

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

APPLICATION OF CELERO ENERGY II, LP
TO EXPAND THE WATERLOOD PROJECT
AND INSTITUTE A TERTIARY RECOVERY
PROJECT FOR THE ROCK QUEEN UNIT,
AND TO QUALIFY THE PROJECT FOR THE
RECOVERED OIL TAX RATE, CHAVES AND
LEA COUNTIES, NEW MEXICO.

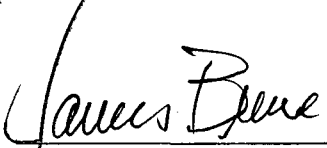
Case No. 14,505

AFFIDAVIT OF NOTICE

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

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

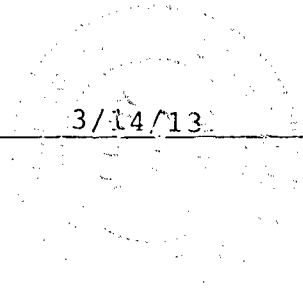
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Celero Energy II, LP.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the surface owners and offset interest owners entitled to receive notice 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 letters 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.

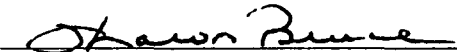


James Bruce

SUBSCRIBED AND SWORN TO before me this 18th day of August, 2010 by James Bruce.

My Commission Expires: 3/14/13





Notary Public

Oil Conservation Division
Case No. 17
Exhibit No. 17

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

June 17, 2010

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons listed on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application to expand the waterflood project and institute a tertiary recovery project for the Rock 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, July 8, 2010, 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 surface owner or an offset operator or working interest owner who may be affected by this application, 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 to file a Pre-Hearing Statement no later than Thursday, July 1, 2010. 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

EXHIBIT A

Marilyn Maxwell Chandler
P.O. Box 830308
Dallas, Texas 75283

Chevron U.S.A. Inc.
15 Smith Road
Midland, Texas 79705

Pomeroy Smith
Suite 19A
3510 Turtle Creek Boulevard
Dallas, Texas 75219

Craig, Ltd.
Suite 1290
500 West Texas 79701

Marshall & Winston, Inc.
P.O. Box 50880
Midland, Texas 79710

F. Karsten and
Manforth Production, Inc.
P.O. Box 508
Locust Valley, New York 11560

Abo Petroleum Corporation
MYCO Industries, Inc.
Yates Drilling Company
Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

Frostman Oil Corp.
P.O. Drawer W
Artesia, New Mexico 88210

Davoil, Inc.
P.O. Box 12507
Fort Worth, Texas 76116

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

Commissioner of Public Lands
Oil, Gas and Minerals Division
P.O. Box 1148
Santa Fe, New Mexico 87504

R.D. Collier
P.O. Box 265
Artesia, New Mexico 88211

Samson Resources Company
Suite 1010
200 North Loraine
Midland, Texas 79701

OXY USA WTP Limited Partnership
5 Greenway Plaza
Houston, Texas 77046

The Blanco Company
P.O. Box 25968
Albuquerque, New Mexico 87125

Bureau of Land Management
620 East Greene
Carlsbad, New Mexico 88220

Kerr-McGee Oil & Gas Onshore, LP
Suite 300
5735 Pineland Drive
Dallas, Texas 75231

Margaret M. Hodges
and Paul Slayton
P.O. Box 2035
Roswell, New Mexico 88202

Anadarko Petroleum Corporation
1200 Timberloch Place
Spring, Texas 77380

Mobil Producing Texas & New Mexico, Inc.
P.O. Box 2305
Houston, Texas 77210

Petro-Guard Company, Inc.
Suite 105
2450 Fondren
Houston, Texas 77063

Atofina Petrochemical, Inc.
P.O. Box 2159
Dallas, Texas 75221

ConocoPhillips Company
P.O. Box 2197
Houston, TX 77252

James S. Lebsack
P.O. Box 22215
Denver, Colorado 80222

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:

Margaret M. Hodges
and Paul Slayton
P.O. Box 2035
Roswell, New Mexico 88202

2. Article Number
(Transfer from service label)

7008 0500 0001 4594 1316

PS Form 3811, February 2004

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Paul Bruce* Agent Addressee
- B. Received by (Printed Name) *Paul Bruce* C. Date of Delivery *02/18/2004*
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:
Box 2035

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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PROHIBITED FOR SPECIAL USE

Postage	\$ 4.90	0500
Certified Fee	\$ 2.80	03
Return Receipt Fee (Endorsement Required)	\$ 2.30	
Restricted Delivery Fee (Endorsement Required)	\$ 0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 OXY USA WTP Limited Partnership
 5 Greenway Plaza
 Houston, Texas 77046
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4594 1356

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PROHIBITED FOR SPECIAL USE

Postage	\$ 4.90	0500
Certified Fee	\$ 2.80	03
Return Receipt Fee (Endorsement Required)	\$ 2.30	
Restricted Delivery Fee (Endorsement Required)	\$ 0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 Margaret M. Hodges
 and Paul Slayton
 P.O. Box 2035
 Roswell, New Mexico 88202
 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:

OXY USA WTP Limited Partnership
 5 Greenway Plaza
 Houston, Texas 77046

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Paul Bruce* Agent Addressee
- B. Received by (Printed Name) *Paul Bruce* C. Date of Delivery *02/18/2004*
- 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 0500 0001 4594 1356

102595-02-M-1540

Domestic Return Receipt

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:

ConocoPhillips Company
P.O. Box 2197
Houston, TX 77252

2. Article Number

(Transfer from service label) 7008 0500 0001 4594 1264

PS Form 3811, February 2004

Domestic Return Receipt I

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  Agent Addressee
- B. Received by (Printed Name) V. J. ... Date of Delivery 6-20-10

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

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

4. Restricted Delivery? (Extra Fee) Yes No

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT
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SANTA FE MUNICIPAL USE

Postage	\$	\$4.90	0500
Certified Fee		\$2.80	03
Return Receipt Fee (Endorsement Required)		\$2.30	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$10.00	06/18/2010

Sent To
Oil, Gas and Minerals Division
P.O. Box 1148
Santa Fe, New Mexico 87504
City, State, ZIP+4

PS Form 3800, August 2005 See Reverse for Instructions

7008 0500 0001 4594 1264

U.S. Postal ServiceTM CERTIFIED MAILTM RECEIPT
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HOUSTON TX 77252 C I A L L U S E

Postage	\$	\$4.90	0500
Certified Fee		\$2.80	03
Return Receipt Fee (Endorsement Required)		\$2.30	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$10.00	06/18/2010

Sent To
ConocoPhillips Company
P.O. Box 2197
Houston, TX 77252
City, State, ZIP+4

PS Form 3800, August 2005 See Reverse for Instructions

7008 0500 0001 4594 1264

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:

Commissioner of Public Lands
Oil, Gas and Minerals Division
P.O. Box 1148
Santa Fe, New Mexico 87504

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  Agent Addressee
- B. Received by (Printed Name) _____ Date of Delivery _____

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

JUN 22 2010

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

4. Restricted Delivery? (Extra Fee) Yes No

102595-02-M-1540

7008 0500 0001 4594 1264

Domestic Return Receipt I

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:

Marilyn Maxwell Chandler
P.O. Box 830308
Dallas, Texas 75283

2. Article Number

7008 0500 0001 4594 1486

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *XT Jordan* Agent Addressee

B. Received by (Printed Name) *JUN 21 2010* 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

0051 5954 1000 0050 8002

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POSTAL USE

Postage	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 Davoill, Inc.
 P.O. Box 12507
 Fort Worth, Texas 76116
 Street, Apt. No. or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2008 See Reverse for Instructions

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POSTAL USE

Postage	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 Marilyn Maxwell Chandler
 P.O. Box 830308
 Dallas, Texas 75283
 Street, Apt. No. or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2008 See Reverse for Instructions

0051 5954 1000 0050 8008

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:

Davoill, Inc.
 P.O. Box 12507
 Fort Worth, Texas 76116

Box 122269

COMPLETE THIS SECTION ON DELIVERY

A. Signature *Ron Casfey* Agent Addressee
 B. Received by (Printed Name) *Ron Casfey* Date of Delivery *6-22-10*

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

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
 4. Restricted Delivery? (Extra Fee) Yes

2. Article Number 7008 0500 0001 4594 1400
 (Transfer from service label)

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:

Samson Resources Company
Suite 1010
200 North Loraine
Midland, Texas 79701

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7008 0500 0001 4594 1363

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 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 No

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MULTI-PURPOSE SPECIAL USE

Postage	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent to Samson Resources Company
Suite 1010
200 North Loraine
Midland, Texas 79701

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:

Craig, Ltd.
Suite 1290
500 West Texas 79701

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7008 0500 0001 4594 1455

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MULTI-PURPOSE SPECIAL USE

Postage	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent to Craig, Ltd.
Suite 1290
500 West Texas 79701

PS Form 3800, August 2006 See Reverse for Instructions

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 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 No

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:

Marshall & Winston, Inc.
P.O. Box 50880
Midland, Texas 79710

2. Article Number
(Transfer from service label)

7008 0500 0001 4594 1448
Domestic Return Receipt I

PS Form 3811, February 2004

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *James S. Lebsack* Agent Addressee
- B. Received by (Printed Name) *James S. Lebsack* Express Mail Return Receipt for Merchandise
- C. Date of Delivery *6-22-10* C.O.D.
- D. Is delivery address different from item 1? Yes No
If YES, enter delivery address below:

3. Service Type

- Certified Mail Registered Mail Insured Mail Restricted Delivery? (Extra Fee) Yes

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MIDLAND TX 79710 SPECIAL USE

Postage	\$	4.90	0500
Certified Fee		\$2.80	03
Return Receipt Fee (Endorsement Required)		\$2.30	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$10.00	06/18/2010

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

Marshall & Winston, Inc.
P.O. Box 50880
Midland, Texas 79710

PS Form 3800, August 2006 See Reverse for Instructions

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(Domestic Mail Only; No Insurance Coverage Provided)

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

MIDLAND TX 79710 SPECIAL USE

Postage	\$	4.90	0500
Certified Fee		\$2.80	03
Return Receipt Fee (Endorsement Required)		\$2.30	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$10.00	06/18/2010

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

James S. Lebsack
P.O. Box 22215
Denver, Colorado 80222

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:

James S. Lebsack
P.O. Box 22215
Denver, Colorado 80222

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *James S. Lebsack* Agent Addressee
- B. Received by (Printed Name) *J S LEBSACK* 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 Return Receipt for Merchandise
- Registered Mail Insured Mail C.O.D.
4. Restricted Delivery? (Extra Fee) Yes No



Article Number (Transfer from service label) 7008 0500 0001 4594 1257

Domestic Return Receipt I

PS Form 3811, February 2004

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:

Mobil Producing Texas & New Mexico, Inc.
P.O. Box 2305
Houston, Texas 77210

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *James Falder*

B. Received by (Printed Name) *James Falder*

Date of Delivery *JUN 22 2010*

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

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

4. Restricted Delivery? (Extra Fee) Yes

7008 0500 0001 4594 1295

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:

Petro-Geart, Inc.
Suite 105
2450 Fondren
Houston, Texas 77063

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *James Falder*

B. Received by (Printed Name) *James Falder*

Date of Delivery *JUN 22 2010*

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

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

4. Restricted Delivery? (Extra Fee) Yes

7008 0500 0001 4594 1288

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HOUSTON TX 77210 SPECIAL USE

Postage	\$	44.90	0500
Certified Fee		\$2.80	03
Return Receipt Fee (Endorsement Required)		\$2.30	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$10.00	

Postmark Here

Sent To

Suite 105
2450 Fondren
Houston, Texas 77063

PS Form 3800, August 2006

See Reverse for Instructions

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

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

HOUSTON TX 77210 SPECIAL USE

Postage	\$	44.90	0500
Certified Fee		\$2.80	03
Return Receipt Fee (Endorsement Required)		\$2.30	
Restricted Delivery Fee (Endorsement Required)		\$0.00	
Total Postage & Fees	\$	\$10.00	

Postmark Here

Sent To

Mobil Producing Texas & New Mexico, Inc.

Suite 105
P.O. Box 2305
Houston, Texas 77210

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:

Petro-Geart, Inc.
Suite 105
2450 Fondren
Houston, Texas 77063

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *James Falder*

B. Received by (Printed Name) *James Falder*

Date of Delivery *JUN 22 2010*

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

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

4. Restricted Delivery? (Extra Fee) Yes

7008 0500 0001 4594 1288

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

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

POSTAGE & FEES

Postage	\$ 2.07
Certified Fee	\$2.80
Return Receipt Fee (Endorsement Required)	\$2.30
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 7.17

Sent To
 Frostman Oil Corp.
 Street, Apt. No. 70 Eagle Road
 or PO Box No. Hope, New Mexico 88250
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

6677 655h 7000 0050 8002

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:
 Pomeroy Smith
 Suite 19A
 3510 Turtle Creek Boulevard
 Dallas, Texas 75219

3. Service Type
- Certified Mail
 - Registered
 - Insured Mail
 - Restricted Delivery? (Extra Fee) Yes

2. Article Number
 (Transfer from service label) 7008 0500 0001 4594 1462

PS Form 3811, February 2004 Domestic Return Receipt T 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

POSTAGE & FEES

Postage	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 Pomeroy Smith
 Suite 19A
 3510 Turtle Creek Boulevard
 Dallas, Texas 75219
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

2977 655h 7000 0050 8002

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:
 Frostman Oil Corp.
 70 Eagle Road
 Hope, New Mexico 88250

2. Article Number
 (Transfer from service label) 7008 0500 0001 4594 1493

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature Agent Addressee
 X *Pomeroy Smith*
- B. Received by (Printed Name) *DB* C. Date of Delivery *6-28-10*
- D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
- Certified Mail
 - Registered
 - Insured Mail
 - Restricted Delivery? (Extra Fee) Yes

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3800, August 2006 See Reverse for Instructions

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com
NON-PROFIT ORGANIZATION USE

Postage	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent to
 Street, Apt. No. or PO Box No.
 City, State, Zip+4
 Chevron U.S.A. Inc.
 15 Smith Road
 Midland, Texas 79705

See Reverse for Instructions
 PS Form 3800, August 2006

7008 0500 0001 4594 1301

SENDER: COMPLETE THIS SECTION
 1. Article Addressed to:
 Anadarko Petroleum Corporation
 1200 Timberloch Place
 Spring, Texas 77380

COMPLETE THIS SECTION ON DELIVERY
 A. Signature: *[Signature]*
 B. Received by (Printed Name): *[Signature]*
 C. Date of Delivery: *6-13-10*
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Express Mail
 Return Receipt for Merchandise
 C.O.D.
 4. Restricted Delivery? (Extra Fee) Yes No

2. Article Number (Transfer from service label)
 PS Form 3811, February 2004

7008 0500 0001 4594 1301

Domestic Return Receipt
 PS Form 3800, August 2006

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit our website at www.usps.com
NON-PROFIT ORGANIZATION USE

Postage	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent to
 Street, Apt. No. or PO Box No.
 City, State, Zip+4
 Anadarko Petroleum Corporation
 1200 Timberloch Place
 Spring, Texas 77380

See Reverse for Instructions
 PS Form 3800, August 2006

7008 0500 0001 4594 1301

SENDER: COMPLETE THIS SECTION
 1. Article Addressed to:
 Chevron U.S.A. Inc.
 15 Smith Road
 Midland, Texas 79705

COMPLETE THIS SECTION ON DELIVERY
 A. Signature: *[Signature]*
 B. Received by (Printed Name): *[Signature]*
 C. Date of Delivery: *6-13-10*
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Express Mail
 Return Receipt for Merchandise
 C.O.D.
 4. Restricted Delivery? (Extra Fee) Yes No

PS Form 3800, August 2006

2. Article Number (Transfer from service label)
 PS Form 3811, February 2004

Domestic Return Receipt
 PS Form 3800, August 2006

7008 0500 0001 4594 1479

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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ARTESIA SPECIAL USE

Postage \$4.90 0500
 Certified Fee \$2.80 03
 Return Receipt Fee \$2.30
 Restricted Delivery Fee \$0.00
 Total Postage & Fees \$10.00 06/18/2010

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

PS Form 3800, August 2005 See Reverse for Instructions

7008 0500 0001 4594 1424

COMPLETE THIS SECTION ON DELIVERY

Signature: *Abo Petroleum*
 Agent Addressee
 Date of Delivery: JUN 7 2010
 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:
 Abo Petroleum Corporation
 MYCO Industries, Inc.
 Yates Drilling Company
 Yates Petroleum Corporation
 105 South Fourth Street
 Artesia, New Mexico 88210

2. Article Number (Transfer from service label) 7008 0500 0001 4594 1424

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

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

Postage \$4.90 0500
 Certified Fee \$2.80 03
 Return Receipt Fee \$2.30
 Restricted Delivery Fee \$0.00
 Total Postage & Fees \$10.00 06/18/2010

Sent To Abo Petroleum Corporation
 MYCO Industries, Inc.
 Yates Drilling Company
 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 2005 See Reverse for Instructions

7008 0500 0001 4594 1394

COMPLETE THIS SECTION ON DELIVERY

Signature: *Abo Petroleum*
 Agent Addressee
 Date of Delivery: JUN 7 2010
 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:
 Great Western Drilling
 P.O. Box 1659
 Midland, Texas 79702

2. Article Number (Transfer from service label) 7008 0500 0001 4594 1394

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

**U.S. Postal Service™
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For delivery information visit our website at www.usps.com

LOCUST VALLEY 19050 ALL USE

Postage \$	\$4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$10.00	06/18/2010

Sent To
F. Karsten and
Manforth Production, Inc.
P.O. Box 508
Locust Valley, New York 11560
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4594 1431

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
620 East Greene
Carlsbad, New Mexico 88220

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Restricted Delivery? (Extra Fee) Yes No

2. Article Number
(Transfer from service label) 7008 0500 0001 4594 1332
PS Form 3811, February 2004 Domestic Return Receipt J 102595-02-M-1540

**U.S. Postal Service™
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For delivery information visit our website at www.usps.com

CARLSBAD 88220 ALL USE

Postage \$	\$4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$10.00	06/18/2010

Sent To
Bureau of Land Management
620 East Greene
Carlsbad, New Mexico 88220
City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4594 1332

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:
F. Karsten and
Manforth Production, Inc.
P.O. Box 508
Locust Valley, New York 11560

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Restricted Delivery? (Extra Fee) Yes No

2. Article Number
(Transfer from service label) 7008 0500 0001 4594 1431
PS Form 3811, February 2004 Domestic Return Receipt J 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
F. Karsten
 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
 Registered
 Insured Mail
 Return Receipt for Merchandise
 C.O.D.
 Restricted Delivery? (Extra Fee) Yes No

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:

The Blanco Company
 P.O. Box 23968
 Albuquerque, New Mexico 87125

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
Phil White Addressee

B. Received by Printed Name Date of Delivery
Phil White

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 G.O.D.
 4. Restricted Delivery? (Extra Fee) Yes

2. Article Number: 7008 0500 0001 4594 1349

Domestic Return Receipt **I**

PS Form 3811, February 2004

102595-02-M-1540

**U.S. Postal Service™
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For delivery information visit our website at www.usps.com

ALBUQUERQUE, NM 87125 ALBUQUE

Postage \$	\$4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees \$	\$10.00	06/18/2010

Sent to

The Blanco Company
 P.O. Box 23968
 Albuquerque, New Mexico 87125

PS Form 3800, August 2005 See Reverse for Instructions

7008 0500 0001 4594 1349

U.S. Postal Service™
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OFFICIAL USE

Postage	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 Street, Apt. No., P.O. Box 265
 or PO Box No. Artesia, New Mexico 88211
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

2008 0500 0002 4594 1370

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	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 Street, Apt. No., P.O. Drawer W
 or PO Box No. Artesia, New Mexico 88210
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

2008 0500 0002 4594 1477

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	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 Street, Apt. No., P.O. Box 2159
 or PO Box No. Dallas, Texas 75221
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

2008 0500 0002 4594 1272

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	\$ 4.90	0500
Certified Fee	\$2.80	03
Return Receipt Fee (Endorsement Required)	\$2.30	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 10.00	06/18/2010

Sent To
 Street, Apt. No., Suite 300
 or PO Box No. 5735 Pineland Drive
 Dallas, Texas 75231
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

2008 0500 0002 4594 1272

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)

jamesbruce@aol.com

July 15, 2010

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Atofina Petrochemical, Inc.
c/o Total Petrochemicals USA, Inc.
1201 Louisiana Street
Houston, Texas 77002

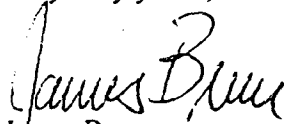
Ladies and gentlemen:

Enclosed is a copy of an application to expand the waterflood project and institute a tertiary recovery project for the Rock 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, August 5, 2010, 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 surface owner or an offset operator or working interest owner who may be affected by this application, 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 to file a Pre-Hearing Statement no later than Thursday, July 29, 2010. 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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery 7/19/10</p>
<p>1. Article Addressed to:</p> <p>Atofina Petrochemical, Inc. c/o Total Petrochemicals USA, Inc. 1201 Louisiana Street Houston, Texas 77002</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service tab) 7007 3020 0001 2489 4124</p>	
<p>PS Form 3811, February 2004 Domestic Return Receipt (Clear-It) 102595-02-M-1540</p>	

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

HOUSTON TX 77002

Postage	\$ 2.07
Certified Fee	\$ 2.80
Return Receipt Fee (Endorsement Required)	\$ 2.30
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 7.17

0500
 SANTA FE NEW MEXICO
 Postmark Here
 JUL 15 2010

Sent To: Atofina Petrochemical, Inc.
 c/o Total Petrochemicals USA, Inc.
 1201 Louisiana Street
 Houston, Texas 77002

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

PS Form 3800, August 2006 See Reverse for Instructions

7007 3020 0001 2489 4124

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 29, 2010

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Kerr-McGee Oil & Gas Onshore, LP
c/o The Corporation Trust Company
1209 Orange Street
Wilmington, Delaware 19801

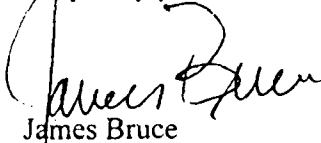
Ladies and gentlemen:

Enclosed is a copy of an application to expand the waterflood project and institute a tertiary recovery project for the Rock 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, August 19, 2010, 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 surface owner or an offset operator or working interest owner who may be affected by this application, 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 to file a Pre-Hearing Statement no later than Thursday, August 12, 2010. 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

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature </p> <p>B. Received by (Printed Name) _____ Date of Delivery AUG 04 2010</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Kerr-McGee Oil & Gas Onshore, LP c/o The Corporation Trust Company 1209 Orange Street Wilmington, Delaware 19801</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7007 3020 0001 2489 4476</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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For delivery information visit our website at www.usps.com

WILMINGTON, DE 19801

Postage	\$ 2.58
Certified Fee	\$ 2.80
Return Receipt Fee (Endorsement Required)	\$ 2.30
Restricted Delivery Fee (Endorsement Required)	\$ 0.00
Total Postage & Fees	\$ 7.68

Sent To
Kerr-McGee Oil & Gas Onshore, LP
c/o The Corporation Trust Company
1209 Orange Street
Wilmington, Delaware 19801

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

PS Form 3800, August 2006 See Reverse for Instructions

USPS SANTA FE, NM 87501
 JUL 31 2010
 Postmark Here
 OFFICE

7007 3020 0001 2489 4476