

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

**APPLICATION OF NADEL AND GUSSMAN HEYCO,  
L.L.C. FOR APPROVAL OF A NON-STANDARD OIL  
SPACING AND PRORATION UNIT AND COMPULSORY  
POOLING, EDDY COUNTY, NEW MEXICO.**

**Case No. 14,891**

**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 Nadel and Gussman Heyco, L.L.C.
3. Nadel and Gussman Heyco, L.L.C. 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 last known addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit 1.
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 16th day of October, 2012 by James Bruce.

My Commission Expires: 3/14/13

  
Notary Public

Oil Conservation Division  
Case No. 5  
Exhibit No. 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)

[jamesbruce@aol.com](mailto:jamesbruce@aol.com)

August 16, 2012

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit 1

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling and a non-standard oil spacing and proration unit, filed with the New Mexico Oil Conservation Division by Nadel and Gussman Heyco, LLC, regarding a well in the S½N½ of Section 20, Township 18 South, Range 26 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, September 6, 2012, 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 an owner of an interest that 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 the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, August 30, 2012. This statement must be filed with the Division's Santa Fe office at the above address, 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. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,



James Bruce

Attorney for Nadel and Gussman Heyco, LLC

EXHIBIT 1



EXHIBIT I

Mary Salinas Vanderlinden  
460 Sierra Drive  
Albuquerque, NM 87108

Norma Glover Smith  
305 West Country Club Road  
Roswell, NM 88201

Kenneth Reynolds  
New Mexico Oil Producers, Inc.  
1200 South Richardson  
Roswell, NM 88201

Kenneth Reynolds  
New Mexico Oil Producers, Inc.  
P.O. Box 1498  
Roswell, NM 88202

Westway Petro  
Suite 600  
4514 Cole Avenue  
Dallas, TX 75205

McBride Oil & Gas Corporation  
PO Box 1515  
Roswell, New Mexico 88202

First National Bank of Roswell, Trustee  
of the Earlene Cass Tweedy Living Trust  
PO Box 1857  
Roswell, New Mexico 88202

Janie Sullivan Salinas  
c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

Gabriela Louise Salinas  
c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

Laura Salinas Tubio  
12765 SW 34<sup>th</sup> Place  
Davie, Florida 33330

Paula Jane Salinas  
704 W. 9<sup>th</sup> Street  
Austin, Texas 78701

John Sullivan Salinas  
c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

First Century Oil, Inc.  
Charles B. Read, President  
PO Box 1518  
Roswell, New Mexico 88202



# 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.

Article Addressed to:

Janie Sullivan Salinas  
c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

## COMPLETE THIS SECTION ON DELIVERY

A. Signature Beverly Foster ☐ Agent ☐ Addressee

B. Received by (Printed Name) Beverly Foster C. Date of Delivery 8/22/2010

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

Article Number 7010 3090 0000 2337 4881

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt NSH

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](http://www.usps.com)

### OFFICIAL USE

Postage \$  
Certified Fee  
Return Receipt Fee (Endorsement Required)  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Fees  
Postmark Here  
Paula Jane Salinas  
704 W. 9<sup>th</sup> Street  
Austin, Texas 78701  
Sent To  
Street, Apt. No., or PO Box No.  
City, State, ZIP+4

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](http://www.usps.com)

### OFFICIAL USE

Postage \$  
Certified Fee  
Return Receipt Fee (Endorsement Required)  
Restricted Delivery Fee (Endorsement Required)  
Total Postage & Janie Sullivan Salinas  
c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701  
Sent To  
Street, Apt. No., or PO Box No.  
City, State, ZIP+4  
Postmark Here  
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:

Paula Jane Salinas  
704 W. 9<sup>th</sup> Street  
Austin, Texas 78701

## COMPLETE THIS SECTION ON DELIVERY

A. Signature ABP ☐ Agent ☐ Addressee

B. Received by (Printed Name) ABP C. Date of Delivery 8/22/2010

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

2. Article Number 7010 3090 0000 2337 4911  
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

NSH

102595-02-M-1540



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

For delivery information visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Total Postage Westway Petro

Sent To Suite 600  
 4514 Cole Avenue

Street, Apt. No. Dallas, TX 75205  
 or PO Box No.

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:

McBride Oil & Gas Corporation  
 PO Box 1515  
 Roswell, New Mexico 88202

2. Article Number  
 (Transfer from service label)

7010 3090 0000 2337 4867

PS Form 3811, February 2004

Domestic Return Receipt

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee  
*Tasia Starnes*

B. Received by (Printed Name) C. Date of Delivery  
*Tasia Starnes* 8-20-12

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

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:

Westway Petro  
 Suite 600  
 4514 Cole Avenue  
 Dallas, TX 75205

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☐ Agent ☐ Addressee  
*Benjamin A. Feard*

B. Received by (Printed Name) C. Date of Delivery  
*Benjamin A. Feard* 8-20

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

6440 N. CENTRAL  
 # 308  
 DALLAS, TX 75206

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  
 (Transfer from service label) 7010 3090 0000 2337 4850

PS Form 3811, February 2004

Domestic Return Receipt

N6H

102595-02-M-1540

U.S. Postal Service<sup>TM</sup>  
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For delivery information visit our website at [www.usps.com](http://www.usps.com).

**OFFICIAL USE**

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	

Total Postage McBride Oil & Gas Corporation

Sent To PO Box 1515  
 Roswell, New Mexico 88202

Street, Apt. No.  
 or PO Box No.

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:

First National Bank of Roswell, Trustee  
of the Earlene Cass Tweedy Living Trust  
PO Box 1857  
Roswell, New Mexico 88202

# 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  
If YES, enter delivery address below: ☐ No

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  
(Transfer from service label)

7010 3090 0000 2337 4874

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

# U.S. Postal Service<sup>TM</sup> CERTIFIED MAIL<sup>TM</sup> RECEIPT

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OFFICIAL USE

Postage \$  
Certified Fee  
Return Receipt Fee (Endorsement Required)  
Restricted Delivery Fee (Endorsement Required)

Total Postage & I

First Century Oil, Inc.

Sent To

Charles B. Read, President

Street, Apt. No.,  
or PO Box No.

PO Box 1518

City, State, ZIP+4

Roswell, New Mexico 88202

PS Form 3800, August 2006

See Reverse for Instructions

# U.S. Postal Service<sup>TM</sup> CERTIFIED MAIL<sup>TM</sup> RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

OFFICIAL USE

Postage \$  
Certified Fee  
Return Receipt Fee (Endorsement Required)  
Restricted Delivery Fee (Endorsement Required)

Total Postage & I

First National Bank of Roswell, Trustee  
of the Earlene Cass Tweedy Living Trust  
PO Box 1857

Sent To

Roswell, New Mexico 88202

Street, Apt. No.,  
or PO Box No.

City, State, ZIP+4

PS Form 3600, 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:

First Century Oil, Inc.  
Charles B. Read, President  
PO Box 1518  
Roswell, New Mexico 88202

2. Article Number  
(Transfer from service label)

7010 3090 0000 2337 4942

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

# 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  
If YES, enter delivery address below: ☐ No

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:

Laura Salinas Tubio  
12765 SW 34<sup>th</sup> Place  
Davie, Florida 33330

2. Article Number  
(Transfer from service label)

7010 3090 0000 2337 4904

PS Form 3811, February 2004

Domestic Return Receipt

NOK

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*L. Tubio*

C. Date of Delivery

*8-18-12*

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

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

U.S. Postal Service

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(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage \$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees \$

Sent To

Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

Street, Apt. No.,  
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7010 3090 0000 2337 4935

U.S. Postal Service

**CERTIFIED MAIL RECEIPT**

(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage \$

Certified Fee

Return Receipt Fee  
(Endorsement Required)

Restricted Delivery Fee  
(Endorsement Required)

Total Postage & Fees \$

Sent To

Laura Salinas Tubio  
12765 SW 34<sup>th</sup> Place  
Davie, Florida 33330

Street, Apt. No.,  
or PO Box No.

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:

Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

2. Article Number  
(Transfer from service label)

7010 3090 0000 2337 4935

PS Form 3811, February 2004

Domestic Return Receipt

NOK

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*Gregory Salinas*

C. Date of Delivery

*8/18/12*

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

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

7010 3090 0000 2337 4904



## 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:

John Sullivan Salinas  
c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

## COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☒ Addressee  
*Beverly Foster*  
B. Received by (Printed Name) *Beverly Foster* C. Date of Delivery *8/10/06*  
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) ☐ Yes2. Article Number  
(Transfer from service label)

7010 3090 0000 2337 4928

PS Form 3811, February 2004

Domestic Return Receipt *NGH*

102595-02-M-1540

U.S. Postal Service

## CERTIFIED MAIL RECEIPT

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For delivery information visit our website at [www.usps.com](http://www.usps.com).

OFFICIAL USE

Postage \$  
Certified Fee  
Return Receipt Fee (Endorsement Required)  
Restricted Delivery Fee (Endorsement Required)

Postmark  
Here

Total Postage &amp; Fees

Gabriela Louise Salinas

Sent To

c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

Street, Apt. No.,  
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal Service

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(Domestic Mail Only; No Insurance Coverage Provided)

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OFFICIAL USE

Postage \$  
Certified Fee  
Return Receipt Fee (Endorsement Required)  
Restricted Delivery Fee (Endorsement Required)

Postmark  
Here

Total Postage John Sullivan Salinas  
c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

Sent To  
Street, Apt. No.,  
or PO Box No.  
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:

Gabriela Louise Salinas  
c/o Gregory Brian Salinas  
McCall, Parkhurst & Horton, LLP  
600 N. Congress, Suite 1800  
Austin, Texas 78701

2. Article Number  
(Transfer from service label)

7010 3090 0000 2337 4898

PS Form 3811, February 2004

Domestic Return Receipt *NGH*

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☒ Addressee  
*Beverly Foster*  
B. Received by (Printed Name) *Beverly Foster* C. Date of Delivery *8/10/06*  
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

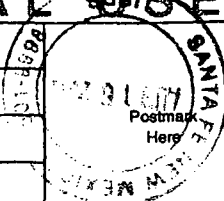


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**OFFICIAL USE**

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



Sent To: Mary Salinas Vanderlinden  
 460 Sierra Drive  
 Street, Apt. No., or PO Box No. Albuquerque, NM 87108  
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7010 3090 0000 2337 4812

James Bruce  
 P.O. Box 1056  
 Santa Fe, New Mexico 87504

**CERTIFIED MAIL<sup>TM</sup>**

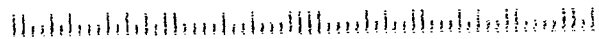
7010 3090 0000 2337 4812



Mary Salinas Vanderlinden  
 460 Sierra Drive  
 Albuquerque, NM 87108

NIXIE 871 SE 1 00 09/05/12  
 RETURN TO SENDER  
 UNCLAIMED  
 UNABLE TO FORWARD  
 BC: 87504105656 \*0568-06937-16-42

875041056  
 87108271980



7 NOTICE 09-11-12  
 ID NOTICE  
 RETURN

UNC

8-17-12  
 RJA



U.S. Postal Service<sup>TM</sup>  
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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

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

Sent To: Norma Glover Smith  
 305 West Country Club Road  
 Roswell, NM 88201

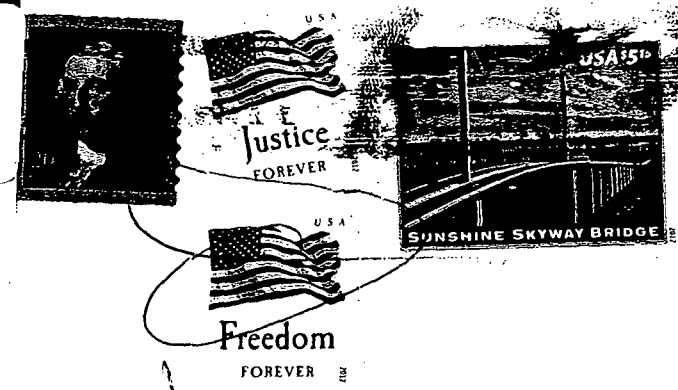
Street, Apt. No.,  
 or PO Box No.  
 City, State, ZIP+4

PS Form 3800, August 2005 See Reverse for Instructions

7010 3090 0000 2337 4829

James Bruce  
 P.O. Box 1056  
 Santa Fe, New Mexico 87504

7010 3090 0000 2337 4829

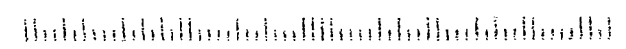


1ST NOTICE 8-20-12  
 2ND NOTICE \_\_\_\_\_  
 RETURN \_\_\_\_\_

Norma Glover Smith  
 305 West Country Club Road  
 Roswell, NM 88201

NIXIE 871 75 1 00 08/18/12  
 RETURN TO SENDER  
 ATTEMPTED - NOT KNOWN  
 UNABLE TO FORWARD  
 BC: 87504105656 \*0468-14986-16-42

87504@1056





7010 3090 0000 2337 4843

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
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New Mexico Oil Producers, Inc.  
Sent To: P.O. Box 1498  
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City, State, ZIP+4:

PS Form 3800, August 2006 See Reverse for Instructions

James Bruce  
P.O. Box 1056  
Santa Fe, New Mexico 87504

7010 3090 0000 2337 4843

NOTICE  
RETURN  
09-22-12

Kenneth Reynolds  
New Mexico Oil Producers, Inc.  
P.O. Box 1498  
Roswell, NM 88202



AUG 17 2012

NIXIE 871 SE 1 00 08/21/12  
RETURN TO SENDER  
ATTEMPTED - NOT KNOWN  
UNABLE TO FORWARD  
RC: 87504105656 \*0568-06676-16-A7

87504@1056  
88202149898



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PS Form 3800, August 2006

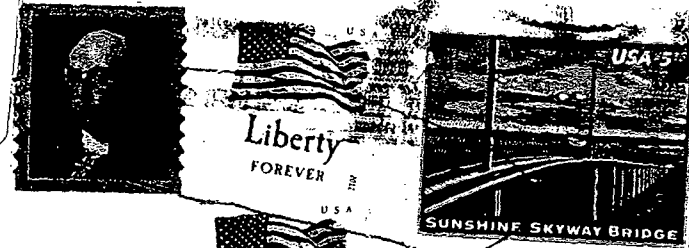
See Reverse for Instructions

James Bruce  
 P.O. Box 1056  
 Santa Fe, New Mexico 87504

7010 3090 0000 2337 4836

1ST NOTICE 8/20/12  
 2ND NOTICE \_\_\_\_\_  
 RETURN \_\_\_\_\_

Kenneth Reynolds  
 New Mexico Oil Producers, Inc.  
 1200 South Richardson  
 Roswell, NM 88201



Equality  
 FOREVER

NIXIE  
 871 76 1  
 RETURN TO SENDER  
 NOT DELIVERABLE AS ADDRESSED  
 UNABLE TO FORWARD  
 RC: 87504105656 \*0568-06366-15-42

87504@1056  
 68203557700



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](mailto:jamesbruc@aol.com)

September 13, 2012

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Earlene Cass Tweedy  
c/o First National Bank  
P.O. Box 1857  
Roswell, New Mexico 88202

Attention: Cynthia Green

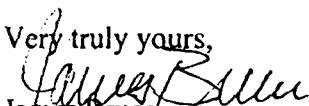
Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling and a non-standard oil spacing and proration unit, filed with the New Mexico Oil Conservation Division by Nadel and Gussman Heyco, LLC, regarding a well in the S½N½ of Section 20, Township 18 South, Range 26 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, October 4, 2012, 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 an owner of an interest that 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 the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, September 27, 2012. This statement must be filed with the Division's Santa Fe office at the above address, 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. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,

  
James Bruce

Attorney for Nadel and Gussman Heyco, LLC



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- 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:

Earlene Cass Tweedy  
c/o First National Bank  
P.O. Box 1857  
Roswell, New Mexico 88202

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☐ Agent  
X *[Signature]* ☐ Addressee

B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9/19/2002*

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 ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number  
(Transfer from service label)

7008 1140 0003 5881 0912

PS Form 3811, February 2004

Domestic Return Receipt

*AKH*

102595-02-M-1540

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

Postmark  
Here

Sent To *Earlene Cass Tweedy*  
*c/o First National Bank*  
Street, Apt. No.,  
or PO Box No. *P.O. Box 1857*  
City, State, ZIP+4 *Roswell, New Mexico 88202*

PS Form 3800, August 2006

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