

BEFORE THE
OIL CONSERVATION DIVISION
NEW MEXICO ENERGY, MINERALS AND
NATURAL RESOURCES DEPARTMENT

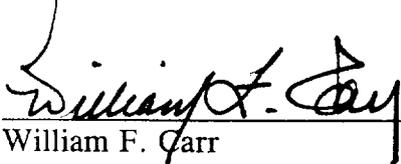
APPLICATION OF PETROCAP, INC. FOR
COMPULSORY POOLING OF ALL MINERAL
INTERESTS IN SECTION 22, TOWNSHIP 4 SOUTH,
RANGE 31 EAST, NMPM, ROOSEVELT COUNTY,
NEW MEXICO.

CASE NO. 12887

AFFIDAVIT

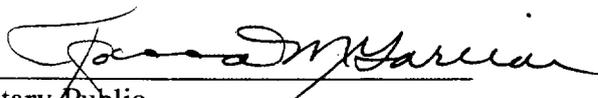
STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

William F. Carr, attorney in fact and authorized representative of Petrocap, Inc., the Applicant herein, being first duly sworn, upon oath, states that notice has been given to all interested persons entitled to receive notice of this application under Oil Conservation Division rules, and that notice has been given at the addresses shown on Exhibit "A" attached hereto.



William F. Carr

SUBSCRIBED AND SWORN to before me this 5th day of June 2002.



Notary Public

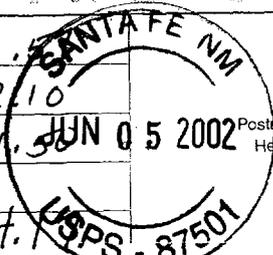
My Commission Expires:

aug 23, 2005

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Case No. 12886/12887 Exhibit No. 12
Submitted by:
PETROCAP, INC.
Hearing Date: June 27, 2002

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

OFFICIAL USE

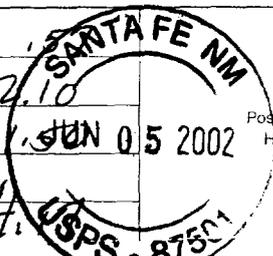
Petrocap 22 Postage	\$	1.50	
Certified Fee		2.10	
Return Receipt Fee (Endorsement Required)		1.50	
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees	\$	4.10	

Sent To Bank of America, Trustee u/w/o
Kangerga Sowell Trust
Street, Apt. No
or PO Box No. Post Office Box 830308
City, State, ZIP Dallas, Texas 75283

PS Form 3800

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

OFFICIAL USE

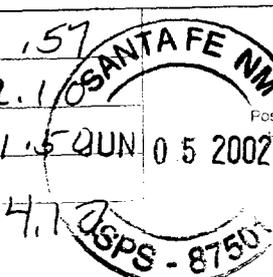
Petrocap Sec 22 Postage	\$	1.50	
Certified Fee		2.10	
Return Receipt Fee (Endorsement Required)		1.50	
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees	\$	4.10	

Sent To Bank of America, Trustee u/w/o
T.W. Sowell, deceased
Street, Apt. No.;
or PO Box No. Post Office Box 830308
City, State, ZIP+ 4 Dallas, Texas 75283

PS Form 3800, J

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

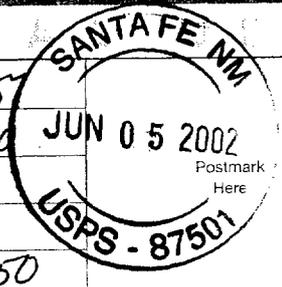
OFFICIAL USE

Petrocap 22 Postage	\$	1.57	
Certified Fee		2.10	
Return Receipt Fee (Endorsement Required)		1.50	
Restricted Delivery Fee (Endorsement Required)			
Total Postage & Fees	\$	4.17	

Effie Boyd
4924 9th Street
Lubbock, Texas 79416

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

Postage	\$ 1.50
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 1.50



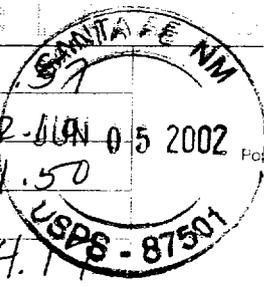
MAIL RETURNED

Sent To Myrtle D. Mosley and H. O. Mosley
Street, Apt. No., or PO Box No. Spanish Trace Apt. No. 437
City, State, ZIP+ Athens, Texas 75751

PS Form 3800

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

Postage	\$ 1.50
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.10



Sent To W. O. Stevens and Ruth C. Stevens
Street, Apt. No., or PO Box No. 3310 Fairmount, Apt. P 1C
City, State, ZIP+ Dallas, Texas 75201

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:
 W. O. Stevens and Ruth C. Stevens
 3310 Fairmount, Apt. P 1C
 Dallas, Texas 75201

2. Article Number (C) 7001 1140 0002 5600 5509

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
C. Signature X <i>Glenda Castillo</i>	6-10-02
<input checked="" type="checkbox"/> Agent	<input type="checkbox"/> Addressee
D. Is delivery address different from item 1?	<input type="checkbox"/> Yes
If YES, enter delivery address below:	<input type="checkbox"/> No

3. Service Type	
<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes



001 1140 0002 5600 5493

Handwritten signature/initials inside a hand-drawn oval.

HOLLAND & HART LLP
ATTORNEYS AT LAW

P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208
110 NORTH GUADALUPE, SUITE 1
SANTA FE, NEW MEXICO 87501-6525

Handwritten "WAM" in the top right corner.

Handwritten "80108" with a circular scribble.

UNDELIVERABLE AS
ADDRESSED - UNABLE
TO FORWARD

Myrtle D. Mosley and H. O.
Mosley
Spanish Trace Apt. No. 437
Athens, Texas 75751

Large handwritten scribble or signature over the recipient address.

**RETURN RECEIPT
REQUESTED**