

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

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

Case No. 20671 - 20674

SELF-AFFIRMED STATEMENT OF NOTICE

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

James Bruce deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Mewbourne Oil Company.
3. Mewbourne Oil Company has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the applications filed herein.
4. Notice of the applications was provided to the interest owners, at their last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules.
6. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 5 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date handwritten next to my signature below.

Date:

August 8, 2019

James Bruce
James Bruce

EXHIBIT 3

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruc@aol.com

July 18, 2019

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of the following compulsory pooling applications filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company:

1. Case No. 20671, regarding a Bone Spring well in the N/2N/2 of Section 11 and the N/2N/2 of Section 12; and
2. Case No. 20672, regarding a Bone Spring well in the S/2N/2 of Section 11 and the S/2N/2 of Section 12,

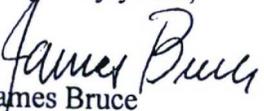
all in Township 19 South, Range 28 East, NMPM, Eddy County, New Mexico.

These matters are scheduled for hearing at 8:15 a.m. on Thursday, August 8, 2019, 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 an owner of an interest who may be affected by the applications, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date.

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ATTACHMENT *A*

Very truly yours,


James Bruce

Attorney for Mewbourne Oil Company

EXHIBIT A

COG Operating LLC
600 W. Illinois Ave.
Midland, TX 79701
Attn: Brent Sawyer

Devon Energy Production Company, L.P.
333 West Sheridan Avenue
Oklahoma City, OK 73102
Attn: Cari Allen

EOG Resources, Inc.
5509 Champions Drive
Midland, TX 79706
Attn: Clay Haggard

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

EOG Y Resources, Inc.
5509 Champions Drive
Midland, TX 79706

9590 9402 4582 8278 5934 10

2. Article Number (Transfer from service label)

7018 2290 0000 3427 1059

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Tommy Whitehead Agent Addressee

B. Received by (Printed Name) *Tommy Whitehead* **C. Date of Delivery** *7/23/19*

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

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Restricted Delivery

(over \$500)

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

Postmark Here

Postage

\$ _____
Total Postage and Fees

Sent To Devon Energy Production Company, L.P.
333 West Sheridan Avenue
Oklahoma City, OK 73102

Street and Apt. No., _____

City, State, ZIP+4® _____

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

9590 9402 4582 8278 5934 10

7018 2290 0000 3427 1059

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- Extra Services & Fees (check box, add fee as appropriate)
- Return Receipt (hardcopy) \$ _____
 - Return Receipt (electronic) \$ _____
 - Certified Mail Restricted Delivery \$ _____
 - Adult Signature Required \$ _____
 - Adult Signature Restricted Delivery \$ _____

Postmark Here

Postage

\$ _____
Total Postage and Fees

Sent To EOG Y Resources, Inc.
5509 Champions Drive
Midland, TX 79706

Street and Apt. No., or _____

City, State, ZIP+4® _____

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Devon Energy Production Company, L.P.
333 West Sheridan Avenue
Oklahoma City, OK 73102

9590 9402 4582 8278 5934 27

2. Article Number (Transfer from service label)

7018 2290 0000 3427 1066

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Signature] Agent Addressee

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

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



3. Service Type

- | | |
|--|---|
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| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input type="checkbox"/> Certified Mail Restricted Delivery | <input type="checkbox"/> Return Receipt for Merchandise |
| <input type="checkbox"/> Collect on Delivery | <input type="checkbox"/> Signature Confirmation™ |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery |

Restricted Delivery

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Certified Mail Fee
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Ext. a Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____

Postmark
 Here

Sent To COG Operating L.L.C.
 600 W. Illinois Ave.
 Street and Apt. No., or P.O. Midland, TX 79701

City, State, ZIP+4®

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

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

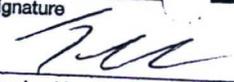
1. Article Addressed to:

COG Operating L.L.C.
 600 W. Illinois Ave.
 Midland, TX 79701

9590 9402 4582 8278 5934 34

2. 7018 2290 0000 3427 1073

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X  Agent
 Addressee

B. Received by (Printed Name) C. Date of Delivery
 Trister Brown 7/23/15

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

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

MOC-BR N

Domestic Return Receipt

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruc@aol.com

July 18, 2019

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed are copies of the following compulsory pooling applications filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company:

1. Case No. 20673, regarding a Bone Spring well in the N/2S/2 of Section 11 and the N/2S/2 of Section 12; and

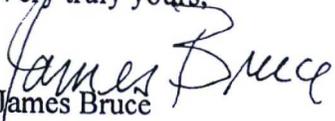
2. Case No. 20674, regarding a Bone Spring well in the S/2S/2 of Section 11 and the S/2S/2 of Section 12,

all in Township 19 South, Range 28 East, NMPM, Eddy County, New Mexico.

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Very truly yours,

James Bruce

James Bruce

Attorney for Mewbourne Oil Company

EXHIBIT A

COG Operating L.L.C
COG Oil & Gas, L.P
600 W. Illinois Ave.
Midland, TX 79701
Attn: Brent Sawyer

Devon Energy Production Company, L.P.
333 West Sheridan Avenue
Oklahoma City, OK 73102
Attn: Cari Allen

EOG Y Resources, Inc.
EOG Resources, Inc.
5509 Champions Drive
Midland, TX 79706
Attn: Clay Haggard

Premier Oil & Gas, Inc.
901 Waterfall Way, Suite 201
Richardson, Tx 75080
Attn: Kenneth C. Jones

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COG Operating L.L.C.
COG Oil & Gas, L.P.
600 W. Illinois Ave.
Midland, TX 79701

9590 9402 4582 8278 5934 03

2. Article Number (Transfer from)

7018 2290 0000 3427 1042

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

Triston Blum

C. Date of Delivery

7/23/19

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

- Yes
- No

3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
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- Return Receipt (hardcopy) \$
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- Certified Mail Restricted Delivery \$
- Adult Signature Required \$
- Adult Signature Restricted Delivery \$

Postage

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Total Postage and Fees

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Sent To Devon Energy Production Company, L.P.
333 West Sheridan Avenue
Oklahoma City, OK 73102

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

City, State, ZIP+4®

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See Reverse for Instructions

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

Postage

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Total Postage and Fees

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Sent To COG Operating L.L.C.
COG Oil & Gas, L.P.
600 W. Illinois Ave.
Midland, TX 79701

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

City, State, ZIP+4®

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1. Article Addressed to:

Devon Energy Production Company, L.P.
333 West Sheridan Avenue
Oklahoma City, OK 73102

9590 9402 4582 8278 5933 97

2. Article Number

7018 2290 0000 3427 1035

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COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

- Agent
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

- Yes
- No



3. Service Type

- Adult Signature
- Adult Signature Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail Restricted Delivery (over \$500)
- Priority Mail Express®
- Registered Mail™
- Registered Mail Restricted Delivery
- Return Receipt for Merchandise
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

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SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

EOG Y Resources, Inc.
EOG Resources, Inc.
5509 Champions Drive
Midland, TX 79706

9590 9402 4582 8278 5933 80

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Jimmy Whitehead Agent Addressee

B. Received by (Printed Name)
Jimmy Whitehead C. Date of Delivery
7/23/19

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

3. Service Type

Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Signature Confirmation Restricted Delivery

2. At 7018 2290 0000 3427 1028

PS Form 3811, July 2015 PSN 7530-02-000-9053 MOC BR 5 Domestic Return Receipt

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Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here

Postage \$

Total Postage and Fees \$

Sent To Premier Oil & Gas, Inc.
901 Waterfall Way, Suite 201
Richardson, TX 75080

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

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

7018 2290 0000 3427 1011

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Return Receipt (hardcopy) \$

Return Receipt (electronic) \$

Certified Mail Restricted Delivery \$

Adult Signature Required \$

Adult Signature Restricted Delivery \$

Postmark Here

Postage \$

Total Postage and Fees \$

Sent To EOG Y Resources, Inc.
EOG Resources, Inc.
5509 Champions Drive
Midland, TX 79706

Street and Apt. No., or City, State, ZIP+4*

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

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Premier Oil & Gas, Inc.
901 Waterfall Way, Suite 201
Richardson, TX 75080

9590 9402 4582 8278 5933 10

2. Article 7018 2290 0000 3427 1011

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Kenneth C Jones Agent Addressee

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

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

3. Service Type

Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

MOC BR 5 Domestic Return Receipt

7018 2290 0000 3427 1028

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

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

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

jamesbruc@aol.com

July 18, 2019

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To: Persons on Exhibit A

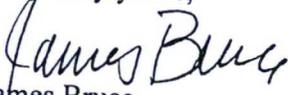
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Very truly yours,


James Bruce

Attorney for Mewbourne Oil Company

EXHIBIT A

Anadarko Petroleum Corporation
1201 Lake Robbins Drive
The Woodlands, TX 77380
Attn: Bobbie Burkland

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Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Postmark
Here

Sent To Anadarko Petroleum Corporation

Street and Apt. No. 1201 Lake Robbins Drive

City, State, ZIP+4® The Woodlands TX 77380

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

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Anadarko Petroleum Corporation
 1201 Lake Robbins Drive
 The Woodlands, TX 77380

9590 9402 4582 8278 5934 41

2. Article Number (Transfer from service label)

7018 2290 0000 3427 1080

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee

Jeri Winters

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

Jeri Winters 7-22-19

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

3. Service Type

Adult Signature Priority Mail Express®

Adult Signature Restricted Delivery Registered Mail™

Certified Mail® Registered Mail Restricted Delivery

Certified Mail Restricted Delivery Return Receipt for Merchandise

Collect on Delivery Signature Confirmation™

Collect on Delivery Restricted Delivery Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

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