

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

**APPLICATION OF APACHE CORPORATION FOR  
AN EXCEPTION TO DIVISION ORDER NO. R-9922-E  
TO PERMIT A THIRD WELL ON A WELL UNIT, EDDY  
COUNTY, NEW MEXICO.**

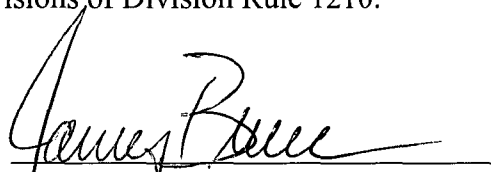
**Case No. 14,177**

**AFFIDAVIT OF NOTICE**

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

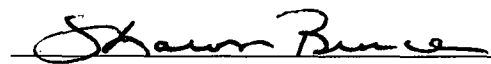
James Bruce, being duly sworn upon his oath, deposes and states:

1.     I am over the age of 18, and have personal knowledge of the matters stated herein.
2.     I am an attorney for Apache Corporation.
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 letter 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 20<sup>th</sup> day of August, 2008 by James Bruce.

My Commission Expires: 3/14/09

  
Notary Public

Oil Conservation Division  
Case No. \_\_\_\_\_  
Exhibit No. 2

**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)

July 31, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

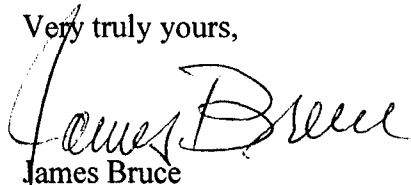
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application to allow an additional well in a well unit, filed with the New Mexico Oil Conservation Division by Apache Corporation, regarding a well in the E½ of Section 2, Township 22 South, Range 23 East, N.M.P.M., Eddy County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Wednesday, August 21, 2008, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an offset operator to or interest owner in the unit, 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, August 14, 2008 if you intend to participate in the hearing.

Very truly yours,



James Bruce

Attorney for Apache Corporation

EXHIBIT A

EXHIBIT A

Marathon Oil Company  
P.O. Box 3487  
Houston, TX 77253-3487

Yates Petroleum  
105 S. Fourth Street  
Artesia, NM 88210

Chevron USA Incorporated  
11111 South Wilcrest  
Houston, TX 77099

OXY USA WTP Limited Partnership  
OXY Permian Ltd.  
P.O. Box 4294  
Houston, TX 77210-4294

7006 3450 0001 4318 0213

**U.S. Postal Service**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only. No Insurance Coverage Provided)*

**OFFICIAL USE**

For delivery information visit our website at [www.usps.com](http://www.usps.com)

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

Sent to  
 Chemon USA Incorporated  
 11111 South Wilcrest  
 Houston, TX 77099  
 Street, Apt. No., or PO Box No.  
 City, State, ZIP+4

Postmark Here  
 JUL 31 2008  
 NM 87501

PS Form 3800, August 2006 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

2. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

3. Print your name and address on the reverse so that we can return the card to you.

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *M. Lane* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *M. Lane* ☐ Agent ☐ Addressee

C. Date of Delivery *7/31/08*

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

Chemon USA Incorporated  
 11111 South Wilcrest  
 Houston, TX 77099

2. Article Number  
 (Transfer from service label)

7006 3450 0001 4318 0213

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

2. Article Number  
 (Transfer from service label)

7006 3450 0001 4318 0237

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:

2. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

3. Print your name and address on the reverse so that we can return the card to you.

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature *CEE* ☒ Agent ☐ Addressee

B. Received by (Printed Name) *CEE* ☐ Agent ☐ Addressee

C. Date of Delivery *7/31/08*

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

Marathon Oil Company  
 P.O. Box 3487  
 Houston, TX 77253-3487

**U.S. Postal Service**  
**CERTIFIED MAIL™ RECEIPT**  
*(Domestic Mail Only. No Insurance Coverage Provided)*

**OFFICIAL USE**

For delivery information visit our website at [www.usps.com](http://www.usps.com)

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

Sent to  
 Marathon Oil Company  
 P.O. Box 3487  
 Houston, TX 77253-3487  
 Street, Apt. No., or PO Box No.  
 City, State, ZIP+4

Postmark Here  
 JUL 31 2008  
 USPS

PS Form 3800, August 2006 See Reverse for Instructions

7006 3450 0001 4318 0237

PS Form 3800, August 2006

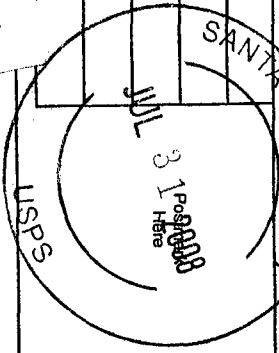
See Reverse for Instructions

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>TM</sup> 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  
 Street, Apt. No.,  
 or PO Box No.  
 City, State, ZIP+4

Yates Petroleum  
 105 S. Fourth Street  
 Artesia, NM 88210

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:

Yates Petroleum  
 105 S. Fourth Street  
 Artesia, NM 88210

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature *Melissa Stewart*
- B. Received by (Printed Name) **MELISSA STEWART**
- C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

**3. Service Type**

- ☒ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.
- ☐ Restricted Delivery<sup>1</sup> (Extra Fee)
- ☐ Yes

4. Restricted Delivery<sup>1</sup> (Extra Fee)

2. Article Number  
 (Transfer from service label) **7006 3450 0001 4318 0220**

PS Form 3811, February 2004

Domestic Return Receipt

*AP-C*

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:

OXY USA WTP Limited Partnership &  
 OXY Permian Ltd.  
 P.O. Box 4294  
 Houston, TX 77210-4294

2. Article Number  
 (Transfer from service label) **7006 3450 0001 4318 0220**

PS Form 3811, February 2004

Domestic Return Receipt

*AP-C*

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature *Melissa Stewart*
- B. Received by (Printed Name) **MELISSA STEWART**
- C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

**3. Service Type**

- ☒ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.
- ☐ Restricted Delivery<sup>1</sup> (Extra Fee)
- ☐ Yes

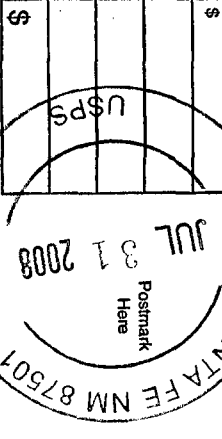
4. Restricted Delivery<sup>1</sup> (Extra Fee)

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>TM</sup> 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  
 Street, Apt. No.,  
 or PO Box No.  
 City, State, ZIP+4

OXY USA WTP Limited Partnership  
 OXY Permian Ltd.  
 P.O. Box 4294  
 Houston, TX 77210-4294

Form 3800, August 2006

See Reverse for Instructions