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

APPLICATION OF MEWBOURNE OIL COMPANY FOR COMPULSORY POOLING AND AN UNORTHODOX GAS WELL LOCATION, EDDY COUNTY, NEW MEXICO.

Case No. 15,171

AFFIDAVIT OF NOTICE

COUNTY OF S	
STATE OF NE) ss. W MEXICO)
James B	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 Mewbourne Oil Company.
	Mewbourne Oil Company has conducted a good faith, diligent effort to find the rect addresses of the interest owners entitled to receive notice of the application
	Notice of the application was provided to the interest owners, at their last known ertified mail. Copies of the notice letter and certified return receipts are attached hment A.
5. 19.15.4.9 and 1	Applicant has complied with the notice provisions of Division Rules NMAC 9.15.4.12.C. James Bruce
	CRIBED AND SWORN TO before me this day of July, 2014 by James
Bruce. My Commission	OFFICIAL SEAL KERRIE C. ALLEN Notary Public State of New Mexico My Commission Expires 10 20 11 Notary Public
	Oil Conservation Division Case No Exhibit No

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)

iamesbruc@aol.com

June 19, 2014

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is an application for compulsory pooling, etc., filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding a well in the E½ of Section 35, Township 23 South, Range 28 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, July 10, 2014, 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 the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this 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, July 3, 2014. 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,

ames Bruce

Attorney for Mewbourne Oil Company

Attachment ____



Mary Jo Dickerson P.O. Box 642 Glenpool, OK 74033

LBD, a Limited Partnership P.O. Box 686 Hobbs, NM 88240

Magdalene P. Panagopoulos and Panagiota P. Panagopoulos 10008 Ranch Hand Ave. Las Vegas, NV 89117

First Federal Savings and Loan Association P.O. Box 1390 Littlefield, TX 79339

Laura Meade 611 N. Mesa Ave. Carlsbad, NM 88203

Estate of Stan Gregory 608 Lakeside Dr. Carlsbad, NM 88220 Attn: Kathy Gregory

Willis A. Paschal Trust No. 1 P.O. Box 98 Luray, KS 67649

Mr. James W. Klipstine and Klipstine & Hanratty 1601 N. Turner, Suite 400 Hobbs, NM 88240

Clarence Ervin and the Estate of Mary I. Ervin 4016 Jones St. Carlsbad, NM 88220

Mr. Kevin Hanratty P.O. Box 1330 Artesia, NM 88211

Mr. Nolan Greak 8008 Slide Road, Suite #33 Lubbock, TX 79424 Mr. Neville Manning 2112 Indiana Lubbock, TX 79410

Wells Fargo Bank, N.A. 2318 W. Pierce St. Carlsbad, NM 88220

Bonnie R. Gregory and Irma J. Gregory 14 Cork St. Alva, FL 33920

Mr. Thomas W. Gregory 1705 Black Gold St., SE Albuquerque, NM 87123

Mr. Pavlos P. Panagopoulos, Panagopoulos Enterprises and Andreas P. Panagopoulos 511 W. Reinken Ave. Belen, NM 87002

Mr. William E. Gregory 11910 Central Ave., SE, Suite B Albuquerque, NM 87123

Virginia Lee Davis address unknown

John Edward Hall, III address unknown

Bertha Lorene Osborn address unknown

Ralph V. Robinson address unknown

Childs & Bishop Law Office, Inc. address unknown

Charles L. Reitenger address unknown

Jonathan D. Knoerdel address unknown

U.S. Postal Service To CERTIFIED MAIL TO RECEIRT (Damestic Mail Only; No Insurance Coverage Provided) 10 4 For delivery information visit our website at www.uspa.com 2013 3020 0000 4633 Postage Certified Fee p., . Postmark Return Receipt Fee (Endorsement Required) Here Restricted Delivery Fee (Endorsement Required) Total Postage & Fees \$ Sent To Willis A. Paschal Trust No. 1 Street, Apt. No.; P.O. Box 98 Luray, KS 67649 or PO Box No. City, State, ZIP+4 PS Form 3800 August 2006 1 See Reverse for Instructions

SENDER: COWPLET USSECTION 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 mailplece, or on the front if space permits. 1. Article Addressed to: Estate of Stan Gregory 608 Lakeside Dr. 608 Carlsbad, NM 88220	A. Signature A. Signature A. Signature A. Signature A. Signature A. Signature A. Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 1? Yes In Septice Type C. Date of Delivery Priority Mail Express Registered Registered Registered Registered Collect on Delivery A. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label) 7013 30 PS Form 3811, July 2013 Domesti	20 0000 4633 9506 c Return Receipt M \$

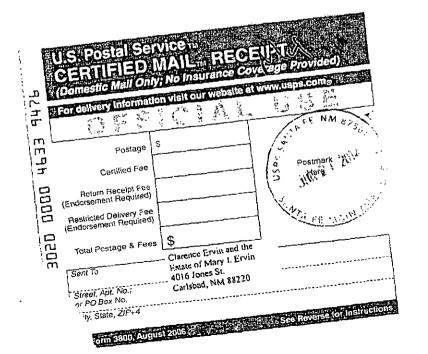
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	3. Service Type □ Certified Mail* □ Priority Mail Express** □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery 4. Restricted Delivery? (Extra Fee) □ Yes
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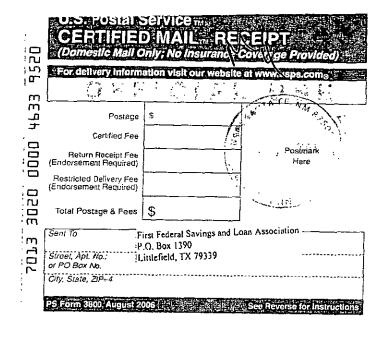
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1,0	City, Stale, ZIP+4 PS Form 3800, August 2	Attn: Kathy Gregory	e for instructions



SENDER: COMPLET 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.	A. Signeture Addressee B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 17 Yes If YES, enter delivery address below: No
1. Article Addressed to: Charence Ervin and the Estate of Mary 1. Ervin 4016 Jones St. Carlsbad, NM 88220	3. Service Type Certified Mail® Priority Mail Express® Registered Return Receipt for Merchandise Insured Mail Collect on Delivery 4. Restricted Delivery? (Extra Fee) Yes
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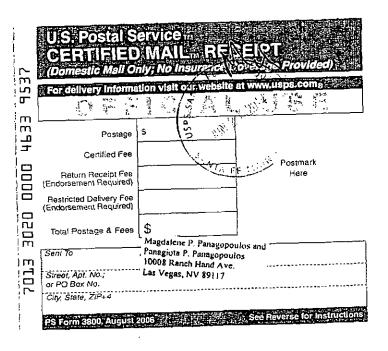
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1. Article Addressed to: Laura Meade 611 N. Mess Ave. 1 Carlsbad, NM 88203	If YES, enter delivery address below: No
	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes
Article Number 7013 3 (Transfer from service label)	020 0000 4633 9513
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SENDER: COMPLET THIS SECTION	COMPLETE THIS SECTION ON DELIVERY A. Signature
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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.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. is delivery address different from item 17
Magdalene P. Panagopoulos and Panagiota P. Panagopoulos 10008 Ranch Hand Ave.	
Las Vegas, NV 89117	3. Service Type ☐ Certified Mail ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
	4. Restricted Delivery? (Extra Fee) ☐ Yes
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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: First Federal Savings and Loan Association = P.O. Box 1390	A Signature A Signature A Agent Addressee B. Becelved by (Printed Name) C. Date of Delivery 23-14 D. Is delivery address different from item 1? If YES, enter delivery address below:
j	3. Service Type ID Certified Mail* ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery
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ED MAIL RECEIPT 15 SENDER: COMPLE Ū, COMPLETE THIS SEC ON DELIVERY 'm A. Signature ■ Complete items 1, 2, and 3. Also complete س . □ Agent item 4 if Restricted Delivery is desired. 7 Postage ☐ Addressee Print your name and address on the reverse Certified Fee so that we can return the card to you. C. Date of Delivery 000 B. Received by (Printed Name) Attach this card to the back of the mailpiece, Return Receipt Fee (Endorsement Required) 23 or on the front if space permits. ☐ Yes D. Is delivery address different from item 17 Restricted Delivery Fee (Endorsement Required) 1. Article Addressed to: ☐ No If YES, enter delivery address below: 3020 Total Postage & Fees Mr. Thomas W. Gregory Mr. Pavlos P. Panagopoulos, 1705 Black Gold St., SE ļm Albuquerque, NM 87123 Panagopoulos Enterprises and Street, Apt. No. Andreas P. Panagopoulos 3. Septice Type or PO Box No. 511 W. Reinken Ave. Belen, NM 87002 Certified Mail® City, State, Zip. 4 ☐ Priority Mail Express** ☐ Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes 7013 3020 0000 4633 9414 2. Article Number (Transfer from service label) PS Form 3811, July 2013 Domestic Return Receipt SENDER: COMPLE ON DELIVERY U.S. Postal Service ... ■ Complete items 1, 2; and 3. Also complete Agent item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse Addressee so that we can return the card to you. 1 # Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. m D. Is delivery address different from item 1? m 1. Article Addressed to: If YES, enter delivery address below: Postage ம Certified Fee Mr. Pavlos P. Panagopoulos, 000 Return Receipt Fee Panagopoulos Enterprises and (Endorsement Required) Andreas P. Panagopoulos Restricted Delivery Fee 511 W. Reinken Ave. (Endorsemen: Required) Belen, NM 87002 3. Service Type ∃ru Certified Mail® □ Priority Mail Express™ Total Postage & Fees 品 Return Receipt for Merchandise ☐ Registered ☐ Insured Mail ☐ Collect on Delivery Sent To m

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City, State, ZIP+4

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Domestic Return Receipt

2. Article Number

(Transfer from service label) PS Form 3811, July 2013

. Mr. Thomas W. Gregory

1705 Black Gold St., SE

Albuquerque, NM 87123

PS Form 3800, August 2006 2007 See Reverse for instruction

U.S. Postal Service ...

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D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
3. Service Type □ Certified Mail® □ Priority Mail Express™ □ Registered □ Return Receipt for Merchandise □ Insured Mail □ Collect on Delivery 4. Restricted Delivery? (Extra Fee) □ Yes
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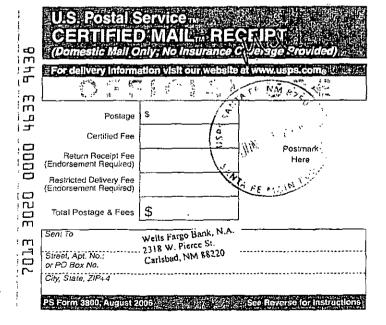
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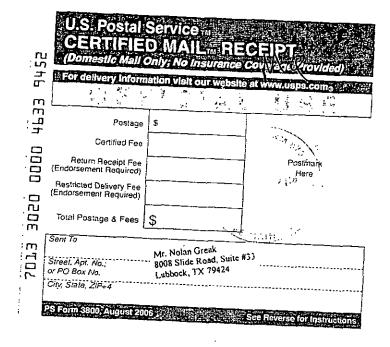
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SENDER: COMPLET ISSECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 1. Article Addressed to: Well's Fargo Bank, N.A. Well's Fargo Bank, N.A. Well's Fargo Bank, N.A. Carlsbad, NM 88220	A. Signature A. Signature A. Signature Addressee B. Received by (Printed Name) C. Date of Delivery C. Date of Delivery D. Is delivery address different from item 17 Yes If YES, enter delivery address below: No 3. Sepvice Type Certified Mall Registered Registered Insured Mall Collect on Delivery 4. Restricted Delivery? (Extra Fee) Yes
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8008 Slide Road, Suite #33 Lubbock, TX 79424	3. Service Type ☐ Certified Mail® ☐ Priority Mail Express™ ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ Collect on Delivery 4. Restricted Delivery? (Extra Fee) ☐ Yes
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Mr. James W. Klipstine and Klipstine & Hanratty 1601 N. Turner, Suite 400 Hobbs, NM 88240	3. Service Type Certified Mail Priority Mail Express* Registered Return Receipt for Merchandise Insured Mail Collect on Delivery
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(Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

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Sant To
Mary Ju Dickerson
P.O. Box 642
Street, Apt. No.; Glenpool, OK 74033
or PO Box No.

City, State, ZiPt-4

PS Form \$800, August 2006

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