

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

APPLICATION OF CELERO ENERGY II, LP
FOR STATUTORY UNITIZATION, CHAVES
AND LEA COUNTIES, NEW MEXICO.

Case No. 14,914

AFFIDAVIT OF NOTICE

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

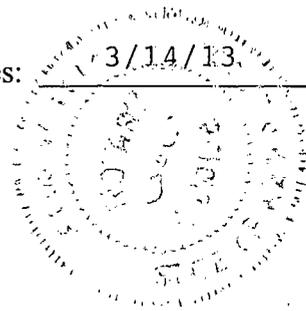
James Bruce, being duly sworn upon his oath, deposes and states:

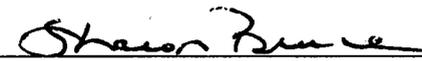
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Celero Energy II, LP.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the working interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
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:




Notary Public

Oil Conservation Division
Case No. _____
Exhibit No. 6

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

September 27, 2012

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for statutory unitization for the proposed for the North Caprock Celero Queen Unit, filed with the New Mexico Oil Conservation Division by Celero Energy II, LP.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, October 18, 2012, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as a working interest owner within the unit area you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, October 11, 2012. This statement must be filed with the Division's Santa Fe office at the above address, and with the undersigned, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing.

Very truly yours,



James Bruce

Attorney for Celero Energy II, LP

EXHIBIT

A

Name and Address List
North Caprock Celero Queen Unit

Royalty Owner – Fee Lease (Setterlund)

Samuel L. Setterlund and Eileen B. Sutterlund
3101 Townbluff Drive, Apt. No. 425
Plano, Texas 75075

Overriding Royalty Interest Owners

Crown Oil Partners IV, LP
303 Veterans Air Park Lane, Suite 600.
Midland, Texas 79705

Crump Energy Partners, LLC
P.O. Box 50820
Midland, Texas 79710

Hanley Petroleum, Inc.
415 W. Wall, Suite 1500
Midland, Texas 79701

Charles D. and Lynne W. Ray
P.O. Box 51608
Midland, Texas 79710

Jeff Brock
2513 W. Shandon
Midland, Texas 79705

Andy Luck
5702 Devlin Place
Midland, Texas 79707

Ashley Scott
P.O. Box 9143
Midland, Texas 79708

Drew and April Scott
P.O. Box 9143
Midland, Texas 79708

Randy and Jo Anne Scott
5702 Devlin Place
Midland, Texas 79707

Larry D. Douglas
2204 Lauren Drive
Spicewood, Texas 78669

Matt and Tiffany Daugherty
3321 Neely Avenue, #L2.
Midland, Texas 79707

EXHIBIT

A

7008 1140 0003 5881 3319

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

Sent To **Hanley Petroleum, Inc.**
 415 W. Wall, Suite 1500
 Midland, Texas 79701

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:

Crown Oil Partners IV, LP
 303 Veterans Air Park Lane, Suite 600
 Midland, Texas 79705

2. Article Number: **7008 1140 0003 5881 3296**
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *S. Hanley* C. Date of Delivery *10/14/12*

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:

Hanley Petroleum, Inc.
 415 W. Wall, Suite 1500
 Midland, Texas 79701

2. Article Number: **7008 1140 0003 5881 3319**
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) C. Date of Delivery: *10-1*

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

7008 1140 0003 5881 3296

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

Sent To **Crown Oil Partners IV, LP**
 303 Veterans Air Park Lane, Suite 600
 Midland, Texas 79705

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:

Crump Energy Partners, LLC
P.O. Box 50820
Midland, Texas 79710

2. Article Number
(Transfer from service label) **7008 1140 0003 5881 3302**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name) *Sophie Williams* C. Date of Delivery *12/11*

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

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MIDLAND TX 79705

Postage	\$ 0.65	0500
Certified Fee	\$2.95	03
Return Receipt Fee (Endorsement Required)	\$2.35	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	NEW MEXICO 9 29 2012 88-10819
Total Postage & Fees	\$ 5.95	

09/29/2012

Sent To **Jeff Brock**
2513 W. Shandon
Midland, Texas 79705

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

PS Form 3800, August 2006 See Reverse for Instructions

7008 1140 0003 5881 3302

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

Sent To **Crump Energy Partners, LLC**
P.O. Box 50820
Midland, Texas 79710

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

PS Form 3800, August 2006 See Reverse for Instructions

7008 1140 0003 5881 3302

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:

Jeff Brock
2513 W. Shandon
Midland, Texas 79705

2. Article Number
(Transfer from service label) **7008 1140 0003 5881 3333**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *[Signature]* Agent Addressee

B. Received by (Printed Name) *Jeff Brock* C. Date of Delivery *10-9-12*

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:

Ashley Scott
P.O. Box 9143
Midland, Texas 79708

2. Article Number (Transfer from service label) **7008 1140 0003 5881 3357**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *Drew Scott* C. Date of Delivery *09/29/2012*

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

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Postage	\$ 1.95
Certified Fee	\$2.95
Return Receipt Fee (Endorsement Required)	\$2.35
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 7.25



Sent To *Larry D. Douglas*
 Street, Apt. No., or PO Box No. *2204 Lauren Drive*
 City, State, ZIP+4 *Spicewood, Texas 78669*

PS Form 3800, August 2006 See Reverse for Instructions

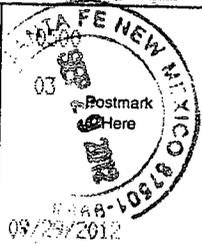
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Postage	\$ 0.65
Certified Fee	\$2.95
Return Receipt Fee (Endorsement Required)	\$2.35
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 5.95



Sent To *Ashley Scott*
 Street, Apt. No., or PO Box No. *P.O. Box 9143*
 City, State, ZIP+4 *Midland, Texas 79708*

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:

Larry D. Douglas
2204 Lauren Drive
Spicewood, Texas 78669

2. Article Number (Transfer from service label) **7008 1140 0003 5881 3388**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* Agent Addressee

B. Received by (Printed Name) *Larry D. Douglas* C. Date of Delivery *10-3-12*

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

7008 1140 0003 5881 3357

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:

Samuel L. Sutterlund and Eileen B. Sutterlund
3101 Townbluff Drive, Apt. No. 425
Plano, Texas 75075

2. Article Number

(Transfer from service label)

7008 1140 0003 5881 3289

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Samuel Sutterlund 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

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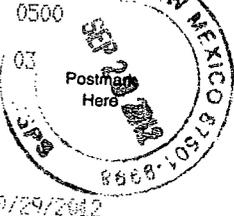
Postage \$ 10.65

Certified Fee \$2.95

Return Receipt Fee (Endorsement Required) \$2.35

Restricted Delivery Fee (Endorsement Required) \$0.00

Total Postage & Fees \$ 15.95



Sent To **Drew and April Scott**
P.O. Box 9143
Midland, Texas 79708

PS Form 3800, August 2006

See Reverse for Instructions

49EE 1985 5881 3364 7008 1140 0003 5881 3289

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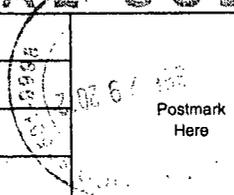
Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$



Sent To

Samuel L. Sutterlund and Eileen B. Sutterlund
3101 Townbluff Drive, Apt. No. 425
Plano, Texas 75075

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

PS Form 3800, August 2006

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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:

Drew and April Scott
P.O. Box 9143
Midland, Texas 79708

2. Article Number

(Transfer from service label)

7008 1140 0003 5881 3364

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X DS Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

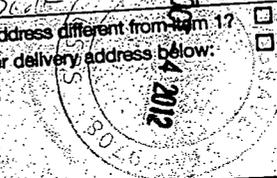
D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

Yes



7008 1140 0003 5881 3289

Calder

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YOUR LABEL NUMBER	SERVICE	STATUS OF YOUR ITEM	DATE & TIME	LOCATION	FEATURES
70081140000358813326	First-Class Mail®	Delivered	October 03, 2012, 1:22 pm	MIDLAND, TX 79710	Expected Delivery By: October 2, 2012 Certified Mail™ Return Receipt
		Notice Left (No Authorized Recipient Available)	October 01, 2012, 9:38 am	MIDLAND, TX 79710	
		Arrival at Unit	October 01, 2012, 9:27 am	MIDLAND, TX 79705	
		Depart USPS Sort Facility	October 01, 2012	MIDLAND, TX 79711	
		Processed at USPS Origin Sort Facility	October 01, 2012, 2:33 am	MIDLAND, TX 79711	
		Dispatched to Sort Facility	September 29, 2012, 4:25 pm	SANTA FE, NM 87501	
		Acceptance	September 29, 2012, 10:09 am	SANTA FE, NM 87501	

Check on Another Item

What's your label (or receipt) number?

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Certified Fee	\$2.95	
Return Receipt Fee (Endorsement Required)	\$2.35	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 5.95	

Sent To: **Charles D. and Lynne W. Ray**
P.O. Box 51608
Midland, Texas 79710

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

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Postage	\$ 0.65	0500
Certified Fee	\$2.95	03
Return Receipt Fee (Endorsement Required)	\$2.35	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	SEP 29 2012
Total Postage & Fees	\$ 5.95	09/29/2012

Sent To **Andy Luck**
 5702 Devlin Place
 Midland, Texas 79707

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

PS Form 3800, August 2006. See Reverse for Instructions

CERTIFIED MAIL™



7008 1140 0003 5881 3340



1000 79707

U.S. POSTAGE
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 SANTA FE, NM
 87501
 SEP 29 12
 AMOUNT
\$5.95
 00014520-03

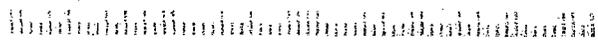
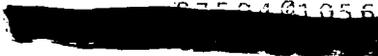
James Bruce
 P.O. Box 1056
 Santa Fe, New Mexico 87504

NOTICE 10-09-12



Andy Luck
 5702 Devlin Place
 Midland, Texas 79707

NIXIE 799 FE 1 00 10/07/12
 RETURN TO SENDER
 NOT DELIVERABLE AS ADDRESSED
 UNABLE TO FORWARD
 RC: 87504105656 *7255-03855-79-4

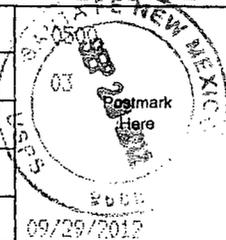


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Postage	\$	\$0.65
Certified Fee		\$2.95
Return Receipt Fee (Endorsement Required)		\$2.35
Restricted Delivery Fee (Endorsement Required)		\$0.00
Total Postage & Fees	\$	\$5.95

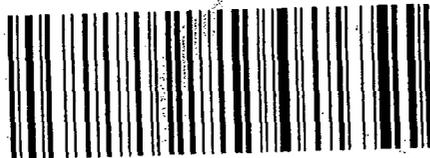


Sent To: **Randy and Jo Anne Scott**
 Street, Apt. No., or PO Box No.: **5702 Devlin Place**
Midland, Texas 79707
 City, State, ZIP+4

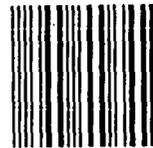
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7008 1140 0003 5881 3371

CERTIFIED MAIL™



7008 1140 0003 5881 3371



1000

79707

U.S. POSTAGE
 PAID
 SANTA FE, NM
 87501
 SEP 29, 12
 AMOUNT

\$5.95

00014520-03

James Bruce
 P.O. Box 1056
 Santa Fe, New Mexico 87504

10-09-12



RETURNED TO SENDER
 ADDRESS UNKNOWN, NOT KNOWN

Randy and Jo Anne Scott
 5702 Devlin Place
 Midland, Texas 79707

799 DE 1 00 10/07/12
 NIXIE
 RETURN TO SENDER
 NOT DELIVERABLE AS ADDRESSED
 UNABLE TO FORWARD
 RC: 87504105656 *7255-03856-70-4

