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

APPLICATION OF THE NEW MEXICO OIL CONSERVATION DIVISION, THROUGH THE SUPERVISOR OF DISTRICT I, FOR AN ORDER REQUIRING VERDE GRANDE INC. TO BRING ONE WELL INTO COMPLIANCE WITH 19.15.4.201 NMAC, ASSESSING AN APPROPRIATE CIVIL PENALTY IN THE EVENT OF NON-COMPLIANCE, AUTHORIZING THE DIVISION TO PLUG SAID WELL AND ORDERING A FORFEITURE OF THE APPLICABLE PLUGGING BOND; LEA COUNTY, NEW MEXICO.

**CASE NO. 13257** 

### **CERTIFICATE OF NOTICE**

In accordance with Division Rule 1207 (19.15.14.1207 NMAC) I hereby certify that notice of original April 29, 2004 hearing setting in the above-captioned case, with a copy of the application, was mailed to the following by certified mail, return receipt requested, at least 20 days prior to that hearing date:

Verde Grande Inc. P.O. Box 147 Hobbs Highway Lovington, NM 88260

Roland E. Caudill Registered Agent for Verde Grande Inc. 822 Birch Lovington, NM 88260

Ohio Casualty Insurance Company 9450 Seward Road Fairfield, OH 45014-5456

Copies of the notice with proof of service (where available) are attached as Exhibit "A" to this certificate. No return receipt was received from Verde Grande Inc. A copy of the returned envelope is attached as Exhibit "B."

nty of Sonte Fe

Gail MacQuesten

SUBSCRIBED AND SWORN to before me this 4th day of June, 2004.

Notary Public

My Commission Expires:

1-9-08

**Case 13257 OCD Ex. 1** 



## NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON
Governor

Joanna Prukop
Cabinet Secretary
Acting Director
Oil Conservation Division

April 7, 2004

Verde Grande Inc. P.O. Box 147 Hobbs Highway Lovington, NM 88260

Certified Mail #: 7099 3220 0009 7873 /032

Roland E. Caudill
Registered Agent for Verde Grande Inc.
822 Birch
Lovington, NM 88260

Certified Mail #: 7099 3220 0009 7873 1049

Ohio Casualty Insurance Company 9450 Seward Road Fairfield, OH 45014-5456

Certified Mail #: 7099 3220 0009 7873 1056

## VIA CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Re: Case No. 13257: Application of the New Mexico Oil Conservation Division, Through the Supervisor of District I, for an Order Requiring Verde Grande Inc. to Bring One Well into Compliance with 19.15.4.201 NMAC, Assessing an Appropriate Civil Penalty in the Event of Non-Compliance, Authorizing the Division to Plug said Well and Ordering a Forfeiture of the Applicable Plugging Bond; Lea County, New Mexico

#### Ladies and Gentlemen:

You are hereby notified that the New Mexico Oil Conservation Division has filed the above-captioned Application seeking an order requiring you to bring the Aztec State #1 well, API #30-025-22342 into compliance with Division rules by plugging and abandoning the well, securing temporary abandonment status for the well, or returning the well to a Division-approved beneficial use. A copy of the Application is enclosed.

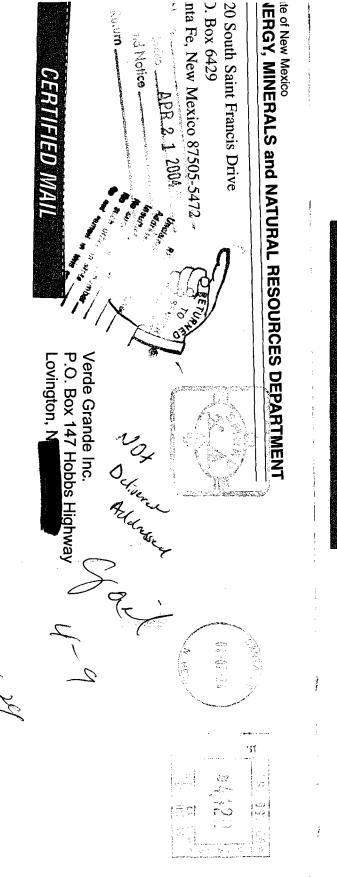
A hearing on this application will take place before a Division hearing officer on Thursday, April 29, 2004, at 8:15 a.m., in Porter Hall, First Floor, 1220 South St. Francis Drive in Santa Fe, New Mexico. At that hearing you will have an opportunity to show cause why an order should not be entered as requested in the Application.

You posted a single-well surety bond in the amount of \$10,000, number 2-418-413-9, Ohio Casualty Insurance Company, to secure your obligation to plug and abandon the well in compliance with Division rules. That security will be forfeited if an order is entered as requested in the attached application and you fail to comply with that order.

Oil Conservation Division \* 1220 South St. Francis Drive \* Santa Fe, New Mexico 87505 Phone: (505) 476-3440 \* Fax (505) 476-3462 \* http://www.emnrd.state.nm.us

Exhibit A

3811, July 1999	2. Article Number (Copy from service label) 7099 3220 0009 7873 1049	4. Restricted	☐ Insured Mail	☐ Registered	3. Service Type			A cent for Verde	sed to:	or on the front if space permits.		Print your name and address on the reverse	plete	SENDER: COMPLETE THIS SECTION		TO COMMAND TO THE TAX TO A PARTICULAR TO THE TAX TO THE	PS Form 3811, July 1999 Domestic Return Receipt	2. Article Number (Copy from service label) 7099 3220 0009 7873 1056		☐ Insured Mail	☐ Registered	3. Service Type	011	Feinfield OH 45014-5456	Casualt	\	9	Attach this card to the back of the mailpiece, or on the front if space permits	so that we can return the card to you.  C. Signature	item 4 if Restricted Delivery is desired.
0CD 102595-99-M-1789		Restricted Delivery? (Extra Fee)	Mail C.O.D.	□ Return	Mail Company Mail		INO		Is delivery address different from item 1? If YES, enter delivery address below:	_ _	O □ Agent		A. Received by (Please Print Clearly) B. Date of Delivery	COMPLETE THIS SECTION ON DELIVERY	ייי פרסדים אייים אייים אייים איייים אייי		OCD 102595-99-M-1789 FD 13 = 57		4. Restricted Delivery? (Extra Fee)	□ C.O.D.	☐ Return Receipt for Merchandise	Asil T Everess Mail	th the state of th	ŏ₽			nt from item 1?	House Daddressee -	O	+ Mouse 4-904
C Ttovington, NM 88260  PS Form 3800, July 1999  See Reverse for Instructions	822 Birch Verus Jet de Core	Ro	(Please Print Clearly) (To be completed by mailer	Total Postage & Fees \$		Return Receipt Fee (Endorsement Required)	<b>b</b> 2	7 Postage \$		<b>0</b> 4 •	Artic	mestic Mail <sub>s</sub> Only	U.S. POSTAI SERVICE CERTIFIED MAIL RECEIPT					Harrield, OH 45014-5456 See Reverse for Instructions	1450 Seward Road	)hio Casualty Hisuratice	e (Please Print Clearly) (To be completed by mailer)	tal Postage & Fees \$	tricted Dalivery Fee Jorsement Required)	Return Receipt ree	Certified Fee Postmark		Postage \$		cle Sent III.	



U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)
Article Sent To:
Certified Fee
C

Exhibit B