

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

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

Case No. 13,410

AFFIDAVIT REGARDING NOTICE

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

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

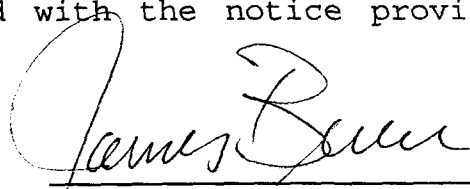
1. I am over the age of 18, and have personal knowledge of the matters set forth herein.

2. I am an attorney for Applicant.

3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the 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 letter and certified return receipts are attached hereto as Exhibit A.

5. Applicant has complied with the notice provisions of Division Rule 1207.



James Bruce

SUBSCRIBED AND SWORN TO before me this 1st day of February, 2004, by James Bruce.



Notary Public

My Commission Expires:

3/14/05

OIL CONSERVATION DIVISION

CASE NUMBER

EXHIBIT NUMBER 5

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

January 13, 2005

CERTIFIED MAIL - RETURN RECEIPT REQUESTED


To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding the S½SE¼ of Section 29, Township 18 South, Range 30 East, N.M.P.M., Eddy County, New Mexico. This application is scheduled to be heard at 8:15 a.m. on Thursday, February 3, 2005 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to appear at the hearing and present evidence. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are required to notify the Division, and the undersigned, by Friday, January 28, 2005, if you intend to enter an appearance and participate in the case.

Very truly yours,


James Bruce

Attorney for Mewbourne Oil Company



EXHIBIT A

Kenneth G. Cone, individually
& as Trustee
P.O Box 11310
Midland, Texas 79702

Bank of Oklahoma, Trustee of
trusts u/w/o Kathleen Cone
P.O. Box 1508
Tulsa, Oklahoma 74101

Randy Lee Cone
P.O. Box 552
Jay, Oklahoma 74346

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

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

OFFICIAL USE

| | |
|--|------|
| Postage \$ | 0.60 |
| Certified Fee | 2.30 |
| Return Receipt Fee (Endorsement Required) | 1.75 |
| Restricted Delivery Fee (Endorsement Required) | |
| Total Postage & Fees \$ | 4.65 |

Sent to
 Kenneth G. Cone, Individually
 & as Trustee
 P.O. Box 11310
 Midland, Texas 79702
 City, State, Zip+4

PS Form 3800, June 2002 See Reverse for Instructions

4226 6598 5000 0911 4002

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:
 Bank of Oklahoma, Trustees of
 trusts u/w/o Kathleen Cone
 P.O. Box 1508
 Tulsa, Oklahoma 74101

2. Article Number
 (Transfer from service label)
 7004 1160 0005 8659 9281

PS Form 3811, February 2004
 Domestic Return Receipt *WOC/29-1*

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *[Signature]*

B. Received by (Printed Name)
 C. Date of Delivery
 JAN 17 2005

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

7004 1160 0005 8659 9281
 Domestic Return Receipt *WOC/29-1*
 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:
 Randy Lee Cone
 P.O. Box 552
 Jay, Oklahoma 74346

2. Article Number
 (Transfer from service label)
 7004 1160 0005 8659 9288

PS Form 3811, February 2004
 Domestic Return Receipt *WOC/29-1*
 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *[Signature]*

B. Received by (Printed Name)
 C. Date of Delivery
 JAN 15 2005

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

7004 1160 0005 8659 9288
 Domestic Return Receipt *WOC/29-1*
 102595-02-M-1540

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| | |
|--|------|
| Postage \$ | 0.60 |
| Certified Fee | 2.30 |
| Return Receipt Fee (Endorsement Required) | 1.75 |
| Restricted Delivery Fee (Endorsement Required) | |
| Total Postage & Fees \$ | 4.65 |

Sent To
 Bank of Oklahoma, Trustees of
 trusts u/w/o Kathleen Cone
 P.O. Box 1508
 Tulsa, Oklahoma 74101
 City, State, Zip+4

PS Form 3800, June 2002 See Reverse for Instructions

4226 6598 5000 0911 4002

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

OFFICIAL USE

| | | |
|---|---------|---------------|
| Postage | \$ 0.60 | UNIT ID: 0500 |
| Certified Fee | 2.30 | |
| Return Receipt Fee (Endorsement Required) | 1.75 | |
| Restricted Delivery Fee (Endorsement Required) | | |
| Total Postage & Fees | \$ 4.65 | |

Postmark
Here
JAN 13 2005
JAN 13 2005
JAN 13 2005

Sent To
Randy Lee Cone
P.O. Box 552
Jav. Oklahoma 74346
Street, Apt. No.,
or PO Box No.
City, State, ZIP+4

See Reverse for Instructions

PS Form 3800, June 2002

8626 6598 5000 0977 4002