

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

APPLICATION OF NADEL AND GUSSMAN HEYCO,
L.L.C. FOR APPROVAL OF A NON-STANDARD OIL
SPACING AND PRORATION UNIT AND COMPULSORY
POOLING, EDDY COUNTY, NEW MEXICO.

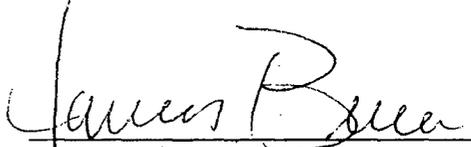
Case No. 14,891

AFFIDAVIT OF NOTICE

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

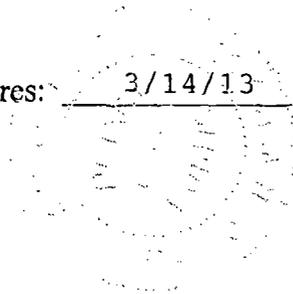
James Bruce, being duly sworn upon his oath, deposes and states:

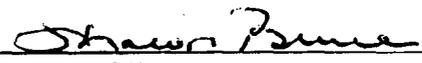
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Nadel and Gussman Heyco, L.L.C..
3. Nadel and Gussman Heyco, L.L.C. has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or working interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the offsets by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit 1.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.


James Bruce

SUBSCRIBED AND SWORN TO before me this 16th day of October, 2012 by James Bruce.

My Commission Expires: 3/14/13




Notary Public

Oil Conservation Division
Case No. 8
Exhibit No. 8

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruc@aol.com

August 16, 2012

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application a for non-standard unit, *etc.*, filed with the New Mexico Oil Conservation Division by Nadel and Gussman Heyco, L.L.C., regarding a well in the S $\frac{1}{2}$ N $\frac{1}{2}$ of Section 20, Township 18 South, Range 26 East, N.M.P.M., Eddy County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, September 6, 2012, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **The Division requires applicant to notify offset operators or working interest owners of the non-standard unit portion of the application, and you offset the well unit.** As an offset operator or lessee, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify (in writing) the Division, and the undersigned, by Thursday, August 30, 2012 if you intend to participate in the hearing.

Very truly yours,


James Bruce

Attorney for Nadel and Gussman Permian, L.L.C.

EXHIBIT 1

EXHIBIT A

Great Western Drilling Company
P.O. Box 1659
Midland, Texas 79702

Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

BWB Partners I
P.O. Box 51407
Midland, Texas 79710

Robert B. Porter, Jr.
P.O. Box 10392
Midland, Texas 79702

Fasken Land and Minerals, Ltd.
Suite 1800
303 West Wall
Midland, Texas 79701

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:

Great Western Drilling Company
P.O. Box 1659
Midland, Texas 79702

2. Article Number
(Transfer from service label)

7010 3090 0000 2337 4959

PS Form 3811, February 2004

Domestic Return Receipt

N6M

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *D. Bell* Agent Addressee

B. Received by (Printed Name) *D. Bell* C. Date of Delivery *8/20/12*

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

**U.S. Postal ServiceTM
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OFFICIAL USE

7010 3090 0000 2337 6502

Postage \$
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees

Postmark Here

Sent To Fasken Land and Minerals, Ltd.
 Suite 1800
 303 West Wall
 Midland, Texas 79701
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7010 3090 0000 2337 4959

**U.S. Postal ServiceTM
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OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Postmark Here

Sent To Great Western Drilling Company
 P.O. Box 1659
 Midland, Texas 79702
 Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

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:

Fasken Land and Minerals, Ltd.
 Suite 1800
 303 West Wall
 Midland, Texas 79701

2. Article Number
(Transfer from service label)

7010 3090 0000 2337 6502

PS Form 3811, February 2004

Domestic Return Receipt

N6M

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *C. Hales* Agent Addressee

B. Received by (Printed Name) *C. Hales* C. Date of Delivery *8-20-12*

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:

Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

2. Article Number: **7010 3090 0000 2337 4966**
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): *ROSEMARY GRIFFITH* C. Date of Delivery: *7/20/12*

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

Domestic Return Receipt *NRH* 102595-02-M-1540

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To: Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

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

PS Form 3800, August 2006 See Reverse for Instructions

7010 3090 0000 2337 4966 DTDL

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Sent To: Read & Stevens, Inc.
P.O. Box 1518
Roswell, New Mexico 88202

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

PS Form 3800, August 2006 See Reverse for Instructions

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:

Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

2. Article Number: **7010 3090 0000 2337 4973**
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *[Signature]* Agent Addressee

B. Received by (Printed Name): *Chinderwall* C. Date of Delivery: *8-17-12*

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

Domestic Return Receipt *NRH* 102595-02-M-1540

7010 3090 0000 2337 4966

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:

BWB Partners I
P.O. Box 51407
Midland, Texas 79710

2. Article Number

7010 3090 0000 2337 4980

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *Andrew Schreiner* C. Date of Delivery *9/20/2012*

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

Domestic Return Receipt *NGFI* 102595-02-M-1540

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

Sent To Robert B. Porter, Jr.
 Street, Apt. No., or PO Box No. P.O. Box 10392
 City, State, ZIP+4 Midland, Texas 79702

PS Form 3800, August 2006 See Reverse for Instructions

7010 3090 0000 2337 4997

7010 3090 0000 2337 4980

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

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

OFFICIAL USE

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$

Postmark Here

Sent To BWB Partners I
 Street, Apt. No., or PO Box No. P.O. Box 51407
 City, State, ZIP+4 Midland, Texas 79710

PS Form 3800, August 2006 See Reverse for Instructions

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:

Robert B. Porter, Jr.
P.O. Box 10392
Midland, Texas 79702

2. Article Number

7010 3090 0000 2337 4997

(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *Robert Porter* C. Date of Delivery *9-20-12*

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

Domestic Return Receipt *NGFI* 102595-02-M-1540