

ABOVE THIS LINE FOR DIVISION USE ONLY

**NEW MEXICO OIL CONSERVATION DIVISION**  
 - Engineering Bureau -  
 1220 South St. Francis Drive, Santa Fe, NM 87505



**ADMINISTRATIVE APPLICATION CHECKLIST**

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

**Application Acronyms:**

- [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]**  
**[DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]**  
**[PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]**  
**[WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]**  
**[SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]**  
**[EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]**

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A] *30-039-31148*  
 [A] Location - Spacing Unit - Simultaneous Dedication *Encana Oil*  
 NSL  NSP  SD  
 Check One Only for [B] or [C] *Escrito B76 2407*  
 [B] Commingling - Storage - Measurement  
 DHC  CTB  PLC  PC  OLS  OLM  
 [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery  
 WFX  PMX  SWD  IPI  EOR  PPR  
 [D] Other: Specify \_\_\_\_\_

- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or  Does Not Apply  
 [A]  Working, Royalty or Overriding Royalty Interest Owners  
 [B]  Offset Operators, Leaseholders or Surface Owner  
 [C]  Application is One Which Requires Published Legal Notice  
 [D]  Notification and/or Concurrent Approval by BLM or SLO  
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office  
 [E]  For all of the above, Proof of Notification or Publication is Attached, and/or,  
Attachment No. 4 presents copies of notification to interest owners mailed Certified/ Return Receipt (RR). Upon receipt of RRs, copies will be sent to NMOCD.  
 [F]  Waivers are Attached

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

**Note: Statement must be completed by an individual with managerial and/or supervisory capacity.**

Holly Hill \_\_\_\_\_ *Holly Hill* \_\_\_\_\_ Regulatory Analyst \_\_\_\_\_ *7/11/13*  
 Print or Type Name Signature Title Date  
 \_\_\_\_\_ holly.hill@encana.com \_\_\_\_\_  
 e-mail Address

RECEIVED OGD  
 JUL 16 A 9 52



July 11, 2013

**Transmitted Via Certified Mail**

Ms. Jami Bailey  
New Mexico Oil Conservation Division  
1220 South St. Francis Drive  
Santa Fe, NM 87505

Mr. Dave Evans, District Manager  
Bureau of Land Management  
6251 College Blvd., Suite A  
Farmington, NM 87402

**Re: Application for Off-Lease Measurement  
Escrito E26-2407 01H**  
Section 26, Township 24 North – Range 7 West  
Rio Arriba County, New Mexico

Dear Ms. Bailey and Mr. Evans:

Encana Oil & Gas (USA) Inc. (Encana) requests Administrative Approval for Off-Lease Measurement and Sale of natural produced gas as well as Off-Lease Measurement, Sale and Transportation of produced crude oil and condensate from the Escrito E26-2407 01H well. Encana will operate the well, developing production from the N2 of Section 27, T24N R7W; New Mexico Federal Lease NM 014023 and SF 078562. Encana will file the necessary documents to communitize the two (2) Federal leases. Further, the well will produce from the Escrito Gallup Associated Pool (Pool Order 22619\*). There is no Indian acreage associated with the well.

As you are most likely aware, in order to optimally develop horizontal wells, Encana has proceeded with permitting various well pads in the section adjacent to the Project Area (PA) and/or developed acreage. Therefore, in this instance, the well pad surface hole location (SHL) is off-lease in the SWNW of Section 26, T24N R7W.

Off-Lease Measurement of natural gas will occur both at the well head in the SWNW of Section 26, T24N R7W where a well allocation meter will be installed, as well as in the SWSE of Section 23, T24N R7W where the pipeline ties into Enterprise Products Partners' (Enterprise) central delivery point, gas custody transfer meter (CDP). Further, Encana intends to install a gas lift compressor on the well as depicted and described on Attachment No 5. Please note, Encana intends to submit to the Bureau of Land Management (BLM) a sundry to formally request approval to install the gas lift on the well, which, once approved, will be forwarded on to the New Mexico Oil Conservation Division (NMOCD) for their approval. There will not be any commingling of oil or condensate with naturally produced gas in the pipeline.

Off-Lease Measurement, Sale and Transportation of produced oil and condensate will occur at the well pad SHL for the Escrito E26-2407 01H, where Encana intends to install five (5) 400-barrel oil tanks and one (1) 400-barrel water tank. Generally, produced water will be measured using tank gauges and produced oil will be measured using a strapping table measurement by the associated vendors. Run tickets will be filled out onsite for each load of oil, which will show the tank gauge readings, oil gravity, temperature and BS&W content. Each valve on the tanks will have seals. Records will be kept that will show when seals are installed and removed. The tank seal information is also recorded on the run tickets, which will accompany the transportation of the oil.

**Encana Oil & Gas (USA) Inc.**

370 17<sup>th</sup> Street, Suite 1700, Denver Colorado 80202 720.876.3533 (O) 303.482.6819 (C) [katie.wegner@encana.com](mailto:katie.wegner@encana.com)

Enclosed please find the following:

**A. Administrative Application Checklist for Off-Lease Measurement dated July 11, 2013.**

**B. State of New Mexico Oil Conservation Division Form C-107-B, Application for Off-Lease Measurement dated July 11, 2013. Attached to and made part of the Application for Off-Lease Measurement please find the following:**

**Attachment No. 1:** Presents the lease and pool information for the well.

**Attachment No. 2a and 2b:** Presents plats depicting the off-lease well pad SHL and pipeline route for the Escrito E26-2407 01H as well as a depiction of lease boundaries. The well pad SHL will have an allocation meter where Off-Lease Measurement of natural gas will occur; as well as Off-Lease Measurement, Sale and Transportation of produced crude oil and water. Additionally, the plat depicts Off-Lease Measurement for natural gas at the CDP, tying into Enterprise's CDP custody transfer meter in the SWSE of Section 23, T24N R7W where the 5,784-foot long pipeline will be installed, leading back to the Escrito E26-2407 01H well pad SHL. Please note that Encana received BLM approval for the pipeline right-of-way on June 24, 2013 (NMNM 129350). Encana will supply the meter number of the CDP to the BLM once the pipeline has been installed and interconnected into Enterprise's pipeline. The well will be equipped with a continuous recording gas allocation meter (or some form of approved alternative measurement) operated and maintained by Encana. Prior to converting any gas measurement from a conventional allocation meter to an alternative measurement method, Encana will seek formal approvals. The allocation procedures are presented on **Attachment No. 5a**.

Condensate and oil will be separated, stored and sold at the well head SHL, which is off-lease. Depending on their availability Encana will enlist the services of High Tech Tools, LLC (mailing address: PO Box 1244 Aztec, NM 87410; phone number: 505-334-2266) or Three Rivers Trucking, Inc. (mailing address: PO Box 2728, Farmington, NM 87499; phone number: 505-632-5300) to transport produced water to Basin Disposal Inc. (address: 300 Legion Road, Aztec, NM 87410; phone number: 505-334-3013). Produced water will be generally measured using tank gauges.

Encana will enlist Western Refining, to transport and purchase crude oil from the Escrito E26-2407 01H to the Gallup Refinery (location: I-40, Exit 39, Jamestown, NM 87347; Route 3, Box 7, Gallup, NM 87301; phone number: 505-722-3833). Western Refining will provide a strapping table measurement for each oil tank at the facility which will be used to determine the exact volume in each tank. Run tickets will be filled out for each load of oil, onsite, which will show the tank gauge readings, oil gravity, temperature and BS&W content. Each valve on the tanks will have seals. Records will be kept and logged into an internal database that will show when seals are installed and removed. The tank seal information is also recorded on the tickets, which will accompany the transportation of the oil.

**Attachment No. 2c:** Presents the Escrito E26-2407 01H well dedication acreage as depicted on the NMOCD Form C-102.

**Attachment No. 3:** Presents a leasehold ownership summary for the well. Encana is the only other working interest owner in the well. The royalty interest is Federal. All overriding royalty interest owners have been captured on Attachment No. 3. As required by the NMOCD all interest owners have been given notice of this application.

**Attachment No. 4:** Presents a copy of the notice sent to the interest owners. All notice letters have been mailed certified, return receipt. Upon receiving the return receipts, copies will be forwarded to the NMOCD. Additionally, Encana will place a legal advertisement in The Daily Times in Farmington to adequately notify any affected parties of said application.

Encana Oil & Gas (USA) Inc.

370 17<sup>th</sup> Street, Suite 1700, Denver Colorado 80202 720.876.5331 (O) 303.521.2835 (C) [holly.hill@encana.com](mailto:holly.hill@encana.com)

**Attachment No. 5a and 5b:** Presents the allocation procedures for the Off-Lease Measurement of natural produced gas. Additionally, included as Attachment No. 5b is a gas lift well pad schematic and description for the proposed well pad facility layout. And lastly, included as Attachment No. 5c is a depiction of the interconnection of the Escrito E26-2407 01H pipeline into Enterprise's pipeline at the CDP.

In conclusion, Encana is requesting Administrative Approval for Off-Lease Measurement and Sale of natural produced gas, which will tie into Enterprise Production's CDP in the SWSE of Section 23, T24N R7W. Additionally, Encana is requesting Administrative Approval for Off-Lease Measurement, Sale and Transportation of produced crude oil and condensate from the Escrito E26-2407 01H.

\*Pursuant to NMAC 19.15.15.13 Encana will apply for administrative approval for for an unorthodox well location in the Escrito Gallup Associated Pool for the Escrito E26-2407 01H.

Please do not hesitate to contact me directly at 720-876-5331 with any questions or concerns.

Encana Oil & Gas (USA) Inc.

A handwritten signature in black ink that reads "Holly Hill". The signature is written in a cursive, flowing style.

Holly Hill  
Regulatory Analyst

Enc.

District I  
1625 N. French Drive, Hobbs, NM 88240  
District II  
811 S. First St., Artesia, NM 88210  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
District IV  
1220 S. St Francis Dr, Santa Fe, NM  
87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-107-B  
Revised August 1, 2011

**OIL CONSERVATION DIVISION**  
1220 S. St Francis Drive  
Santa Fe, New Mexico 87505

Submit the original application to the Santa Fe office with one copy to the appropriate District Office.

**APPLICATION FOR SURFACE COMMINGLING (DIVERSE OWNERSHIP)**

OPERATOR NAME: Encana Oil & Gas (USA) Inc.

OPERATOR ADDRESS: 370 17<sup>th</sup> Street, Suite 1700, Denver, CO 80202

APPLICATION TYPE:

Pool Commingling  Lease Commingling  Pool and Lease Commingling  Off-Lease Storage and Measurement (Only if not Surface Commingled)

LEASE TYPE:  Fee  State  Federal

Is this an Amendment to existing Order?  Yes  No If "Yes", please include the appropriate Order No. \_\_\_\_\_

Have the Bureau of Land Management (BLM) and State Land office (SLO) been notified in writing of the proposed commingling  
 Yes  No

**(A) POOL COMMINGLING**  
Please attach sheets with the following information

(1) Pool Names and Codes	Gravities / BTU of Non-Commingled Production	Calculated Gravities / BTU of Commingled Production		Calculated Value of Commingled Production	Volumes

- (2) Are any wells producing at top allowables?  Yes  No  
 (3) Has all interest owners been notified by certified mail of the proposed commingling?  Yes  No.  
 (4) Measurement type:  Metering  Other (Specify)  
 (5) Will commingling decrease the value of production?  Yes  No If "yes", describe why commingling should be approved

**(B) LEASE COMMINGLING**  
Please attach sheets with the following information

- (1) Pool Name and Code.  
 (2) Is all production from same source of supply?  Yes  No  
 (3) Has all interest owners been notified by certified mail of the proposed commingling?  Yes  No  
 (4) Measurement type:  Metering  Other (Specify)

**(C) POOL and LEASE COMMINGLING**  
Please attach sheets with the following information

- (1) Complete Sections A and E.

**(D) OFF-LEASE STORAGE and MEASUREMENT**  
Please attached sheets with the following information

- (1) Is all production from same source of supply?  Yes  No  
 (2) Include proof of notice to all interest owners. See Attachment No. 4

**(E) ADDITIONAL INFORMATION (for all application types)**  
Please attach sheets with the following information

- (1) A schematic diagram of facility, including legal location. See Attachment No. 2 and Attachment No. 5  
 (2) A plat with lease boundaries showing all well and facility locations. Include lease numbers if Federal or State lands are involved. Attachment No.2  
 (3) Lease Names, Lease and Well Numbers, and API Numbers. See Attachment No. 1

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE: Holly Hill

TITLE: Regulatory Analyst

DATE: 7/11/13

TYPE OR PRINT NAME: Holly Hill

TELEPHONE NO.: 720-876-5331

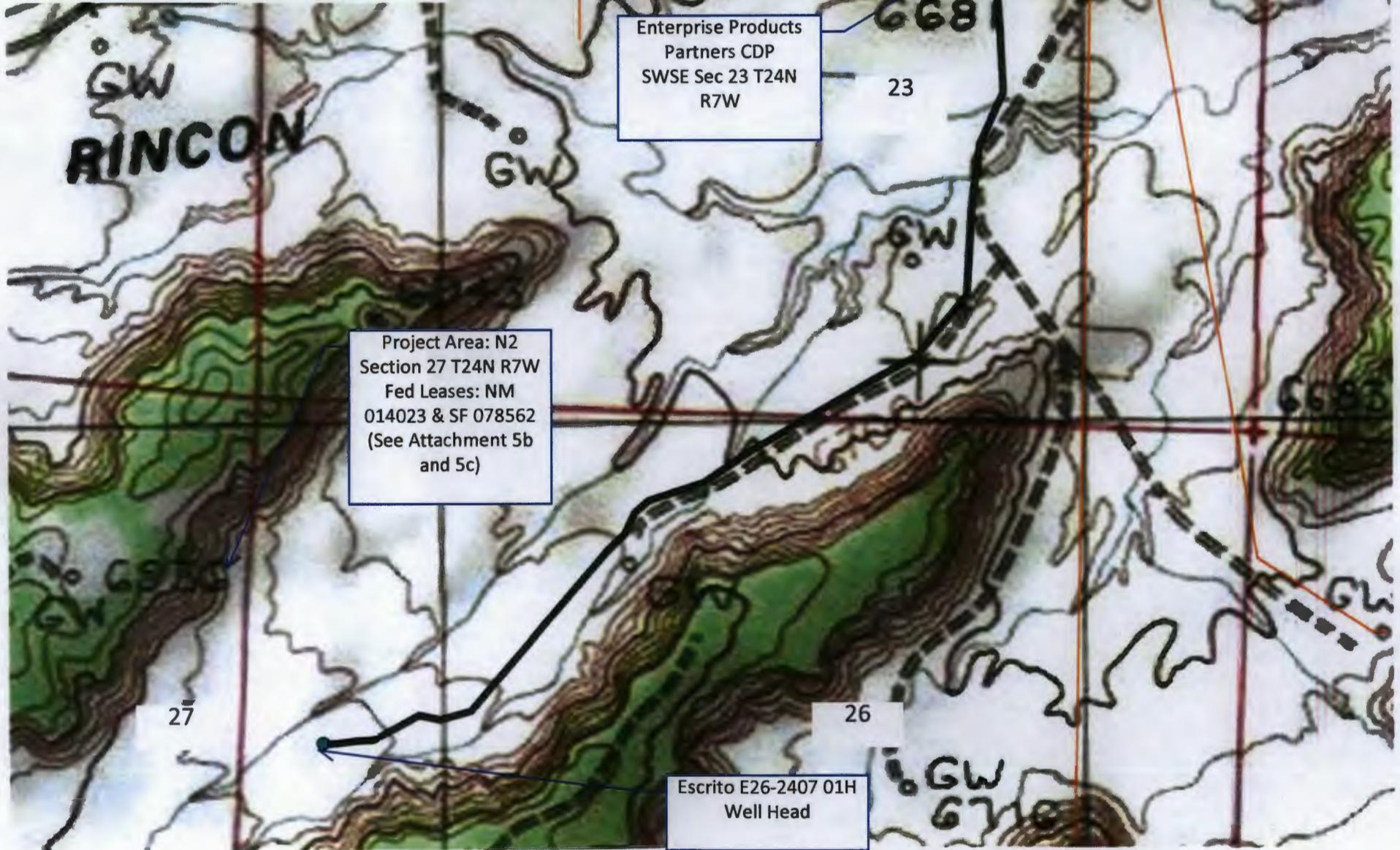
E-MAIL ADDRESS: holly.hill@encana.com

Attachment No. 1  
 Encana Oil Gas (USA) Inc.  
 Escrito E26-2407 01H  
 Off-Lease Measurement Application  
 Well Pad Measurement: SWNW Sec 26 T24N R7W  
 Project Area: N2 Section 27 T24N R7W  
 Rio Arriba County, New Mexico

Well Name	API No.	Well Location UL-Sec-Twn-Rng	Project Area	Pool	Lease No.	Lease Type	Completion Date	Well Status
Escrito E26-2407 01H	30-039-31148	E-SWNW-26-24N-7W	N2 Sec 27 24N 7W (320 acres)	Escrito Gallup Associated Pool (22619) *	NM 014023 & SF 078562	USA	Pending	Approval to Drill

\*Pursuant to NMAC 19.15.15.13.C Encana will file to the NMOCD for administrative approval in order to reduce the setbacks for the project area for the Escrito E216-2407 01H well in the Escrito Gallup Associated Pool (Pool Code No. 22619).

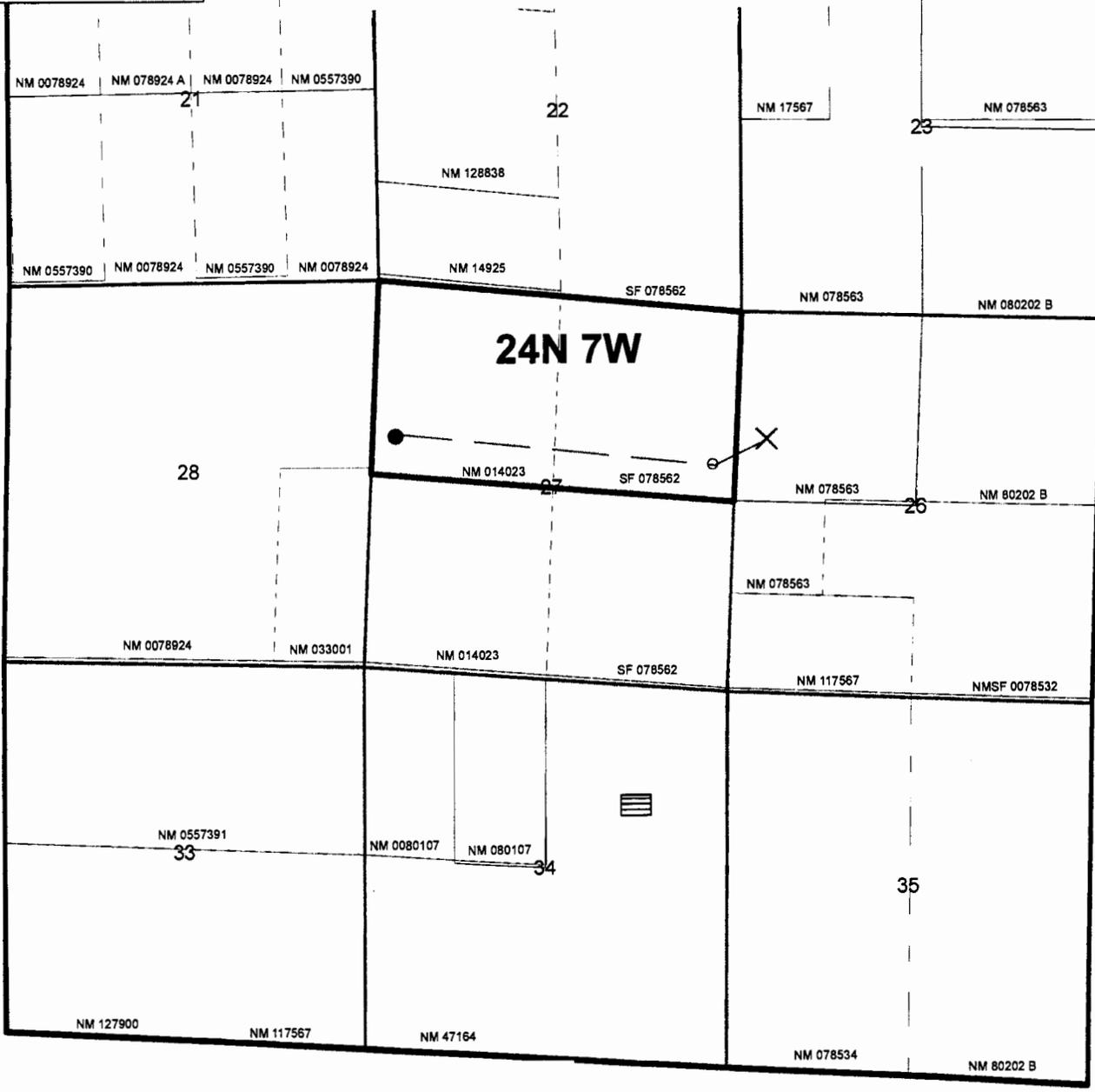
Attachment No. 2a  
Encana Oil & Gas (USA) Inc.  
Escrito E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico



**Well Name** Escrito E26-2407-01H  
**Township** T24N  
**Range** R7W  
**Section** Section 27  
**Spacing Unit** Spacing Unit N2 SEC 27 (320 acres)  
**SHL** SWNW SEC 26 T24N-R7W  
**BHL** SWNW SEC 27 T24N-R7W  
**County** Rio Arriba  
**State** New Mexico

Attachment No. 2b  
 Encana Oil & Gas (USA) Inc.  
 Escrito E26-2407 01H  
 Off-Lease Measurement Application  
 Well Pad Measurement: SWNW Sec 26 T24N R7W  
 Project Area: N2 Section 27 T24N R7W  
 Rio Arriba County, New Mexico

**Surface Ownership**  
 Federal  
 Indian



Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N  
R7W

Form C-102  
Revised August 1, 2011

Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico

Submit one copy to appropriate  
District Office

Santa Fe, NM 87605

AMENDED REPORT

**DISTRICT I**  
1885 N. French Dr., Hobbs, N.M. 88240  
Phone: (575) 898-6161 Fax: (575) 898-0780

**DISTRICT II**  
611 S. First St., Artesia, N.M. 88210  
Phone: (575) 748-1888 Fax: (575) 748-9788

**DISTRICT III**  
1000 E. Bruce Blvd., Artesia, N.M. 87410  
Phone: (505) 884-6178 Fax: (505) 884-6170

**DISTRICT IV**  
1880 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-5480 Fax: (505) 476-5488

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number		*Pool Code		*Pool Name ESCRITO-GALLUP	
*Property Code		*Property Name ESCRITO E26-2407			*Well Number 01H
*OGRD No. 282327		*Operator Name ENCANA OIL & GAS (USA) INC.			*Elevation 6766.9'

<sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	26	24N	7W		1766'	NORTH	431'	WEST	RIO ARRIBA

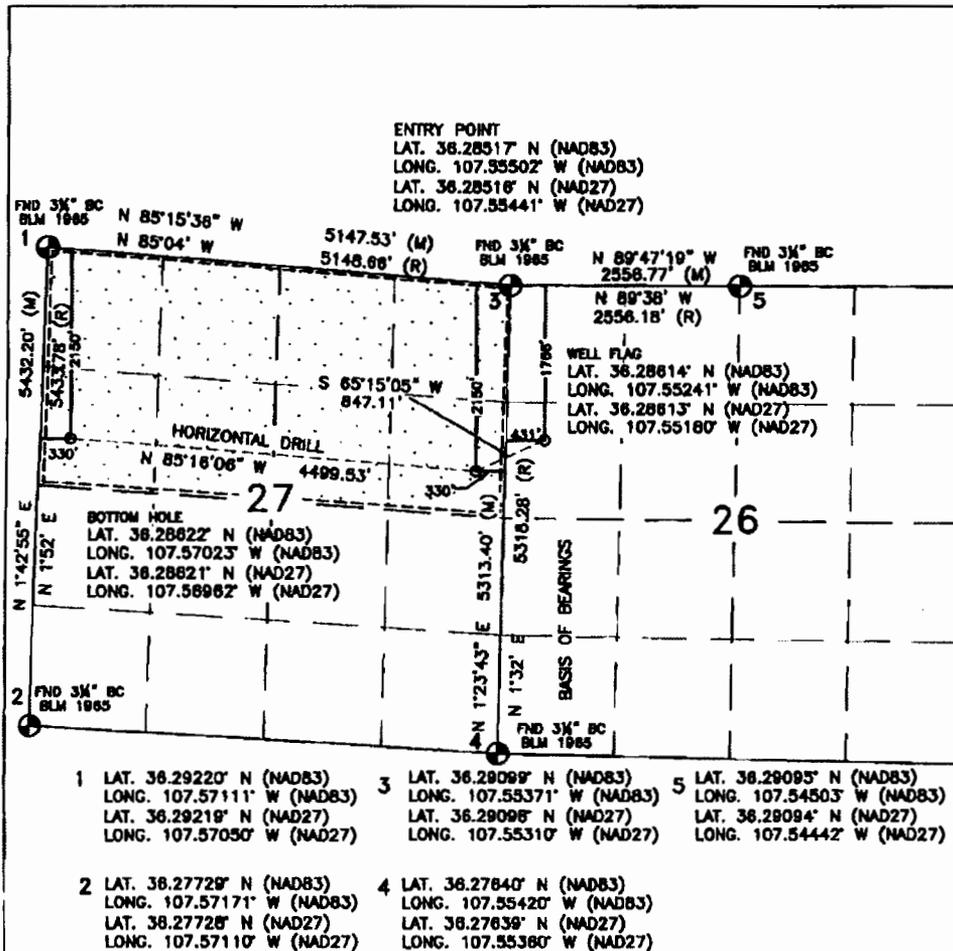
<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	27	24N	7W		2150'	NORTH	330'	WEST	RIO ARRIBA

<sup>12</sup> Dedicated Acres PROJECT AREA 320.00 ACRES N/2 SEC. 27	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

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<sup>17</sup> OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

*Holly Hill* 3/28/13  
Signature Date

Holly Hill  
Printed Name

holly.hill@encana.com  
E-mail Address

<sup>18</sup> SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

OCTOBER 31, 2012  
Date of Survey

Signature and Seal of Professional Surveyor:



Certificate Number 10201

Attachment No. 3  
Encana Oil Gas (USA) Inc.  
Escrto E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico

**Escrito E26-2407 01H**  
E-26-T24N-R7W  
Project Area: N2 Section 27, T24N R7W (320 acres)  
NM 014023 & SF 078562  
Escrito Gallup Associated Pool

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**Interest Owner**

<b><u>Working Interest</u></b>	<b><u>Gross</u></b>	<b><u>Net</u></b>
Encana Oil & Gas (USA) Inc. 370 17th Street, Suite 1700 Denver, CO 80202	100.000%	83.750%
<b><u>Royalty Interest</u></b>		
USA c/o BLM	0.000%	12.500%
<b><u>Overriding Royalty Interest</u></b>		
Maralex Resources, Inc. 7567 Moore Ct. Arvada, CO 80005	0.000%	0.281%
Dennis R. Reimers and Teresa M. Reimers, Joint Tenants 1594 Cactus Dr. Bayfield, CO 81122	0.000%	0.156%
Adelante Oil & Gas, LLC PO Box 2471 Durango, CO 81302	0.000%	0.813%
Adrus W. Tyrone Unknown Address	0.000%	0.500%
Texas National Petroleum Company PO Box 1269 Santa Fe, NM 87504	0.000%	1.381%
Oklahoma State University Foundation PO Box 1749 Stillwater, OK 74076	0.000%	0.125%
B.W. Woolley PO Box 3847 Bend, OR 97707	0.000%	0.125%
Chieftan Petroleum, Inc. 6913 Serrano Dr. Fort Worth, TX 76126	0.000%	0.125%
Richard A. Groenendyke 2545 E 30th St. Tulsa, OK 74114	0.000%	0.005%

Attachment No. 3  
Encana Oil Gas (USA) Inc.  
Escrto E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico

Mary Kathryn Dunnam Ladewig 405 Lakewood Dr. Roanoke, TX 76262	0.000%	0.008%
Kathryn Davant Dodson 16940 Bay St #303 Jupiter, FL 33477	0.000%	0.024%
Thomas E. Dunnam, III 14618 Reigh Count St San Antonio, TX 78248	0.000%	0.008%
Laura A. Gunn 10100 Asheboro St Frisco, TX 75035	0.000%	0.008%
Carolyn Davant Fricke 113 Bowie St Port Lavaca, TX 77979	0.000%	0.004%
Cornelia Davant Atwood PO Box 206 Blessing, TX 77419	0.000%	0.004%
William Louis Davant 298 County 443 Rd Blessing, TX 77419	0.000%	0.004%
Kathryn Davant Higgins 316 Avalon St. Port Lavaca, TX 77979	0.000%	0.004%
Eugenia Davant Wilson PO Box 1160 Sulphur, LA 70664	0.000%	0.004%
James E. Davant, D.V.M. PO Box 217 Blessing, TX 77419	0.000%	0.004%
ATKO Partners, Ltd. 260 Interstate 45 S Ste A Huntsville, TX 77340	0.000%	0.021%
William W. Bramlett and Julianne D. Bramlett 2 Hope Valley Pl Spring, TX 77382	0.000%	0.002%
Northstar Production & Land, LLC PO Box 2454 Midland, TX 79702	0.000%	0.002%
Valorie Hundley 1040 23rd St Okeechobee, FL 34974	0.000%	0.007%
Elizabeth L. Howe 17514 Hidden Forest Cir Spring, TX 77379	0.000%	0.007%

Attachment No. 3  
Encana Oil Gas (USA) Inc.  
Escrto E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico

Texas Gulf Bank, N.A., in its capacity as escrow agent for David Dewitt Jones 1717 N. Velasco Angleton, TX 77515	0.000%	0.007%
GKW Mineral Interests, LLC 1010 Lamar St Houston, TX 77002	0.000%	0.092%
Harry B. Botts 2601 Paces Rdg Atlanta, GA 30339	0.000%	0.031%
	<u>100.000%</u>	<u>100.000%</u>

Attachment No. 4  
Encana Oil & Gas (USA) Inc.  
Escrito E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico

As evidence that all interest ownership parties in the subject well have been given notice of Encana's application, attached please find:

- 1) The Leasehold Interest Owner's Address List for the Escrito E26-2407 01H Off-Lease Measurement and Sales of natural produced gas as well as Off-Lease Measurement, Sales and Transportation of produced crude oil and condensate.
- 2) An example copy of Encana's letter, dated July 9, 2013, used to send copies of the subject application to the leasehold interest owners for the Escrito E26-2407 01H. The letters were transmitted via certified mail/return receipt. Upon receiving receipts, a copy will be sent to NMOCD.
- 3) A copy of Encana's request to publish a Legal Ad in The Daily Times, Farmington, New Mexico in the March 24, 2013 publication, regarding the subject application due to uncertainty as to the contact information for Ardus W. Tyrone.
- 3) All royalty interest is BLM. Since the BLM is receiving this application requesting their approval, a separate notice letter was not sent to the royalty interest owners. The application to the NMOCD and BLM were transmitted via certified mail/return receipt. Upon receiving receipts, a copy will be sent to NMOCD.

- *Please note that Attachment No. 4 has 45 pages*

Attachment No. 4  
Encana Oil & Gas (USA) Inc.  
Escrito E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico

**Working Interest**

Encana Oil & Gas (USA) Inc.  
370 17th Street, Suite 1700  
Denver, CO 80202

**Royalty Interest**

Bureau of Land Management  
6251 College Blvd., Suite A  
Farmington, NM 87402

**Overriding Royalty Interest**

Maralex Resources, Inc.  
7567 Moore Ct.  
Arvada, CO 80005

Dennis R. Reimers and Teresa M.  
Reimers, Joint Tenants  
1594 Cactus Dr.  
Bayfield, CO 81122

Adelante Oil & Gas, LLC  
PO Box 2471  
Durango, CO 81302

Adrus W. Tyrone  
Unknown Address

Texas National Petroleum  
Company  
PO Box 1269  
Santa Fe, NM 87504

Oklahoma State University  
Foundation  
PO Box 1749  
Stillwater, OK 74076

B.W. Woolley  
PO Box 3847  
Bend, OR 97707

Chieftan Petroleum, Inc.  
6913 Serrano Dr.  
Fort Worth, TX 76126

Richard A. Groenendyke  
2545 E 30th St.  
Tulsa, OK 74114

Mary Kathryn Dunnam Ladewig  
405 Lakewood Dr.  
Roanoke, TX 76262

Kathryn Davant Dodson  
16940 Bay St #303  
Jupiter, FL 33477  
Thomas E. Dunnam, III  
14618 Reigh Count St  
San Antonio, TX 78248

Laura A. Gunn  
10100 Asheboro St  
Frisco, TX 75035

Carolyn Davant Fricke  
113 Bowie St  
Port Lavaca, TX 77979

Cornelia Davant Atwood  
PO Box 206  
Blessing, TX 77419

William Louis Davant  
298 County 443 Rd  
Blessing, TX 77419

Kathryn Davant Higgins  
316 Avalon St.  
Port Lavaca, TX 77979

Eugenia Davant Wilson  
PO Box 1160  
Sulphur, LA 70664

James E. Davant, D.V.M.  
PO Box 217  
Blessing, TX 77419

ATKO Partners, Ltd.  
260 Interstate 45 S Ste A

Huntsville, TX 77340

William W. Bramlett and Julianne D.  
Bramlett  
2 Hope Valley Pl  
Spring, TX 77382

Northstar Production & Land, LLC  
PO Box 2454  
Midland, TX 79702

Valorie Hundley  
1040 23rd St  
Okeechobee, FL 34974

Elizabeth L. Howe  
17514 Hidden Forest Cir  
Spring, TX 77379

Texas Gulf Bank, N.A., in its  
capacity as escrow agent  
for David Dewitt Jones  
1717 N. Velasco  
Angleton, TX 77515

GKW Mineral Interests, LLC  
1010 Lamar St  
Houston, TX 77002

Harry B. Botts  
2601 Paces Rdg  
Atlanta, GA 30339

**encana**

July 9, 2013

Example Cover Letter Addressed and  
Certified Mailed to Interest Owners Listed  
on Attached

**Re: Off-Lease Measurement and Off-Leases Sales  
Escrito E26-2407 01H  
N2 Section 27, T24N R7W  
Rio Arriba County, NM**

Dear Owner:

Encana Oil & Gas (USA) Inc.'s (Encana) is seeking administrative approval from the New Mexico Oil Conservation Division (NMOCD) for an Application for Off-Lease Transportation, Measurement, and Sale of produced natural gas, crude oil and condensate from the Well. Encana will operate, producing from the N2 of Section 27, T24N R07W; New Mexico Federal Leases NM 014023 and SF 078562.

Off-Lease Measurement of natural gas will occur at the well head in the SWNW of Section 26, T24N R7W by a well allocation meter, and in the SWSE of Section 23, T24N R7W at the pipeline tie-in to Enterprise Products Partners' central delivery point, gas custody transfer meter. The Well will be equipped with gas measurement equipment for allocation purposes.

Off-Lease Measurement of produced oil and condensate will occur at the surface location for the Well where Encana plans to install five (5) 400-barrel oil tanks. A gathering company will purchase and transport the product to refining. A strapping table measurement for each oil tank will determine the volume in each tank with run tickets to be filled out at the surface location for each load. Tank seal information will also be recorded to accompany transport.

This matter does not require any action on your part. Current NMOCD Regulations require that all affected interest owners receive notice of proposed Off-Lease Measurement. Should you have any questions, concerns or need additional information please contact me at your earliest convenience at 720-876-5965 and/or [billy.mccool@encana.com](mailto:billy.mccool@encana.com).

Should you have any objections to our application, please contact the undersigned; you should also contact the NMOCD directly with your objections within twenty (20) days from the date the NMOCD receives our application. The mailing address for the NMOCD is 1220 St. Francis Drive, Santa Fe, New Mexico 87505. We would appreciate a copy of your objection.

Yours Truly,  
Encana Oil & Gas (USA) Inc.

  
*for* B. Wade McCool  
Land Negotiator  
720.876.5965 (O)  
email: [billy.mccool@encana.com](mailto:billy.mccool@encana.com)

Encana Oil & Gas (USA) Inc.

370 17<sup>th</sup> Street, Suite 1700, Denver Colorado 80202



**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:

Maralex Resources, Inc.  
 7567 Moore Ct.  
 Arvada, CO 80005

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 5701

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**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:

**Ms. Jami Bailey**  
**New Mexico Oil Conservation**  
**Division**  
**1220 South St. Francis Drive**  
**Santa Fe, NM 87505**

2. Article Number  
*(Transfer from service label)*

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
**X**

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

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

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

4. Restricted Delivery? (*Extra Fee*)  Yes

7013 0600 0001 7378 1130

Domestic Return Receipt

102595-02-M-1540

**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:

**Bureau of Land Management**  
**6251 College Blvd., Suite A**  
**Farmington, NM 87402**

2. Article Number  
*(Transfer from service label)*

PS Form 3811, February 2004

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
**X**

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

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

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

4. Restricted Delivery? (*Extra Fee*)  Yes

7011 3500 0000 3594 4905

Domestic Return Receipt

102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span> <b>X</b>	
	B. Received by ( <i>Printed Name</i> )	C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
Dennis R. Reimers and Teresa M. Reimers, Joint Tenants 1594 Cactus Dr. Bayfield, CO 81122	3. Service Type	
	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? ( <i>Extra Fee</i> ) <input type="checkbox"/> Yes	
2. Article Number ( <i>Transfer from service label</i> )	7011 3500 0000 3594 4912	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span> <b>X</b>	
	B. Received by ( <i>Printed Name</i> )	C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
Adelante Oil & Gas, LLC PO Box 2471 Durango, CO 81302	3. Service Type	
	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? ( <i>Extra Fee</i> ) <input type="checkbox"/> Yes	
2. Article Number ( <i>Transfer from service label</i> )	7011 3500 0000 3594 4929	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <span style="float: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</span> <b>X</b>	
	B. Received by ( <i>Printed Name</i> )	C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
Texas National Petroleum Company PO Box 1269 Santa Fe, NM 87504	3. Service Type	
	<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? ( <i>Extra Fee</i> ) <input type="checkbox"/> Yes	
2. Article Number ( <i>Transfer from service label</i> )	7011 3500 0000 3594 4936	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
Oklahoma State University Foundation PO Box 1749 Stillwater, OK 74076	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	7011 3500 0000 3594 4943	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
B.W. Woolley PO Box 3847 Bend, OR 97707	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	7011 3500 0000 3594 4950	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature <input checked="" type="checkbox"/> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
Chieftan Petroleum, Inc. 6913 Serrano Dr. Fort Worth, TX 76126	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	7011 3500 0000 3594 4974	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

**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:

Mary Kathryn Dunnam Ladewig  
 405 Lakewood Dr.  
 Roanoke, TX 76262

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
**X**

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

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

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

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number

(Transfer from service label)

7011 3500 0000 3594 4981

**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:

Kathryn Davant Dodson  
 16940 Bay St #303  
 Jupiter, FL 33477

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
**X**

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

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

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

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number

(Transfer from service label)

7011 3500 0000 3594 4998

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**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:

Thomas E. Dunnam, III  
 14618 Reigh Count St  
 San Antonio, TX 78248

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee  
**X**

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

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

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

4. Restricted Delivery? (Extra Fee)  Yes

2. Article Number

(Transfer from service label)

7011 3500 0000 3594 5001

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**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:  
**Laura A. Gunn**  
**10100 Asheboro St**  
**Frisco, TX 75035**

2. Article Number  
*(Transfer from service label)*      **7013 0600 0001 7378 1147**

PS Form 3811, February 2004      Domestic Return Receipt      102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
**X**       Agent  
 Addressee

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

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

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

4. Restricted Delivery? (*Extra Fee*)       Yes

**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:  
**Carolyn Davant Fricke**  
**113 Bowie St**  
**Port Lavaca, TX 77979**

2. Article Number  
*(Transfer from service label)*      **7013 0600 0001 7378 1154**

PS Form 3811, February 2004      Domestic Return Receipt      102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
**X**       Agent  
 Addressee

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

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

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

4. Restricted Delivery? (*Extra Fee*)       Yes

**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:  
**Cornelia Davant Atwood**  
**PO Box 206**  
**Blessing, TX 77419**

2. Article Number  
*(Transfer from service label)*      **7013 0600 0001 7378 1161**

PS Form 3811, February 2004      Domestic Return Receipt      102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
**X**       Agent  
 Addressee

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

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

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

4. Restricted Delivery? (*Extra Fee*)       Yes

**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:

William Louis Davant  
298 County 443 Rd  
Blessing, TX 77419

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1178

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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**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:

Kathryn Davant Higgins  
316 Avalon St.  
Port Lavaca, TX 77979

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1185

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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**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:

Eugenia Davant Wilson  
PO Box 1160  
Sulphur, LA 70664

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1192

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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

**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:

James E. Davant, D.V.M.  
PO Box 217  
Blessing, TX 77419

2. Article Number

*(Transfer from service label)*

7013 0600 0001 7378 1208

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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**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:

ATKO Partners, Ltd.  
260 Interstate 45 S Ste A  
Huntsville, TX 77340

2. Article Number

*(Transfer from service label)*

7013 0600 0001 7378 1215

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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**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:

Northstar Production & Land, LLC  
PO Box 2454  
Midland, TX 79702

2. Article Number

*(Transfer from service label)*

7013 0600 0001 7378 1222

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent AddresseeB. Received by (*Printed Name*)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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

**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:

Valorie Hundley  
1040 23rd St  
Okeechobee, FL 34974

2. Article Number  
(Transfer from service label)

7013 0600 0001 7378 1239

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M 1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)  Yes

**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:

Elizabeth L. Howe  
17514 Hidden Forest Cir  
Spring, TX 77379

2. Article Number  
(Transfer from service label)

7013 0600 0001 7378 1246

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)  Yes

**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:

Texas Gulf Bank, N.A., in its  
capacity as escrow agent  
for David Dewitt Jones  
1717 N. Velasco  
Angleton, TX 77515

2. Article Number  
(Transfer from service label)

7013 0600 0001 7378 1253

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent  
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)  Yes

**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:

GKW Mineral Interests, LLC  
 1010 Lamar St  
 Houston, TX 77002

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1260

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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**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:

Harry B. Botts  
 2601 Paces Rdg  
 Atlanta, GA 30339

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1277

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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



July 11, 2013

Transmitted Via Email: [legals@daily-times.com](mailto:legals@daily-times.com)

Ms. Carletta Dodge, Legal Clerk  
The Daily Times  
201 N. Allen  
Farmington, New Mexico 87401

**Re: Legal Ad Placement Request**  
**Sunday, July 14<sup>th</sup> 2013 Publication**  
Escrito E26-2407 01H Off-Lease Measurement Application  
Section 26, Township 24 North – Range 7 West  
Rio Arriba County, New Mexico

Dear Ms. Dodge:

Encana Oil & Gas (USA) Inc. (Encana) respectfully requests The Daily Times place the following notice in the Legal Ads section for the July 14<sup>th</sup>, 2013 publication. Once the ad has run, please send Affidavit of Publication to the undersigned.

*Encana oil & Gas (USA) Inc. (Encana) is seeking administrative approval from the New Mexico Oil Conservation Division (NMOCD) for an application for Off-Lease Measurement and sale of naturally produced gas as well as Off-Lease Transportation and Sale of oil and condensate for the Encana operated Escrito E26-2407 01H well located in the SWNW of Section 26, T24N R7W, Rio Arriba County, New Mexico. Said well will develop the minerals in the N2 of Section 27, T24N R7W, covering Federal Leases NM 014023 and SF 78562. There will not be any commingling of oil or condensate with natural gas in the pipeline. The central delivery point, gas custody transfer meter (CDP) will be located in the SWSE of Section 23, T24N R7W and will deliver gas to Enterprise Products Partners (Enterprise) pipeline. The Escrito E26-2409 01H will be completed in the Escrito Gallup (Associated) Pool (Order No. 22619) with a 320 acre project area comprising of the N2 of Section 27, T24N R7W. Off-Lease Measurement, Transportation and Sale of produced oil and condensate will also occur at the Escrtio E26-2407 01H well pad where Encana will install the necessary number of 400-barrel oil storage tanks and water tanks. A gathering company will purchase and transport the product to refining. A strapping table measurement for each oil tank will determine the volume in each tank with run tickets to be filled out at the surface location for each load. Tank seal information will also be recorded to accompany transport.*

*Any person holding an interest in Federal Leases NM 014023 and SF 78562 may contact Encana for additional information (Attn: Billy Wade McCool, 720-876-5965; 370 17<sup>th</sup> Street, Suite 1700, Denver CO 80202; [billy.mccool@encana.com](mailto:billy.mccool@encana.com)). Any objection or request for a formal hearing should be filed in writing with the NMOCD's Santa Fe Office (1220 South St. Francis Drive, Santa Fe, NM 87505) within 20 days from the date of this publication. In the absence of objections, Encana is requesting that the NMOCD approve the application administratively.*

Encana Oil & Gas (USA) Inc.

Holly Hill  
Regulatory Analyst

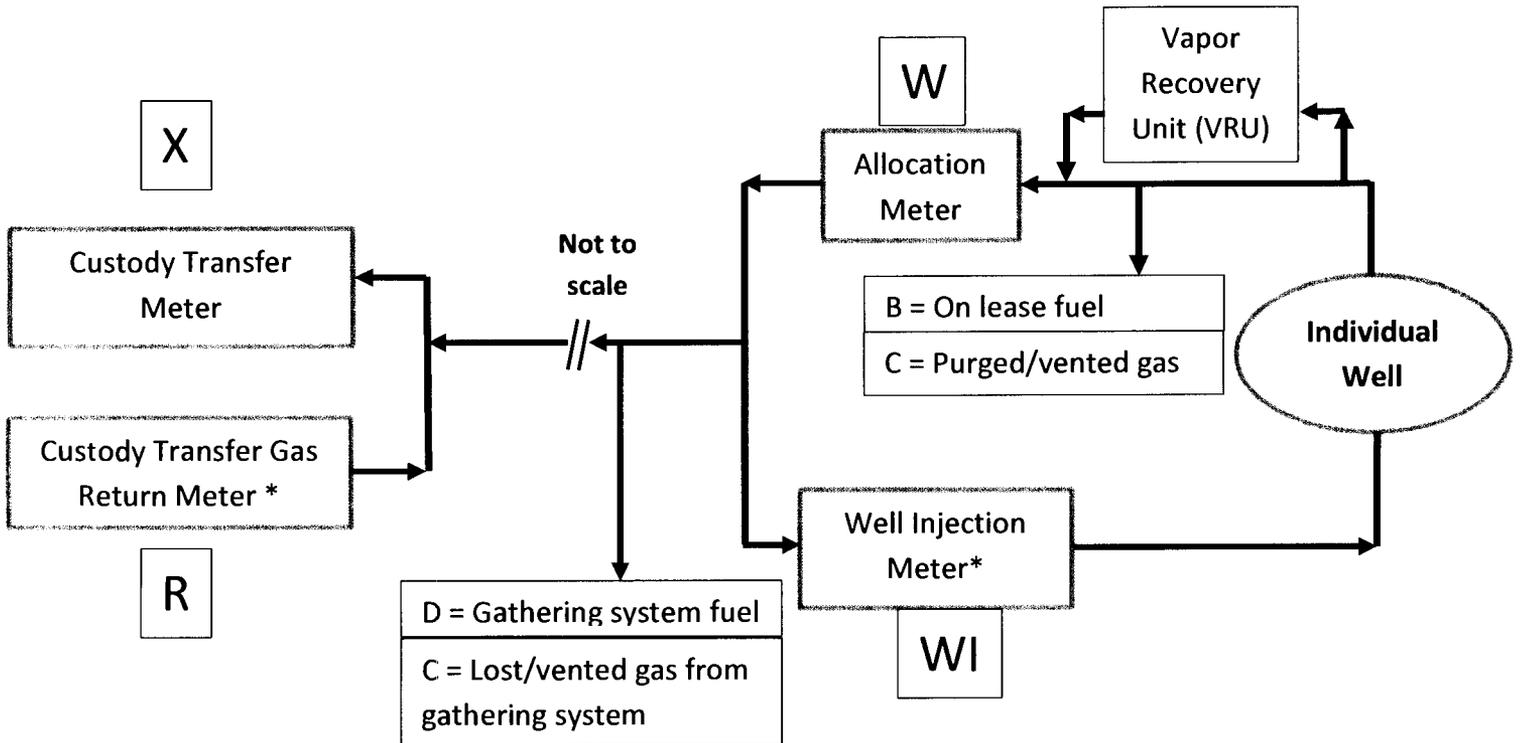
Encana Oil & Gas (USA) Inc.

370 17<sup>th</sup> Street, Suite 1700, Denver Colorado 80202 720.876.5331 (O) 303.521.2835 (C) [holly.hill@encana.com](mailto:holly.hill@encana.com)

Attachment No. 5a  
 Encana Oil & Gas (USA) Inc.  
 Escrito E26-2407 01H  
 Off-Lease Measurement Application  
 Well Pad Measurement: SWNW Sec 26 T24N R7W  
 Project Area: N2 Section 27 T24N R7W  
 Rio Arriba County, New Mexico

**Allocation Procedures**

**Escrito E26-2407 01H**



\*Meter will only be installed and active when gas lift is installed.

**Base Data:**

X = Gas Volume (MCF) from Custody Transfer Meter during allocation period. (Enterprise)

R = Gas Volume (MCF) from Custody Transfer Gas Return Meter (Enterprise)\*

W = Gas Volume (MCF) from allocation meters at individual wells during allocation period. (Encana)

WI = Gas Volume (MCF) from well injection meter at individual wells during allocation period. (Encana)\*

Y = Heating Value (BTU/scf) from Custody Transfer Meter and Custody Transfer Gas Return Meter during allocation period. (Enterprise)

Z = Heating Value (BTU/scf) from individual well allocation meter and well injection meter. (Encana)

Attachment No. 5a  
Encana Oil & Gas (USA) Inc.  
Escrito E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico

Allocation Period is typically a calendar month and will be the same for all wells.

**Individual Well Gas Production** = A + B + C + D + E

A = Allocated Gas production off lease, MCF:  $((W-WI) / \text{SUM}(W-WI)) * (X-R)$

B = On lease fuel usage, MCF. Determined from equipment specification and operating conditions. This includes, but is not limited to, compression, vapor recovery unit (VRU) compression, burners, and pump jacks.

C = Lost and/or vented gas from well and/or lease equipment, MCF. Calculated using equipment and piping specifications and operating pressures.

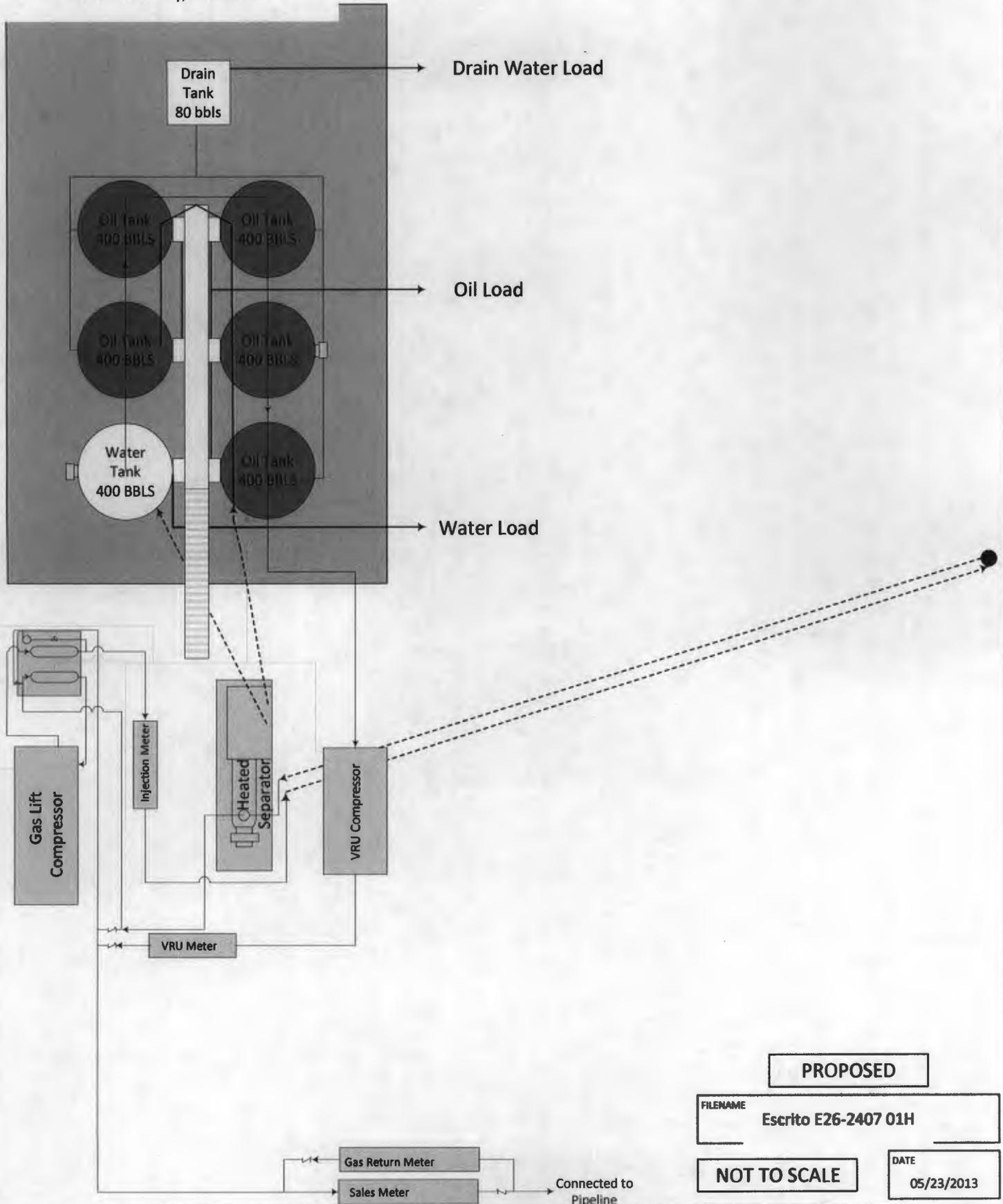
D = Allocated fuel from gathering system equipment, MCF. The total fuel required to operate gathering system equipment will be allocated to the individual wells benefiting from the equipment using allocation factors determined by  $(W-WI) / \text{SUM}(W-WI)$ .

E = Allocated volume of gas lost and/or vented from the gathering system, gathering system equipment, condensate collection, and water collection in MCF. The total volume will be determined using industry accepted procedures the time of the loss. The total volumes lost and/or vented will be allocated to the individual wells affected using factors determined by  $(W-WI) / \text{SUM}(W-WI)$ .

**Individual Well BTU's** =  $((W-WI) * Z) / \text{SUM}((W-WI) * Z) * Y$

Individual well gas heating values to be determined in accordance with BLM regulations.

Attachment No. 5b  
Encana Oil & Gas (USA) Inc.  
Escrito E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico



PROPOSED

FILENAME  
Escrito E26-2407 01H

NOT TO SCALE

DATE  
05/23/2013

Attachment No. 5b  
Encana Oil & Gas (USA) Inc.  
Escrito E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico

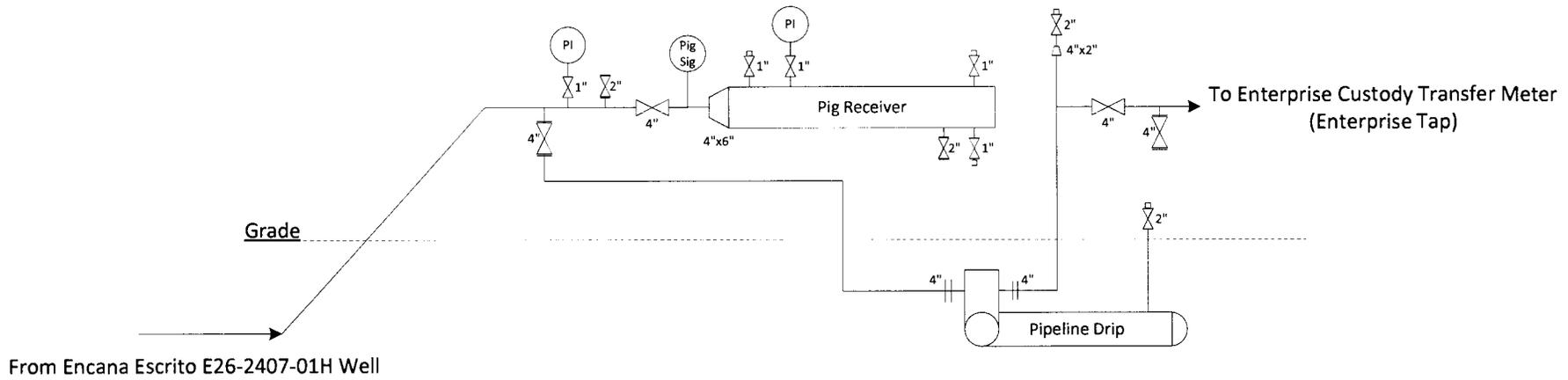
**Gas Metering on Escrito E26-2407 01H with Gas Lift**

The Escrito E26-2407 01H will have two additional gas meters installed for use with the gas lift system. The typical sales gas meter continues to be used for the same functionality as if the well did not have gas lift. The additional meters are a buy back meter and an injection (for information purposes only) meter.

The gas return meter is used to meter any gas that is brought back from the Enterprise Pipeline for kickoff and re-start purposes only. This meter will be installed parallel to the sales meter with check valves preventing back flow through either meter. The buy back volume is expected to be minimal on a monthly basis. Once the well is producing excess gas from what is being circulated, the gas is sold and no buy back gas is used. The only difference from a typical well setup is that at the end of the month, the sales meter and buy back meter are combined to determine the net sales volume.

The second additional meter on the pad is the injection meter which is used for metering the injection gas that is circulated through the wellbore. This meter is for informational / operational optimization purposes only. Since this meter is upstream of the sales meter, this meter is not used to calculate sales volumes.

Attachment No. 5c  
Encana Oil & Gas (USA) Inc.  
Escrito E26-2407 01H  
Off-Lease Measurement Application  
Well Pad Measurement: SWNW Sec 26 T24N R7W  
Project Area: N2 Section 27 T24N R7W  
Rio Arriba County, New Mexico



**PRELIMINARY**

FILENAME  
ENTERPRISE - ENCANA ESCRITO E26-2407-01H  
INTERCONNECT SCHEMATIC.VSD

**NOT TO SCALE**

DATE  
07/1/13

encana

RECEIVED OCD

August 13, 2013

2013 AUG 14 P 3: 57

Transmitted Via Regular Post

Ms. Jami Bailey  
New Mexico Oil Conservation Division  
1220 South St. Francis Drive  
Santa Fe, NM 87505

Mr. Dave Evans, District Manager  
Bureau of Land Management  
6251 College Blvd., Suite A  
Farmington, NM 87402

**Re: Application for Off-Lease Measurement  
Escrito E26-2407 01H**  
Section 26, Township 24 North – Range 7 West  
Rio Arriba County, New Mexico

Dear Ms. Bailey and Mr. Evans:

On July 12<sup>th</sup>, 2013 Encana Oil & Gas (USA) Inc. (Encana) submitted a request for Administrative Approval for Off-Lease Measurement and Sale of natural produced gas as well as Off-Lease Measurement, Sale and Transportation of produced crude oil and condensate from the Escrito E26-2407 01H well. As you may recall, Attachment No. 4 of said application presented copies of the notice sent to the interest owners via certified, return receipt mail, which was also sent to the various interest owners on July 12, 2013 as well. Encana promised to provide copies of the return receipts upon receipt. Please find the certified, return receipts from the interest owners whose receipts have been sent to Encana thus far. Encana will provide copies of any additional certified, return receipts upon receipt.

Additionally, Encana placed a legal advertisement in The Daily Times in Farmington to adequately notify any affected parties of said application. The legal ad was published on Sunday, July 14<sup>th</sup>, 2013. Enclosed please find the affidavit of publishing for your records.

Please do not hesitate to contact me directly at 720-876-5331 with any questions or concerns.

Encana Oil & Gas (USA) Inc.



Holly Hill  
Regulatory Analyst

Enc.

OLM-79  
PAXK1319838109

Encana Oil & Gas (USA) Inc.

370 17<sup>th</sup> Street, Suite 1700, Denver Colorado 80202 720.876.5331 (O) 303.521-2835 (C) [holly.hill@encana.com](mailto:holly.hill@encana.com)

**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:

Bureau of Land Management  
6251 College Blvd., Suite A  
Farmington, NM 87402

2. Article Number  
(Transfer from service label)

7011 3500 0000 3594 4905

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**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  
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

**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:

Ms. Jami Bailey  
New Mexico Oil Conservation  
Division  
1220 South St. Francis Drive  
Santa Fe, NM 87505

2. Article Number  
(Transfer from service label)

7013 0600 0001 7378 1130

PS Form 3811, February 2004

Domestic Return Receipt

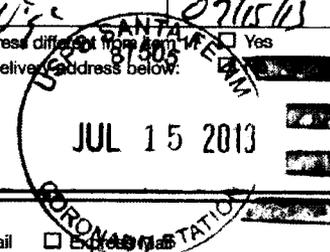
102595-02-M-1540

**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  
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

**SENDER: COMPLETE THIS SECTION**

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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:

Adelante Oil & Gas, LLC  
PO Box 2471  
Durango, CO 81302

2. Article Number  
(Transfer from service label)

7011 3500 0000 3594 4929

PS Form 3811, February 2004

Domestic Return Receipt

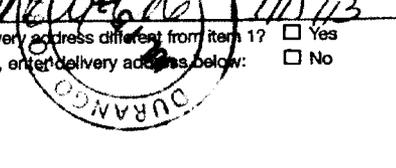
102595-02-M-1540

**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  
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

## 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:

ATKO Partners, Ltd.  
260 Interstate 45 S Ste A  
Huntsville, TX 77340

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1215

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Bunbaugh* Agent Addressee

B. Received by (Printed Name)

*Bunbaugh*

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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

## 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:

William W Bramlett & Julianne D  
Bramlett  
2 Hope Valley PL  
Spring, TX 77382

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1291

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*William W Bramlett* Agent Addressee

B. Received by (Printed Name)

*William W Bramlett*

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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

## 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:

Cornelia Davant Atwood  
PO Box 206  
Blessing, TX 77419

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1161

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

*Sandra Davant* Agent Addressee

B. Received by (Printed Name)

*Sandra Davant*

C. Date of Delivery

D. Is delivery address different from item 1?  YesIf 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

**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:

James E. Davant, D.V.M.  
PO Box 217  
Blessing, TX 77419

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1208

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154C

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*  Agent  Addressee

B. Received by (Printed Name)

Sandra Davant  Return Receipt for Merchandise

C. Date of Delivery

7/15/13

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

**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:

William Louis Davant  
298 County 443 Rd  
Blessing, TX 77419

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1178

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154C

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*  Agent  Addressee

B. Received by (Printed Name)

William L. Davant  Return Receipt for Merchandise

C. Date of Delivery

7/15/13

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

**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:

Kathryn Davant Dodson  
16940 Bay St #303  
Jupiter, FL 33477

2. Article Number

(Transfer from service label)

7011 3500 0000 3594 4998

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154C

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*  Agent  Addressee

B. Received by (Printed Name)

Return Receipt for Merchandise

C. Date of Delivery

7/22/13

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

**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:

Texas Gulf Bank, N.A., in its capacity as escrow agent for David Dewitt Jones  
1717 N. Velasco  
Angleton, TX 77515

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1253

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

*DEL ORTEGA*

C. Date of Delivery

*7/15/13*

D. Is delivery address different from item 1?  Yes

If YES, enter delivery address below:  No *2*

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

- Yes

**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:

Eugenia Davant Wilson  
PO Box 1160  
Sulphur, LA 70664

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1192

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

*Eugenia Davant Wilson*

C. Date of Delivery

*7-22-13*

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

**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:

B.W. Woolley  
PO Box 3847  
Bend, OR 97707

2. Article Number

(Transfer from service label)

7011 3500 0000 3594 4950

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

*M-J WOOLLEY*

C. Date of Delivery

*7-17-13*

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

**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:

Northstar Production & Land, LLC  
PO Box 2454  
Midland, TX 79702

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1222

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature   Agent  Addressee

B. Received by (Printed Name) Russell B. Bond C. Date of Delivery 7-29-13

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

**SENDER: COMPLETE THIS SECTION**

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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:

Dennis R. Reimers and Teresa M. Reimers, Joint Tenants  
1594 Cactus Dr.  
Bayfield, CO 81122

2. Article Number

(Transfer from service label)

7011 3500 0000 3594 4912

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature X Jean Reimers  Agent  Addressee

B. Received by (Printed Name) TERESA REIMERS C. Date of Delivery 7/13/12

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

**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:

Texas National Petroleum Company  
PO Box 1269  
Santa Fe, NM 87504

2. Article Number

(Transfer from service label)

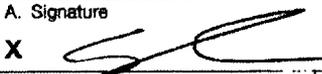
7011 3500 0000 3594 4936

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature X   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

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

4. Restricted Delivery? (Extra Fee)  Yes

## 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:

Elizabeth L. Howe  
17514 Hidden Forest Cir  
Spring, TX 77379

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 1246

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Elizabeth Howe*  Agent  
 Addressee

B. Received by (Printed Name)

Elizabeth Howe *1-13*

C. Date of Delivery

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

## 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:

Maralex Resources, Inc.  
7567 Moore Ct.  
Arvada, CO 80005

2. Article Number

(Transfer from service label)

7013 0600 0001 7378 5701

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Diane Vidal*  Agent  
 Addressee

B. Received by (Printed Name)

DIANE VIDAL *7/3/13*

C. Date of Delivery

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

## 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:

Oklahoma State University  
Foundation  
PO Box 1749  
Stillwater, OK 74076

2. Article Number

(Transfer from service label)

7011 00 0000 3594 4943

PS Form 3811, Feb

14

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

*Skien*  Agent  
 Addressee

B. Received by (Printed Name)

Skien *7-16-13*

C. Date of Delivery

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

## 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:

Thomas E. Dunnam, III  
14618 Reigh Count St  
San Antonio, TX 78248

2. Article Number  
(Transfer from service label)

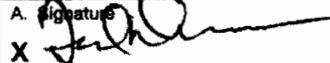
7011 3500 0000 3594 5001

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X   Agent  
 AddresseeB. Received by (Printed Name)  
TED DUNNAM  
C. Date of Delivery  
07/17/13D. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.4. Restricted Delivery? (Extra Fee)  Yes

## 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:

Richard A Groenedyne  
2545 E 30<sup>th</sup> Street  
Tulsa OK 74114

2. Article Number  
(Transfer from service label)

7013 0600 0001 7378 1284

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X   Agent  
 AddresseeB. Received by (Printed Name)  
Anne Buns  
C. Date of DeliveryD. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.4. Restricted Delivery? (Extra Fee)  Yes

## 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:

Laura A. Gunn  
10100 Asheboro St  
Frisco, TX 75035

2. Article Number  
(Transfer from service label)

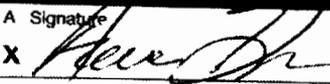
7013 0600 0001 7378 1147

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature  
X   Agen.  
 AddresseeB. Received by (Printed Name)  
Laura Gunn  
C. Date of DeliveryD. Is delivery address different from item 1?  Yes  
If YES, enter delivery address below:  No3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.4. Restricted Delivery? (Extra Fee)  Yes

Post-It <sup>®</sup> Fax Note	7671	Date	7-12	# of pages	2
To	Holly Hill	From	Carletta D		
Co./Dept.		Co.	Legal Notice		
Phone #		Phone #	505-564-4566		
Fax #	720-876-6331	Fax #			

Encana oil & Gas (USA) Inc. (Encana) is seeking administrative approval from the New Mexico Oil Conservation Division (NMOCD) for an application for Off-Lease Measurement and sale of naturally produced gas as well as Off-Lease Transportation and Sale of oil and condensate for the Encana operated Escrito E26-2407 OIH well located in the SWNW of Section 26, T24N R7W, Rio Arriba County, New Mexico. Said well will develop the minerals in the N2 of Section 27, T24N R7W, covering Federal Leases NM 014023 and SF 78562. There will not be any commingling of oil or condensate with natural gas in the pipeline. The central delivery point, gas custody transfer meter (CDP) will be located in the SWSE of Section 23, T24N R7W and will deliver gas to Enterprise Products Partners (Enterprise) pipeline. The Escrito E26-2409 OIH will be completed in the Escrito Gallup (Associated) Pool (Order No. 22619) with a 320 acre project area comprising of the N2 of Section 27, T24N R7W. Off-Lease Measurement, Transportation and Sale of produced oil and condensate will also occur at the Escrito E26-2407 OIH well pad where Encana will install the necessary number of 400-barrel oil storage tanks and water tanks. A gathering company will purchase and transport the product to refining. A strapping table measurement for each oil tank will determine the volume in each tank with run tickets to be filled out at the surface location for each load. Tank seal information will also be recorded to accompany transport.

Any person holding an interest in Federal Leases NM 014023 and SF 78562 may contact Encana for additional information (Attn: Billy Wade McCool, 720-876-5965; 370 17th Street, Suite 1700, Denver CO 80202; billy.mccoal@encana.com). Any objection or request for a formal hearing should be filed in writing with the NMOCD's Santa Fe Office (1220 South St. Francis Drive, Santa Fe, NM 87505) within 20 days from the date of this publication. In the absence of objections, Encana is requesting that the NMOCD approve the application administratively.

Legal No. 69267 published in The Daily Times on July 14, 2013.