### **PARALLEL** Petroleum Corporation

1004 North Big Spring, Suite 400 • Midland, TX 79701 • Ph: 432-684-3727 • Fax: 432-684-3905

November 6, 2006

#### Sent via CMRRR# 7006 0100 0001 2440 1846

Dominion Oklahoma Texas Exploration & Production, Inc. 1400 Quail Springs Parkway, Suite 600 Oklahoma City, OK 73124

Re: Personally 1525-33 No. 1 T-15-S, R-25-E Section 33: N/2 Chaves County, New Mexico

DIVISION CASE # 13864 EXHIBIT #----2175107

To Whom It May Concern:

Parallel Petroleum Corporation proposes the drilling of the abovecaptioned well to horizontally test the Wolfcamp formation in the N/2 of Section 33, Township 15 South, Range 25 East, N.M.P.M. in Chaves County, New Mexico. The well will be commenced at an off lease location in the NE/4 NE/4 of Section 32, Township 15 South, Range 25 East, N.M.P.M. and will be drilled to an approximate vertical depth of 4, 750'. The well will then be drilled horizontally to encounter the Wolfcamp objective at a legal location in the NW/4 NW/4 of Section 33 and to a projected orthodox terminus in the NE/4 NE/4 of Section 33.

This well will share a drilling pad with a well operated by Parallel Petroleum in the NE/4 NE/4 of Section 32, Township 15 South, Range 25 East, N.M.P.M. The cost of facilities used by both wells will be allocated equally.

Based on an examination of the mineral ownership records located in Chaves County, New Mexico, it appears that your interest in the proposed well would be 0.009482723%.

Enclosed please find an Authority for Expenditure estimating the cost of the proposed well. The total cost for the proposed well is estimated to be \$2,601,300.00. Please mark the appropriate space provided below indicating whether or not you intend to join in the drilling of the well. Should you elect to join in the drilling of the well you will be liable for your proportionate share of the actual cost of drilling which is estimated to be \$24,667.40. If you elect to join, please return a signed copy of the Authority for Expenditure. Additionally, if you elect to join, please furnish us with your well information requirements.

Yours, truly, Michael M. Gray Land Manager, New Mexico

### DOMINION OKLAHOMA TEXAS EXPLORATION AND PRODUCTION, INC.

ŧ

į

\_\_\_\_\_ I/We elect to participate in the proposed Personally 1525-33 No. 1 well and enclose an executed Authority for Expenditure.

\_\_\_\_ I/We elect not to participate in the proposed well.

# DOMINION OKLAHOMA TEXAS EXPLORATION AND PRODUCTION, INC.

By:

:

Name

Title:\_\_\_\_\_

Date:\_\_\_\_\_

## DOMINION OKLAHOMA TEXAS EXPLORATION AND PRODUCTION, INC.

\_\_\_\_\_ I/We elect to participate in the proposed Personally 1525-33 No. 1 well and enclose an executed Authority for Expenditure.

\_\_\_\_\_ I/We elect not to participate in the proposed well.

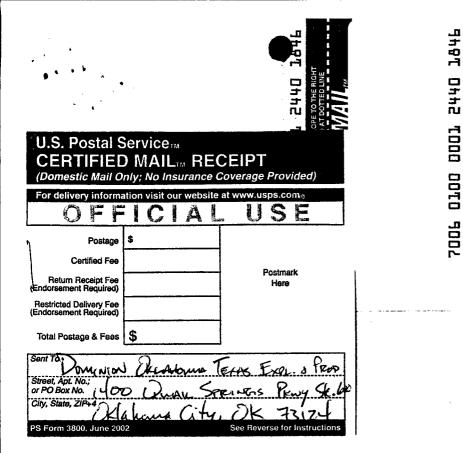
# DOMINION OKLAHOMA TEXAS EXPLORATION AND PRODUCTION, INC.

By:\_\_

y:\_\_\_\_\_ Name

Title:\_\_\_\_\_

Date:



2440 1846	CERTIFIED MAIL M RECEIPT (Dome. Aail Only; No Insurance Coverage Provided)								
	For delivery information visit our website at www.usps.com.								
H	OFF	; I (		A	L	USE			
ц.	Postage	\$							
1000	Certified Fee					Bestevende			
	Return Receipt Fee (Endorsement Required)					Postmark Here			
0100	Restricted Delivery Fee (Endorsement Required)								
1	Total Postage & Fees	\$							
7005	Sent Tà DOMINION OKLANDUNO TETAS EXPL & PROD Stroot ADI NO.; DE DO								
	City, State, 219+4 (Kahana City, DK 73124								
1	PS Form 3800, June 200	2				See Reverse for Instructions			

	1				· · · ·	
	SENDER: COMPLE	TE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY			
	item 4 if Restricted	2, and 3. Also complete d Delivery is desired. nd address on the reverse	A. Signature		Agent	
	so that we can reti	urn the card to you. the back of the mailpiece,	B. Received by (Printed	Name)	C. Date of Delivery	
	1. Article Addressed to:	Otlahama Peras	D. Is delivery address diff If YES, enter delivery			
er visale sussesses a sus deservationer and a sussessed	Exp. 3 At	Oklahama Terras 200., Inc. Sprincis Phury.		· .		
SENDER: COMPLETE TO Complete items 1, 2, an item 4 if Restricted Deliv	HIS SECTION	COMPLETE THIS SECTION C	3. Service Type		pt for Merchandise	
So that we have and add	ress on the man	A. Signature		tra Fee)	🗆 Yes	
<ul> <li>So that we can return the</li> <li>Attach this card to the bas</li> <li>or on the front if space point</li> </ul>		I a ma				
1 Article A Li		B. Received by (Printed Name) D. is delivery address different from if YES, enter delivery address different from	C. Date of Delivery		102595-02-M-1540	
Exp. 3 Acos.	-lahana Texas	If YES, enter delivery address	m item 1?  Yes below:  No			
1400 Quar Spr	einge Run					
ante (000		3 Sonia				
Ottabrone City, 2	DK 73124	3. Service Type Gertified Mail Express Registered Return Ru insured Mail C.O.D.	Mail eceipt for Merchandise			
Article Number		4. Restricted Delivery? (Extra Fool			11 <b>X</b>	
(Transfer from service label) S Form 3811, February 2004	7006 010	0 0001 2440 1846	U Yes			
2004 - 2004	Domestic Return	Receipt				
			102595-02-M-1540		· ,	