

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

**APPLICATION OF APOLLO ENERGY, L.P. FOR  
APPROVAL OF A WATERFLOOD PROJECT,  
EDDY COUNTY, NEW MEXICO.**

**Case No. 13,935**

**AFFIDAVIT OF NOTICE**

COUNTY OF SANTA FE     )  
  ) ss.  
STATE OF NEW MEXICO    )

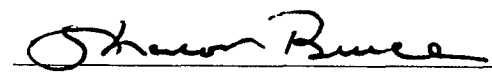
James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Apollo Energy, L.P., and have personal knowledge of the matters stated herein.
3. Applicant 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 correct addresses, by certified mail. Copies of the notice letters and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rule 1210.

  
James Bruce

SUBSCRIBED AND SWORN TO before me this 20th day of June, 2007 by James Bruce.

My Commission Expires: 3/14/09

  
Notary Public

Oil Conservation Division  
Case No. \_\_\_\_\_  
Exhibit No. 11

**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)

[jamesbruce@aol.com](mailto:jamesbruce@aol.com)

May 31, 2007

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

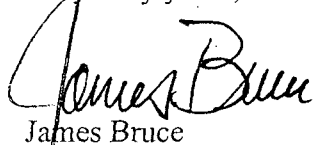
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application to institute a waterflood project, filed with the New Mexico Oil Conservation Division by Apollo Energy, L.P., regarding a federal lease covering parts of Sections 12, 13, and 14, Township 20 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, June 21, 2007, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. 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, June 14, 2007 if you intend to participate at the hearing.

Very truly yours,



James Bruce

Attorney for Apollo Energy, L.P.

EXHIBIT

**A**

EXHIBIT A

Bureau of Land Management  
620 East Greene Street  
Carlsbad, New Mexico 88220

Nordstrand Energy Inc.  
Suite 200  
3229 D'Amico Street  
Houston, Texas 77019

Thunderbolt Petroleum LLC  
P.O. Box 10523  
Midland, Texas 79702

OXY USA WTP Limited Partnership  
P.O. Box 50250  
Midland, Texas 79710

Oil Conservation Division  
1301 West Grand Avenue  
Artesia, New Mexico 88210

**U.S. Postal Service**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
*(Domestic Mail Only, No Insurance (Value Provided))*  
 For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

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

Sent to  
 Thunderbolt Petroleum LLC  
 P.O. Box 10323  
 Midland, Texas 79702  
 Street, Apt. No.,  
 or P.O. Box No.  
 City, State, ZIP+4

Postmark Here

See Reverse for Instructions

7006 3450 0001 4326 8744

**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:

Thunderbolt Petroleum LLC  
 P.O. Box 10323  
 Midland, Texas 79702

2. Article Number  
 (Transfer from service label) 7006 3450 0001 4326 8744

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *Renee Noe* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Renee Noe* C. Date of Delivery *6-5-07*

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

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

**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:

OXY USA WTP Limited Partnership  
 P.O. Box 50250  
 Midland, Texas 79710

2. Article Number  
 (Transfer from service label) 7006 3450 0001 4326 8737

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *R. Mitchell* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *R. Mitchell* C. Date of Delivery *6-5-07*

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

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

**U.S. Postal Service**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
*(Domestic Mail Only, No Insurance (Value Provided))*  
 For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

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

Sent to  
 OXY USA WTP Limited Partnership  
 P.O. Box 50250  
 Midland, Texas 79710  
 Street, Apt. No.,  
 or P.O. Box No.  
 City, State, ZIP+4

Postmark Here

See Reverse for Instructions

7006 3450 0001 4326 8744

**US 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**

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

Sent To Bureau of Land Management  
620 East Greene Street  
Carlsbad, New Mexico 88220

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

Postmark Here  
SANTA FE NM  
MAY 3 12 PM

PS Form 3800, August 2006 See Reverse for instructions

9728 9224 1000 054E 9002

**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:

Bureau of Land Management  
620 East Greene Street  
Carlsbad, New Mexico 88220

2. Article Number (Transfer from service label) 7006 3450 0001 4326 8768

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 6-11

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

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Transfer from service label) 7006 3450 0001 4326 8768

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

**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:

Nordstrand Energy Inc.  
Suite 200  
3229 D'Amico Street  
Houston, Texas 77019

2. Article Number (Transfer from service label) 7006 3450 0001 4326 8751

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery 6-3-07

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

3. Service Type  
☒ Certified Mail ☐ Express Mail  
☐ Registered ☐ Return Receipt for Merchandise  
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

**US 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**

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

Sent To Nordstrand Energy Inc.  
Suite 200  
3229 D'Amico Street  
Houston, Texas 77019

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

Postmark Here  
SANTA FE NM  
MAY 3 12 PM

PS Form 3800, August 2006 See Reverse for instructions

1528 9224 1000 054E 9002

**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:

Oil Conservation Division  
1301 West Grand Avenue  
Artesia, New Mexico 88210

2. Article Number  
(Transfer from service label)

7005 1160 0003 1171 9013  
PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

*Henric Montague*

☐ Agent

B. Received by (Printed Name)

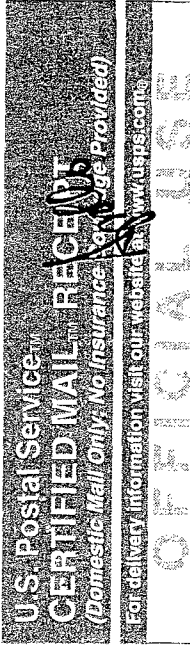
C. Date of Delivery

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

3. Service Type

- ☒ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No



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

Sent To

Oil Conservation Division  
1301 West Grand Avenue  
Artesia, New Mexico 88210  
or PO Box No.  
City, State, ZIP+4

PS Form 3800, June 2002 See Reverse for Instructions

5002 0911 0000 1171 7005