



**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)

May 21, 2013

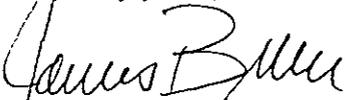
To: Persons on Exhibit A

Enclosed is a copy of an application for a non-standard well unit, compulsory pooling, and an unorthodox well location, filed with the New Mexico Oil Conservation Division by Nearburg Exploration Company, L.L.C., regarding the S $\frac{1}{2}$ NE $\frac{1}{4}$  of Section 17, Township 17 South, Range 37 East, N.M.P.M., Lea County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, June 13, 2013, 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 Rule 1208.B to file a Pre-Hearing Statement no later than Thursday, June 6, 2013. 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 Nearburg Exploration Company, L.L.C.

EXHIBIT **A**

EXHIBIT A

Chevron U.S.A. Inc.  
15 Smith Road  
Midland, Texas 79705

Chesapeake Energy Corporation  
6100 North Western Avenue  
Oklahoma City, Oklahoma 73118

OXY USA WTP LP  
P.O. Box 4294  
Houston, Texas 77210

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

- 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.

A. Signature  
**X RECEIVED**  Agent  Addressee

B. Received by (Printed Name) **MAY 24 2013** C. Date of Delivery

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below  
**MAILROOM 17**

3. Service Type  
 Certified Mail  Express Mail  
 Registered  Return Receipt for Merchandise  
 Insured Mail  C.O.D.

4. Restricted Delivery? (Extra Fee)  Yes

1. Article Addressed to:  
  
 Chesapeake Energy Corporation  
 6100 North Western Avenue  
 Oklahoma City, Oklahoma 73118

2. Article Number: **7012 0470 0001 5975 3481**  
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt **NPL SM-1** 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)

**MIDLAND TX 79705** **OFFICIAL USE**

Postage	\$ 0.66	0500
Certified Fee	\$3.10	03
Return Receipt Fee (Endorsement Required)	\$2.55	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.31	05/21/2013

Sent To: **Chevron U.S.A. Inc.**  
 15 Smith Road  
 Midland, Texas 79705  
 Street, Apt. No., or PO Box No.  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5975 3474

**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)

**OKLAHOMA CITY OK 73118** **OFFICIAL USE**

Postage	\$ 0.66	0500
Certified Fee	\$3.10	03
Return Receipt Fee (Endorsement Required)	\$2.55	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 6.31	05/21/2013

Sent To: **Chesapeake Energy Corporation**  
 6100 North Western Avenue  
 Oklahoma City, Oklahoma 73118  
 Street, Apt. No., or PO Box No.  
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions

7012 0470 0001 5975 3481

**SENDER: COMPLETE THIS SECTION**

**COMPLETE THIS SECTION ON DELIVERY**

- 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.

A. Signature  
**X** *Chesapeake Energy*  Agent  Addressee

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

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

1. Article Addressed to:  
  
 Chevron U.S.A. Inc.  
 15 Smith Road  
 Midland, Texas 79705

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: **7012 0470 0001 5975 3474**  
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt **NPL SM-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:

OXY USA WTP LP  
P.O. Box 4294  
Houston, Texas 77210

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]*  Agent  Addressee

B. Received by (Printed Name) \_\_\_\_\_ C. Date of Delivery 5-27-13

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 7012 0470 0001 5975 3498  
(Transfer from service label)

7012 0470 0001 5975 3498

**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)

HOUSTON, TX 77210

Postage	\$ 0.66	0500
Certified Fee	\$3.10	03
Return Receipt Fee (Endorsement Required)	\$2.55	Postmark Here
Restricted Delivery Fee (Endorsement Required)	\$0.00	MAY 2 2013
Total Postage & Fees	\$ 6.31	05/21/2013

Sent To: OXY USA WTP LP  
P.O. Box 4294  
Houston, Texas 77210

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

PS Form 3800, August 2006 See Reverse for Instructions