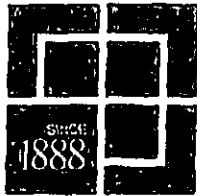


NEWLY-IDENTIFIED AFFECTED PERSONS

Company	Address	City	State	Zip
Khody Land & Minerals Company	210 Park Avenue, Suite 900	Oklahoma City	OK	73102
RKI Exploration & Production, LLC	210 Park Avenue, Suite 700	Oklahoma City	OK	73102
Lazy T Royalty Management, LLC	3300 South 14 th Street, Suite 322	Abilene	TX	79605
Crump Energy Partners II, LLC	4000 North Big Spring Street, Suite 310	Midland	TX	79705

OCD Case No. 15322
KEY ENERGY
Exhibit #28



hinklelawfirm.com

HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER

Gary W. Larson,
Partner

glarson@hinklelawfirm.com

July 29, 2015

VIA CERTIFIED MAIL - RETURN RECEIPT REQUESTED

Khody Land & Minerals Company
210 Park Avenue, Suite 900
Oklahoma City, OK 73102

Re: Key Energy Services, LLC NMOCD Application

Dear Madam/Sir:

This is to notify you that (i) Key Energy Services, LLC ("Key") has filed an application with the New Mexico Oil Conservation Division ("the Division") for authorization to inject produced water into the Grace Carlsbad #001 well (API 30-015-20573) for disposal, and (ii) a hearing on Key's application will be held on August 20, 2015. The Grace Carlsbad #001 well is located in Unit Letter I, Section 36, Township 22 South, Range 26 East, N.M.P.M., Eddy County, New Mexico.

Enclosed is a flash drive which contains Key's complete application. Should you have any questions about the application, please contact Key's consultant, Wayne Price of Price LLC, at 505.715.2809 or wayneprice77@earthlink.net.

The hearing in this matter (Division Case No. 15322) will commence at 8:15 a.m. on Thursday, August 20th in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend the hearing, but as an owner of an interest that may be affected by Key's application, you may appear at the hearing and present testimony. If you do not appear at that time and become a party of record you will be precluded from contesting the matter at a later date.

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, August 13, 2015. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: (i) the names of the party and the party's attorney; (ii) a concise statement of the case; (iii) the name(s) of the witness(es) the party will call to testify at the hearing; (iv) the approximate amount of time the party will need to present the party's case; and (v) an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me as counsel for Key.

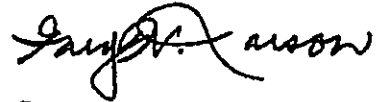
PO BOX 10
ROSWELL, NEW MEXICO 88202
575-622-6510
(FAX) 575-623-9332

PO BOX 1720
ARTESIA, NEW MEXICO 88210
575-622-6510
(FAX) 575-746-6316

PO BOX 2068
SANTA FE, NEW MEXICO 87504
505-982-4554
(FAX) 505-982-8623

Thank you for your attention to this matter.

Very truly yours,

A handwritten signature in black ink, appearing to read "Gary W. Larson". The signature is fluid and cursive, with the first name "Gary" and last name "Larson" clearly distinguishable.

Gary W. Larson

GWL/sm

Enclosure

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p><input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p><input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;">Khody Land & Mineral Co 210 Park Ave, Ste. 900 Oklahoma City, OK 73102</p>	<p>A. Signature X </p> <p style="text-align: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p style="text-align: center; font-weight: bold; font-size: 1.2em;">RECEIVED</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7012 0470 0001 5963 5428</p> <p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

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<p><input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p><input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;">RKI Exploration & Production 210 Park Ave, Ste. 700 Oklahoma City, OK 73102</p>	<p>A. Signature X </p> <p style="text-align: right;"><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7012 0470 0001 5963 2472</p> <p>PS Form 3811, July 2013 Domestic Return Receipt</p>	

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<p><input type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p><input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="font-size: 1.2em; margin-left: 20px;">Lazy T Royalty Mgmt. 3300 South 14th St. Suite 322 Abilene, TX 79605</p>	<p>A. Signature X </p> <p style="text-align: right;"><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) </p> <p>C. Date of Delivery 8/3/15</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label) 7012 0470 0001 5963 2465</p>	