

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

**APPLICATION OF CAZA OPERATING, LLC  
FOR APPROVAL OF A LEASE PRESSURE  
MAINTENANCE PROJECT, EDDY COUNTY,  
NEW MEXICO.**

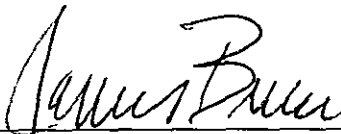
**Case No. 15,235**

**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 Caza Operating, LLC.
3. Caza Operating, LLC 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 receipt are attached hereto as Attachment A.
5. Applicant has complied with the notice provisions of Division Rules and Regulations.

  
\_\_\_\_\_  
James Bruce

SUBSCRIBED AND SWORN TO before me this 19<sup>th</sup> day of November, 2014 by  
James Bruce.

My Commission Expires



  
\_\_\_\_\_  
Notary Public

Oil Conservation Division  
Case No. 6  
Exhibit No. 6

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)

October 31, 2014

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

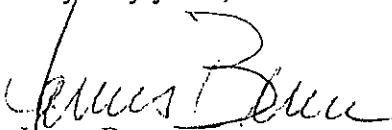
Ladies and gentlemen:

Enclosed is a copy of an application filed with the New Mexico Oil Conservation Division by Caza Operating, LLC requesting approval of a lease pressure maintenance project in State Lease VB-1139 by the injection of produced water into the upper Delaware formation at the approximate depths of 3315-3337 feet subsurface in the Forehand Ranch 27 State Well No. 4, located 1980 feet from the north line and 660 feet from the east line (the SE/4NE/4) of Section 27, Township 23 South, Range 27 East, NMPM, Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, November 20, 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 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, November 13, 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,

  
James Bruce

Attorney for Caza Operating, LLC

Attachment A

Exhibit A

Commissioner of Public Lands  
P.O. Box 1148  
Santa Fe, New Mexico 87504

Chevron U.S.A.  
1400 Smith Street  
Houston, Texas 77002

Merit Management Partners IV, L.P.  
Suite 500  
13727 Noel Road  
Dallas, Texas 75240

The Allar Company  
P.O. Box 1567  
Graham, Texas 76450

**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:

Merit Management Partners IV, L.P.  
Suite 500  
13727 Noel Road  
Dallas, Texas 75240

2. Article Number  
(Transfer from service label) 7013 3020 0000 4634 0564

PS Form 3811, July 2013 Domestic Return Receipt *Loga*

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *x Darnelle Warner* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Darnelle Warner* C. Date of Delivery *11/7/14*

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

**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**  
GRAHAM TX 76450

Postage	\$ 2.45	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 8.45	

Sent To The Allar Company  
P.O. Box 1567  
Graham, Texas 76450

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

PS Form 3800, August 2006 See Reverse for Instructions

7013 3020 0000 4634 0571

**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**  
DALLAS TX 75240

Postage	\$ 2.45	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 8.45	

Sent To Merit Management Partners IV, L.P.  
Suite 500  
13727 Noel Road  
Dallas, Texas 75240

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

PS Form 3800, August 2006 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

The Allar Company  
P.O. Box 1567  
Graham, Texas 76450

2. Article Number  
(Transfer from service label) 7013 3020 0000 4634 0571

PS Form 3811, July 2013 Domestic Return Receipt *Loga*

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *x Sheila Burt* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *Sheila Burt* C. Date of Delivery *11/6/14*

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

7013 3020 0000 4634 0557

**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 77002 OFFICIAL USE**

Postage	\$ 2.45	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 8.45	

Sent To: Chevron U.S.A.  
 Street, Apt. No., or PO Box No.: 1400 Smith Street  
 City, State, ZIP+4: Houston, Texas 77002

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:

Commissioner of Public Lands  
 P.O. Box 1148  
 Santa Fe, New Mexico 87504

## 2. Article Number

(Transfer from service label)

7013 3020 0000 4634 0540

PS Form 3811, July 2013

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

☐ 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™ ☐ Priority Mail Express™☒ Registered ☒ Return Receipt for Merchandise☐ Insured Mail ☐ Collect on Delivery

## 4. Restricted Delivery? (Extra Fee)

☐ Yes

Domestic Return Receipt

## 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:

Chevron U.S.A.  
 1400 Smith Street  
 Houston, Texas 77002

## 2. Article Number

(Transfer from service label)

7013 3020 0000 4634 0557

PS Form 3811, July 2013

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

☐ Agent☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf 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

**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**

SANTA FE NM 87504

Postage	\$ 2.45	0500
Certified Fee	\$3.30	16 Postmark Here
Return Receipt Fee (Endorsement Required)	\$2.70	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$ 8.45	

## Sent To

Commissioner of Public Lands  
 P.O. Box 1148  
 Santa Fe, New Mexico 87504

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

PS Form 3800, August 2006 See Reverse for Instructions

0450 4634 0000 3020 0557