

IN THE MATTER OF THE APPLICATION :
OF YATES PETROLEUM CORPORATION :
FOR COMPULSORY POOLING, EDDY :
COUNTY, NEW MEXICO :

AFFIDAVIT OF MAILING

STATE OF NEW MEXICO)
COUNTY OF EDDY) ss.

PATTI WIER, being first duly sworn, upon oath, states that the notice provisions of Rule 1207 of the New Mexico Oil Conservation Division have been complied with, that Applicant has caused to be conducted a good-faith diligent effort to find the correct addresses of all interested persons entitled to receive notice, and that pursuant to Rule 1207, notice has been given at the correct addresses as provided by such rule.

In support hereof, affiant states that true copies of the Application of Yates Petroleum Corporation for Compulsory Pooling, Eddy County, New Mexico, were mailed in accordance with Rule 1207, to each known individual owning an uncommitted leasehold interest, an unleased and uncommitted mineral interest, or royalty interest not subject to a pooling or unitization clause in the lands affected by such application, which interest must be

Yates Pet Corp

9605

committed and has not been voluntarily committed to the area proposed to be pooled or unitized, in securely sealed, certified mail, return receipt requested, postage prepaid envelopes, addressed to the following named parties:

Tenneco Oil Company
7990 IH 10 West
San Antonio, Texas 78230
Attention: Rex Bourland

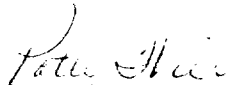
Douglas L. Cone
P. O. Box 13612
Albuquerque, New Mexico 87192

Kenneth G. Cone
P. O. Box 11310
Midland, Texas 79702

Clifford Cone
P. O. Box 1509
Lovington, New Mexico 88260

Kathleen Cone
P. O. Drawer 1509
Lovington, New Mexico 88260

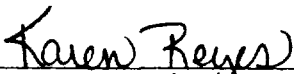
on the 24th day of January, 1989, as reflected by the copies of the letters transmitting such copies of the Application and the return receipts executed on behalf of the addressees, attached hereto.



Patti Wier

SUBSCRIBED AND SWORN TO before me this 24th day of January, 1989, by PATTI WIER.

My commission expires:
1-2-90



Notary Public

January 24, 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Tenneco Oil Company
7990 IH 10 West
San Antonio, Texas 78230

Attention: Rex Bourland

Re: Township 20 South, Range 24 East, N.M.P.M.
Section 2: S/2
Eddy County, New Mexico

Gentlemen:

Enclosed, please find a copy of the Application of Yates Petroleum Corporation for Compulsory Pooling, Eddy County, New Mexico.

Hearing is scheduled before the New Mexico Oil Conservation Division, in Santa Fe, New Mexico, on February 15, 1989.

Please contact the undersigned if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER



Chad Dickerson

CD:pvw
Enclosure

cc: Yates Petroleum Corporation

January 24, 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Douglas L. Cone
P. O. Box 13612
Albuquerque, New Mexico 87192

Re: Township 20 South, Range 24 East, N.M.P.M.
Section 2: S/2
Eddy County, New Mexico

Dear Mr. Cone:

Enclosed, please find a copy of the Application of Yates Petroleum Corporation for Compulsory Pooling, Eddy County, New Mexico.

Hearing is scheduled before the New Mexico Oil Conservation Division, in Santa Fe, New Mexico, on February 15, 1989.

Please contact the undersigned if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER


Chad Dickerson

CD:pvw
Enclosure

cc: Yates Petroleum Corporation

January 24, 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Kenneth G. Cone
P. O. Box 11310
Midland, Texas 79702

Re: Township 20 South, Range 24 East, N.M.P.M.
Section 2: S/2
Eddy County, New Mexico

Dear Mr. Cone:

Enclosed, please find a copy of the Application of Yates Petroleum Corporation for Compulsory Pooling, Eddy County, New Mexico.

Hearing is scheduled before the New Mexico Oil Conservation Division, in Santa Fe, New Mexico, on February 15, 1989.

Please contact the undersigned if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER



Chad Dickerson

CD:pvw
Enclosure

cc: Yates Petroleum Corporation

January 24, 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Clifford Cone
P. O. Box 1509
Lovington, New Mexico 88260

Re: Township 20 South, Range 24 East, N.M.P.M.
Section 2: S/2
Eddy County, New Mexico

Dear Mr. Cone:

Enclosed, please find a copy of the Application of Yates Petroleum Corporation for Compulsory Pooling, Eddy County, New Mexico.

Hearing is scheduled before the New Mexico Oil Conservation Division, in Santa Fe, New Mexico, on February 15, 1989.

Please contact the undersigned if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER



Chad Dickerson

CD:pvw
Enclosure

cc: Yates Petroleum Corporation

January 24, 1989

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Kathleen Cone
P. O. Box 1509
Lovington, New Mexico 88260

Re: Township 20 South, Range 24 East, N.M.P.M.
Section 2: S/2
Eddy County, New Mexico

Dear Ms. Cone:

Enclosed, please find a copy of the Application of Yates Petroleum Corporation for Compulsory Pooling, Eddy County, New Mexico.

Hearing is scheduled before the New Mexico Oil Conservation Division, in Santa Fe, New Mexico, on February 15, 1989.

Please contact the undersigned if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER



Chad Dickerson

CD:pvw
Enclosure

cc: Yates Petroleum Corporation

P 920 346 856

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Kenneth G. Cone	
Street and No. P. O. Box 11310	
P.O. State and ZIP Code Midland, TX 79702	
Postage	
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	
Postmark or Date	

PS Form 3800, June 1985

P 920 346 855

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Douglas L. Cone	
Street and No. P. O. Box 13612	
P.O. State and ZIP Code Albuquerque, NM 87192	
Postage	
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	
Postmark or Date	

PS Form 3800, June 1985

P 920 346 854

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Tenneco Oil Company	
Street and No. 7990 IH 10 West	
P.O. State and ZIP Code San Antonio, TX 78230	
Postage	
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	
Postmark or Date	

PS Form 3800, June 1985

P 920 346 857

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Clifford Cone	
Street and No. P. O. Box 1509	
P.O. State and ZIP Code Lovington, NM 88260	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3800, June 1985

P 920 346 858

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Kathleen Cone	
Street and No. P. O. Box 1509	
P.O. State and ZIP Code Lovington, NM 88260	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3800, June 1985

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

3. Article Addressed to: Tenneco Oil Company 7990 IH 10 West San Antonio, TX 78230 Attn: Rex Bourland	4. Article Number P 920 346 854 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X	8. Addressee's Address (<i>ONLY if requested and fee paid</i>)
6. Signature — Agent X <i>[Signature]</i>	
7. Date of Delivery 1-27-89	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

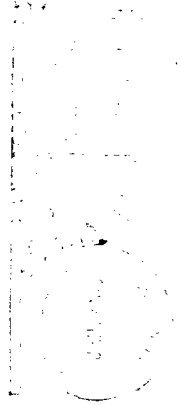
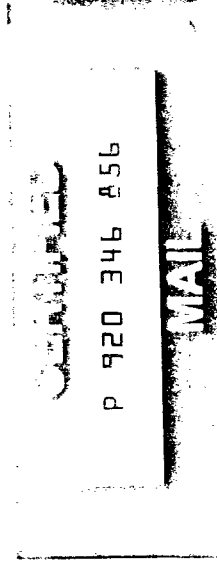
1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

3. Article Addressed to: Douglas L. Cone P. O. Box 13612 Albuquerque, NM 87192	4. Article Number P 920 346 855 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X	8. Addressee's Address (<i>ONLY if requested and fee paid</i>)
6. Signature — Agent X <i>[Signature]</i>	
7. Date of Delivery 1-27-9	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

DICKERSON, FISK & VANDIVER
ATTORNEYS AT LAW
SEVENTH & MAHONE / SUITE E
ARTESIA, NEW MEXICO 88210



Name _____
1st No. _____
2nd No. _____
Return _____

UNCLAIMED
TO
SENDER

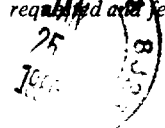
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Kenneth G. Cone
P. O. Box 11310
Midland, Texas 79702

~~2-9-81~~

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

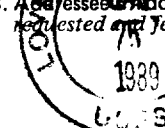
3. Article Addressed to: Clifford Cone P. O. Box 1509 Lovington, NM 88260	4. Article Number P 920 346 857 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid) 
6. Signature — Agent X <i>Clifford Cone by C. Kimber</i>	
7. Date of Delivery	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery.

3. Article Addressed to: Kathleen Cone P. O. Box 1509 Lovington, NM 88260	4. Article Number P 920 346 858 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid) 
6. Signature — Agent X <i>Kathleen Cone by C. Kimber</i>	
7. Date of Delivery	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT