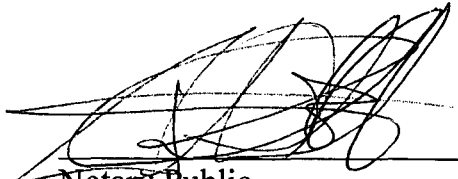
**AFFIDAVIT**

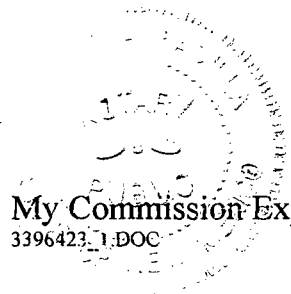
STATE OF NEW MEXICO        )  
  ) ss.  
COUNTY OF SANTA FE        )

William F. Carr, attorney in fact and authorized representative of Mewbourne Oil Company, the Applicant herein, being first duly sworn, upon oath, states that notice of the above-referenced Application was mailed to the interested parties shown on Exhibit "A" attached hereto in accordance with Oil Conservation Division Rules, and that true and correct copies of the notice letter and proof of notice are attached hereto.

  
\_\_\_\_\_  
William F. Carr

SUBSCRIBED AND SWORN to before this 23<sup>rd</sup> day of AUGUST 2005 by William F. Carr.

  
\_\_\_\_\_  
Notary Public



My Commission Expires: April 26, 2007  
3396423\_1.DOC

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Case No. 13519 Exhibit No. 6  
Submitted by:  
MEWBOURNE OIL COMPANY  
Hearing Date: August 25, 2006

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage)

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

**OFFICIAL USE**

WFC 32501 Postage	\$ .60
Pine Box Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>

Santa Fe, NM  
 JUN 23 2005  
 Postmark Here

**Sent To**  
 Sammy D. Clark  
 1617 North Thomason Road  
 Carlsbad, NM 88220

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

PS Form 3800

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  
 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:  
 Sammy D. Clark  
 1617 North Thomason Road  
 Carlsbad, NM 88220

2. Article Number (Cop) 7001 1140 0002 9557 8668

PS Form 3811, July 1999

A. Received by (Please Print Clearly) Cheryl Clark  
 B. Date of Delivery 6-27-05

C. Signature  
 X Cheryl Clark  Agent  Addressee

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage)

Domestic Return Receipt 102595-00-M-0952

**OFFICIAL USE**

WFC 32501 Postage	\$ .60
Pine Box Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>

Santa Fe, NM  
 JUN 23 2005  
 Postmark Here

**Sent To**  
 Robert J. Epperson  
 P. O. Box 170  
 Satin, TX 76685

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

PS Form 3800, Jan

MAIL RETURNED

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

**OFFICIAL USE**

WFC 32501 Postage	\$ .60
Pine Box Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>

Santa Fe, NM  
 JUN 23 2005  
 Postmark Here

**Sent To**  
 Larry Edward Fanning  
 1008 North Guadalupe  
 Carlsbad, NM 88220

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

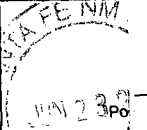
PS Form 3800

Mail Returned

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage)

OFFICIAL USE

WFC 37501 Postage	\$ .60
Certified Fee	2.30
PineBox Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Martin Lee Fanning, Jr.  
P. O. Box 1226  
Artesia, NM 88210

**Sent To**  
Martin Lee Fanning, Jr.  
P. O. Box 1226  
Artesia, NM 88210

PS Form 3800, J

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery

Laura Fanning 6/29/05

C. Signature  Agent  Addressee

X Laura Fanning

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

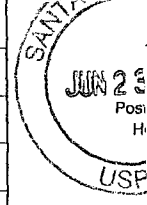
2. Article Number (Copy) 7001 1140 0002 9557 8705

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage)

OFFICIAL USE

WFC 37501 Postage	\$ .60
Certified Fee	2.30
PineBox Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>



- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Billy Joe Green  
1242 West 78th Terrace  
Hialeah, FL 33014-3442

**Sent To**  
Billy Joe Green  
1242 West 78th Terrace  
Hialeah, FL 33014-3442

PS Form 3800, J

A. Received by (Please Print Clearly) B. Date of Delivery

6-27-05

C. Signature  Agent  Addressee

X Billy Joe Green

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Copy) 7001 1140 0002 9557 8729

PS Form 3811, July 1999 Domestic Return Receipt 102595-99-M-1789

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC 37501 Postage	\$ .60
Certified Fee	2.30
PineBox Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>



*Mail Returned*

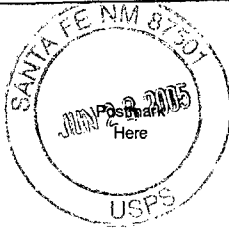
**Sent To**  
Robert Richard Green  
2815 Kismet  
Houston, TX 77043

PS Form 3800, J

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$ .60
37301 Certified Fee	2.30
Pinebox Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>



**MAIL RETURNED**

Sent To: Robin L. Hall  
 P. O. Box 7343  
 Ruidoso Downs, NM 88346

City, State, ZIP+

PS Form 3800, J

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage)

OFFICIAL USE

WFC Postage	\$ .60
32501 Certified Fee	2.30
Pine Box Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>



**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Cathy J. Jones  
 P. O. Box 562  
 Ruidoso Downs, NM 88346

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) **John A. Ehr Jr** B. Date of Delivery **6/27/05**

C. Signature **John A. Ehr Jr**  Agent  Addressee

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Copy from se **7001 1140 0002 9557 8712**)

PS Form 3811, July 1999

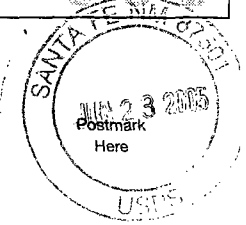
Domestic Return Receipt

102595-00-M-0952

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$ .60
37301 Certified Fee	2.30
Pine Box Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>



**MAIL RETURNED**

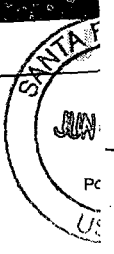
Sent To: Kenneth Jones  
 2101 South "I" Street  
 Pensacola, FL 32501

City, State, ZIP+

PS Form 3800, J

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage)

WFC 32501	Postage	\$ .60
Pine Box	Certified Fee	2.30
	Return Receipt Fee (Endorsement Required)	1.75
	Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees		\$ 4.65



**Sent To** Alan Gene Needham  
60 "W. Jackson Road  
Artesia, NM 88210

Street, Apt. No., or PO Box No.  
City, State, ZIP

PS Form 3800

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:  
  
Alan Gene Needham  
60 "W. Jackson Road  
Artesia, NM 88210

2. Article Number ( 7001 1140 0002 9557 8637

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) B. Date of Delivery  
6-28-95

C. Signature  
X *Debra Needham*  Agent  Addressee

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage)

WFC 32501	Postage	\$ .60
Pine Box	Certified Fee	2.30
	Return Receipt Fee (Endorsement Required)	1.75
	Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees		\$ 4.65



**Sent To** Georgia Mills Needham  
8295 Cherokee Road  
Lake Arthur, NM 88253

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

PS Form 3800, J

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:  
  
Georgia Mills Needham  
8295 Cherokee Road  
Lake Arthur, NM 88253

2. Article Number (Copy 7001 1140 0002 9557 8675

A. Received by (Please Print Clearly) B. Date of Delivery  
*Regina Scott* 07-01-95

C. Signature  
X *Regina Scott*  Agent  Addressee

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

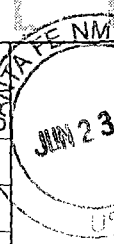
3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage)

WFC 32501	Postage	\$ .60
Pine Box	Certified Fee	2.30
	Return Receipt Fee (Endorsement Required)	1.75
	Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees		\$ 4.65



**Sent To** Minnie Naomi Needham  
1501 James  
Artesia, NM 88210

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

PS Form 3800, J

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:  
  
Minnie Naomi Needham  
1501 James  
Artesia, NM 88210

2. Article Number (Copy from 7001 1140 0002 9557 8682

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature  
X *Minnie Naomi Needham*  Agent  Addressee

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT  
(Domestic Mail Only; No Insurance Coverage Provided)**

**OFFICIAL MAIL**

WFC 32501 Postage	\$ .60
Certified Fee	2.30
Pine Box Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>

**Sent To** Robert L. Needham  
1405 W. Washington  
Artesia, NM 88210

Street, Apt. No. or PO Box No.  
City, State, ZIP

PS Form 3800

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Robert L. Needham  
1405 W. Washington  
Artesia, NM 88210

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) **ROBERT L. NEEDHAM** B. Date of Delivery **6-29-05**

C. Signature **X Robert L. Needham**  Agent  Addressee

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Copy of) **7001 1140 0002 9557 8644**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT  
(Domestic Mail Only; No Insurance Coverage Provided)**

**OFFICIAL MAIL**

WFC 32501 Postage	\$ .60
Certified Fee	2.30
Pine Box Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>

**Sent To** Naomi Glynn Needham  
aka Naomi Glynn Needham  
Fenk  
1501 James  
Artesia, NM 88210

Street, Apt. No. or PO Box No.  
City, State, ZIP

PS Form 3800

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Naomi Glynn Needham  
aka Naomi Glynn Needham  
Fenk  
1501 James  
Artesia, NM 88210

C. Signature **Naomi**  
**X Naomi Fenk**  Agent  Addressee

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number **7001 1140 0002 9557 8651**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT  
(Domestic Mail Only; No Insurance Coverage Provided)**

**OFFICIAL MAIL**

WFC 32501 Postage	\$ .60
Certified Fee	2.30
Pine Box Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>

**Sent To** Pogo Producing Company  
Attn: Mr. Scott McDaniel  
P. O. Box 10340  
Midland, TX 79702

Street, Apt. No. or PO Box No.  
City, State, ZIP

PS Form 3800

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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:

Pogo Producing Company  
Attn: Mr. Scott McDaniel  
P. O. Box 10340  
Midland, TX 79702

C. Signature **Scott McDaniel**  
**X Scott McDaniel**  Agent  Addressee

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

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number (Copy) **7001 1140 0002 9557 8606**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

**U.S. Postal Service  
CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only; No Insurance Coverage)

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- 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. Received by (Please Print Clearly) B. Date of Delivery

*Robert A. Williams*

C. Signature  Agent  Addressee

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

If YES, enter delivery address below:

1. Article Addressed to:

Robert A. Williams  
P. O. Box 792  
Ozona, TX 76943

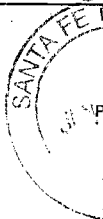
3. Service Type

- Certified Mail  Express Mail
- Registered  Return Receipt for Merchandise
- Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

**OFFICIAL**

Postage	\$ .60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 4.65</b>



Sent To Robert A. Williams  
P. O. Box 792  
Ozona, TX 76943

Street, Apt. No.; or PO Box No.  
City, State, ZIP+

2. Article Number (Copy from) 7001 1140 0002 9557 8699

PS Form 3800, 1-99

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

7001 1140 0002 9557 8699

# HOLLAND & HART<sup>LLP</sup>

110 North Guadalupe Suite 1 Santa Fe, NM 87501  
P.O. Box 2208 Santa Fe, NM 87504-2208



Robert Richard Green  
2815 Kismet  
Houston, TX 77043

GREEN 770432032 IN 11 07/09/05  
RETURN TO SENDER  
NO FORWARD ORDER ON FILE  
UNABLE TO FORWARD  
RETURN TO SENDER

RUUJ 1140 0002 9557 8743

77043 2032 0002 9557 8743



7001 1140 0002 9557 8620

REFUSED  
UNCLAIMED  
RETURNED TO SENDER

6-27-05  
L1N  
M17

CERTIFIED MAIL

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

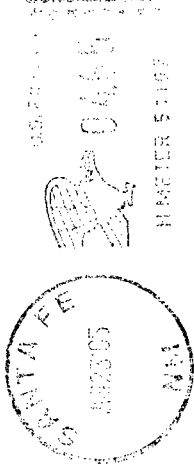
110 North Guadalupe Suite 1 Santa Fe, NM 87501  
P.O. Box 2208 Santa Fe, NM 87504-2208

HOLLAND & HART



HOLLAND & HART  
110 North Guadalupe Suite 1 Santa Fe, NM 87501  
P.O. Box 2208 Santa Fe, NM 87504-2208

7/2/05  
WPH



POSTAGE WILL BE PAID BY ADDRESSEE

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

CERTIFIED MAIL

1ST NOTICE  
2ND NOTICE  
RETURN

Kenneth Jones  
2101 ~~St~~ "A" Street  
Pensacola, FL 32501

7001 1140 0002 9557 8736

RETURN RECEIPT  
TESTED

32501+1726 22

RECEIVED  
JUN 25 11 00 AM  
METER 51071

RECEIVED  
Forward  
Expired

Robert J. Papperson  
P.O. Box 110  
Saginaw, MI 48606

1140 0002 9557 8613  
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT DOTTED LINE  
**CERTIFIED MAIL**

1140 0002 9557 8613

POSTAGE WILL BE PAID BY ADDRESSEE

7664310170 01 87501/1809

16185  
**HOLLAND & HART**  
110 North Guadalupe Santa Fe, NM 87501  
P.O. Box 2208  
**1ST NOTICE**  
**2ND NOTICE**  
**RETURNED**

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

7001 1140 0002 9557 8750

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# Affidavit of Publication

NO. 18916

STATE OF NEW MEXICO

County of Eddy:

Gary D. Scott being duly

sworn, says: That he is the Publisher of The Artesia Daily Press, a daily newspaper of general circulation, published in English at Artesia, said county and county and state, and that the here to attached

### Legal Notice

was published in a regular and entire issue of the said Artesia Daily Press, a daily newspaper duly qualified for that purpose within the meaning of Chapter 167 of the 1937 Session Laws of the state of New Mexico for 1 consecutive week/days on the same

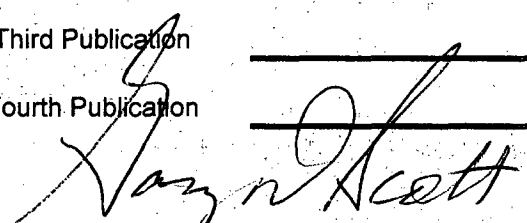
day as follows:

First Publication June 24 2005

Second Publication \_\_\_\_\_

Third Publication \_\_\_\_\_

Fourth Publication \_\_\_\_\_



Subscribed and sworn to before me this

24th Day June 2005



Notary Public, Eddy County, New Mexico

My Commission expires September 23, 2007

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### NOTICE OF PUBLICATION STATE OF NEW MEXICO ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT OIL CONSERVATION DIVISION SANTA FE, NEW MEXICO

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on July 14, 2005, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appoint for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-476-3458 or through the New Mexico Relay Network, 1-800-659-1779 by July 4, 2005. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

**STATE OF NEW MEXICO TO:**  
All named parties and persons having any right, title, interest or claim in the following cases and notice to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

**CASE 13519:**  
Application of Mewbourne Oil Company for compulsory pooling, Eddy County, New Mexico. Applicant seeks an order pooling all mineral interests in all formations from the surface to the base of the Morrow in the W/2 of Section 21, Township 20

### LEGAL NOTICE

South, Range 25 East, N.M.P.M in the following described spacing and proration units: the W/2 to form a standard 320-acre spacing and proration unit for all formations developed on a 320-acre spacing within that vertical extent which includes but is not necessarily limited to the Undesignated Cemetery-Morrow Gas Pool, the Undesignated North Seven Rivers Hills-Atoka Gas Pool, and the Undesignated North Cemetery-Wolfcamp Gas Pool Gas Pool; the NW/4 to form a standard spacing and proration unit for all formations developed on 160-acre spacing within that vertical extent; and the NW/4 NW/4 to form a standard spacing and proration unit for all formations developed on 40-acre spacing within that vertical extent. Said units are to be dedicated to applicant's proposed Pine Box "21" Federal Com Well No. 1 to be drilled and completed at a standard gas well location 1310 feet from the North and West lines (Unit D) of said Section 21. Also to be considered will be the cost of drilling and completing said well, the allocation of the cost thereof, actual operating costs and charges for supervision, the designation of Mewbourne Oil Company as operator of the well, and a charge for risk involved in drilling said well. Said area is located approximately 7 miles southwest of Lakewood, New Mexico.

Given under the Seal of the State of New Mexico Oil Conservation Commission at Santa Fe, New Mexico on this 22nd day of June 2005.

**STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION  
Mark E. Fesmire, P.E.,  
Director**

Published in the Artesia Daily Press, Artesia, N.M. June 24, 2005.

Legal 18916