

JAMES BRUCE
ATTORNEY AT LAW

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SANTA FE, NEW MEXICO 87504

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jamesbruc@aol.com

January 8, 2016

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

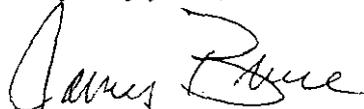
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit, *etc.*, filed with the New Mexico Oil Conservation Division by Caza Petroleum, Inc., regarding a Bone Spring well in the W $\frac{1}{2}$ W $\frac{1}{2}$ of Section 19, Township 20 South, Range 35 East, N.M.P.M., Lea County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, February 4, 2016, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **As an offset operator or lessee**, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify (in writing) the Division, and the undersigned, by Thursday, January 28, 2016 if you intend to participate in the hearing.

Very truly yours,



James Bruce

Attorney for Caza Petroleum, Inc.

Attachment



EXHIBIT A

Jupiter JV LP
Suite 3300
301 Commerce Street
Fort Worth, Texas 76102

Legacy Reserves Operating LP
Suite 1800
303 West Wall Street
Midland, Texas 79701

Cimarex Energy Co. of Colorado
Suite 600
600 North Marienfeld
Midland, Texas 79701

Nearburg Producing Company
Building 2, Suite 120
3300 North "A" Street
Midland, Texas 79705

BTA Oil Producers, LLC
104 South Pecos
Midland, Texas 79701

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Legacy Reserves Operating LP
Suite 1800
303 West Wall Street
Midland, Texas 79701

9590 9402 1240 5246 2009 49

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0066

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

[Signature]

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

AREN INGLE

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

3. Service Type

Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation™ Restricted Delivery (over \$500)

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OFFICIAL USE

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

Postmark Here

Sent to: Nearburg Producing Company
Building 2, Suite 120
3300 North "A" Street
Midland, Texas 79705

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

7012 0470 0001 5955 0042

7012 0470 0001 5955 0066

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OFFICIAL USE

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

Postmark Here

Sent to: Legacy Reserves Operating LP
Suite 1800
303 West Wall Street
Midland, Texas 79701

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

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- 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:

Nearburg Producing Company
Building 2, Suite 120
3300 North "A" Street
Midland, Texas 79705

9590 9402 1240 5246 2009 25

2. Article Number (Transfer from service label)

7012 0470 0001 5955 0042

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee

[Signature]

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

Adult Signature Priority Mail Express®
 Adult Signature Restricted Delivery Registered Mail™
 Certified Mail® Registered Mail Restricted Delivery
 Certified Mail Restricted Delivery Return Receipt for Merchandise
 Collect on Delivery Signature Confirmation™
 Collect on Delivery Restricted Delivery Signature Confirmation™ Restricted Delivery (over \$500)

CZ

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 		<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <u>1-11-16</u></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>1. Article Addressed to:</p> <p>Cimarex Energy Co. of Colorado Suite 600 600 North Marienfeld Midland, Texas 79701</p>		<p>3. Service Type</p> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 1240 5246 2009 32</p> <p>7012 0470 0001 5955 0059</p>		<p>Restricted Delivery (over \$500)</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 CZ Domestic Return Receipt</p>			

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<p>For delivery information visit our website at www.usps.com</p> <p>OFFICIAL USE</p>	
<p>Postage \$ _____</p> <p>Certified Fee _____</p> <p>Return Receipt Fee (Endorsement Required) _____</p> <p>Restricted Delivery Fee (Endorsement Required) _____</p> <p>Total Postage & Fees \$ _____</p>	<p>Postmark Here</p> <p>USPS SANTIAGO NM 87505</p>
<p>Sent To</p> <p>Street, Apt. No., or PO Box No.</p> <p>City, State, ZIP+4</p>	<p>Jupiter JV LP Suite 3300 301 Commerce Street Fort Worth, Texas 76102</p>
<p>PS Form 3800, August 2006 See Reverse for Instructions</p>	

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only, No Insurance Coverage Provided)	
<p>For delivery information visit our website at www.usps.com</p> <p>OFFICIAL USE</p>	
<p>Postage \$ _____</p> <p>Certified Fee _____</p> <p>Return Receipt Fee (Endorsement Required) _____</p> <p>Restricted Delivery Fee (Endorsement Required) _____</p> <p>Total Postage & Fees \$ _____</p>	<p>Postmark Here</p> <p>USPS MIDLAND TX 79701</p>
<p>Sent To</p> <p>Street, Apt. No., or PO Box No.</p> <p>City, State, ZIP+4</p>	<p>Cimarex Energy Co. of Colorado Suite 600 600 North Marienfeld Midland, Texas 79701</p>
<p>PS Form 3800, August 2006 See Reverse for Instructions</p>	

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<p>1. Article Addressed to:</p> <p>Jupiter JV LP Suite 3300 301 Commerce Street Fort Worth, Texas 76102</p>		<p>3. Service Type</p> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 1240 5246 2009 56</p> <p>7012 0470 0001 5955 0073</p>		<p>Restricted Delivery (over \$500)</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 CZ Domestic Return Receipt</p>			

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<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>LUIS SOSA</u></p> <p>C. Date of Delivery <u>1-12-16</u></p>														
<p>1. Article Addressed to:</p> <p>BTA Oil Producers, LLC 104 South Pecos Midland, Texas 79701</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>9590 9402 1240 5246 2009 18</p> <p>2. Article Number. (Transfer from service label) <u>7012 0470 0001 5955 0035</u></p>	<p>3. Service Type</p> <table border="0"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> all Restricted Delivery</td> <td></td> </tr> </table>	<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> all Restricted Delivery	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®														
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™														
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery														
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Return Receipt for Merchandise														
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™														
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery														
<input type="checkbox"/> all Restricted Delivery															

PS Form 3811, July 2015 PSN 7530-02-000-9053 CE Domestic Return Receipt

5955 0035 0001 0470 12

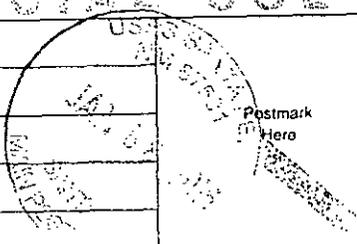
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Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Postmark Here



Sent To: BTA Oil Producers, LLC
Street, Apt. No., or PO Box No.: 104 South Pecos
City, State, ZIP+4: Midland, Texas 79701

PS Form 3800, August 2006 See Reverse for Instructions