

BEFORE THE OIL CONSERVATION DIVISION
NEW MEXICO ENERGY, MINERALS AND
NATURAL RESOURCES DEPARTMENT

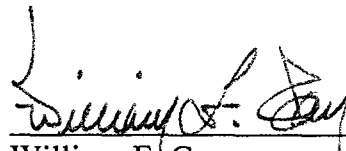
APPLICATION OF PURE RESOURCES, L.P. FOR A
BLANKET EXCEPTION IN THE RINCON UNIT AREA
TO THE WELL LOCATION REQUIREMENTS FOR
THE BLANCO-MESAVERDE GAS POOL, RIO
ARRIBA COUNTY, NEW MEXICO.

CASE NO. 13112

AFFIDAVIT


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

William F. Carr, attorney in fact and authorized representative of Pure Resources, L.P., the
Applicant herein, being first duly sworn, upon oath, states that notice has been given to all
interested persons entitled to receive notice of this application under Oil Conservation
Division rules, and that notice has been given at the addresses shown on Exhibit "A" attached
hereto.



William F. Carr

SUBSCRIBED AND SWORN to before me this 8th day of August 2003.



Notary Public

My Commission Expires:

August 23, 2005

HOLLAND & HART LLP
ATTORNEYS AT LAW

DENVER • ASPEN
BOULDER • COLORADO SPRINGS
DENVER TECH CENTER
BILLINGS • BOISE
CHEYENNE • JACKSON HOLE
SALT LAKE CITY • SANTA FE
WASHINGTON, D.C.

P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208
110 NORTH GUADALUPE, SUITE 1
SANTA FE, NEW MEXICO 87501-6525

TELEPHONE (505) 988-4421
FACSIMILE (505) 983-6043

William F. Carr

wcarr@hollandhart.com

July 31, 2003

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: ALL AFFECTED INTEREST OWNERS.

Re: Application of Pure Resources, L.P. for Blanket Exception in the Rincon Unit Area to the Well Location Requirements for the Blanco-Mesaverde Gas Pool, Rio Arriba county, New Mexico.

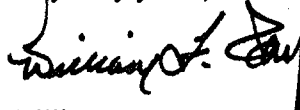
Ladies and Gentlemen:

Enclosed is a copy of the application of Pure Resources, L.P. in the above-referenced case for a blanket exception in the Rincon Unit to the well location requirements for the Blanco-Mesaverde Gas Pool in Rio Arriba County, New Mexico.

This application has been set for hearing before a Division Examiner on August 21, 2003. You are not required to attend this hearing, but as an owner of the interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 1208.B to file a Pre-hearing Statement three days in advance of a scheduled hearing at the Oil Conservation Division's Santa Fe Office located at 1220 South Saint Francis Drive, Santa Fe, New Mexico 87505. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing.

Very truly yours,



William F. Carr
Attorney for Pure Resources, L.P.

Enclosure

**APPLICATION OF PURE RESOURCES, L.P.
FOR A BLANKET EXCEPTION IN THE RINCON UNIT AREA
TO THE WELL LOCATION REQUIREMENTS OF
THE BLANCO MESAVERDE GAS POOL,
RIO ARRIBA COUNTY, NEW MEXICO.**

NOTICE LIST

Theodore J. Blechar
138 La Canada Way
Santa Cruz, California 95060

Anita Briggs
115 Fish and Game Road
Cherry Valley, New York 13320

Linda Calvert
26 East Funk Road
Lake Arthur New Mexico 88253

Martha Lou Dixon
311 West Taggard Street
Burnet, Texas 78611

H Limited Partnership
Post Office Box 2185
Santa Fe, New Mexico 87504

Phil W. Harvey
13203 De La Vista Street
San Antonio, Texas 78233-5407

Rowena Dale Laabs
Post Office Box 83
Tularosa, New Mexico 88352

Lou Ann Patterson
1807 Briscoe
Artesia, New Mexico 88210

Loy Sue Siegenthaler
300 Tulane Place, NE
Albuquerque, New Mexico 87106

William M. Siegenthaler
122 Watson
Artesia, New Mexico 88210

Robert W. and Thelma M. Smith
Smith Revocable Trust Dated 11/6/97
Post Office Box 1034
Pogosa Springs, Colorado 81147

Kay Beth Staveley
14000 County Road 478
May, Texas 76857

M. A. & E. I. Zamora Revocable Trust
Matias A. Zamora and Emeline L. Zamora, Trustees
Post Office Box 28667
Santa Fe, New Mexico 87592-8667

Kaime Revocable Trust (successor to interest of Edwin H.
Kaime) Elizabeth R. Kaime, Trustee
5007 Mead Lane
Farmington, New Mexico 87402

Largo Construction Company (Successor in interest of
George N. Kaime) c/o Wilma J. Kaime
HCR 80 Box 4
Counselor, New Mexico 87108

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

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required) 5.11
Total Postage & Fees \$ 5.11

Sent To Theodore J. Blechar
38 La Canada Way
Santa Cruz, CA 95060

City, State

PS Form

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:

Theodore J. Blechar
138 La Canada Way
Santa Cruz, CA 95060

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

X *[Signature]* ☐ Agent ☐ Addressee

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7001 1140 0002 5601 9513

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

- 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:

Anita Briggs
115 Fish and Game Road
Cherry Valley, New York 13320

C. Signature

X *[Signature]* ☒ Agent ☐ Addressee

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7001 1140 0002 5601 9520

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

- 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:

Linda Calvert
26 East Funk Road
Lake Arthur NM 88253

A. Received by (Please Print Clearly) B. Date of Delivery

Dianna L. Neal 08-04-03

C. Signature

X *[Signature]* ☐ Agent ☐ Addressee

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

7001 1140 0002 5601 9537

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required) 5.11
Total Postage & Fees \$ 5.11

Sent Anita Briggs
15 Fish and Game Road
Cherry Valley, New York 13320

PS Form

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

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required) 5.11
Total Postage & Fees \$ 5.11

Sent Linda Calvert
26 East Funk Road
Lake Arthur NM 88253

PS Form

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

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.11

Ser Martha Lou Dixon
311 West Taggard Street
Burnet, TX 78611
City, PSF

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:

Martha Lou Dixon
311 West Taggard Street
Burnet, TX 78611

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
MARTHA LOU DIXON 8-4-93

C. Signature
X Martha Lou Dixon
☐ Agent
☐ Addressee

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. 7001 1140 0002 5601 9544

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.11

Ser I Limited Partnership
P.O. Box 2185
Santa Fe, NM 87504
City, PSF

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:

Kaime Revocable
Elizabeth R. Kaime, Trustee
5007 Mead Lane
Farmington, NM 87402

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
ELIZABETH R. KAIME 8-4

C. Signature
X Elizabeth R. Kaime
☐ Agent
☐ Addressee

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

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 RECEIPT
(Domestic Mail Only, No Insurance Coverage)

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.11

Kaime Revocable
Elizabeth R. Kaime, Trustee
5007 Mead Lane
Farmington, NM 87402

7001 1140 0002 5601 9643

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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

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:

Rowena Dale Laabs
P.O. Box 83
Tularosa, NM 88352

2. 7001 1140 0002 5601 9575

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

- 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:

Rowena Dale Laabs
P.O. Box 83
Tularosa, NM 88352

2. 7001 1140 0002 5601 9582

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

- 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:

Largo Construction Company
(Succ. in int of George N. Kaime)
c/o Wilma J. Kaime
HCR 80 Box 4
Counselor, NM 87108

2. 7001 1140 0002 5601 9650

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

Quinter W. Laabs 8-1-03

C. Signature

X Quinter W. Laabs ☒ Agent ☐ Addressee

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 RECEIPT
(Domestic Mail Only; No Insurance Coverage)

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.11

Rowena Dale Laabs
P.O. Box 83
Tularosa, NM 88352

PS

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

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.11

Largo Construction Company
Succ. in int of George N. Kaime)

c/o Wilma J. Kaime
HCR 80 Box 4
Counselor, NM 87108

PS

A. Received by (Please Print Clearly) B. Date of Delivery

Wilma J. Kaime 8/4/03

C. Signature

X Wilma J. Kaime ☐ Agent ☐ Addressee

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 RECEIPT
(Domestic Mail Only; No Insurance Coverage)

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.11

Send to: Loy Sue Siegenthaler
300 Tulane Place, NE
Albuquerque, NM 8710

PS Form 3811, July 1999

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:

Loy Sue Siegenthaler
300 Tulane Place, NE
Albuquerque, NM 8710

2. Article

7001 1140 0002 5601 9599

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
Susan Brown 8-1-01
C. Signature
Susan Brown ☐ Agent ☒ Addressee
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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 RECEIPT
(Domestic Mail Only; No Insurance Coverage)

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.11

Send to: William M. Siegenthaler
22 Watson
Artesia, NM 88210

PS Form 3811, July 1999

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:

William M. Siegenthaler
422 Watson
Artesia, NM 88210

2. Article

7001 1140 0002 5601 9605

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

A. Received by (Please Print Clearly) B. Date of Delivery
Bill Siegenthaler 8-4-03
C. Signature
X Bill Siegenthaler ☐ Agent ☒ Addressee
D. Is delivery address different from item 1? ☒ Yes
If YES, enter delivery address below: ☐ No

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 RECEIPT
(Domestic Mail Only; No Insurance Coverage)

Postage \$ 1.06
Certified Fee 2.30
Return Receipt Fee (Endorsement Required) 1.75
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees \$ 5.11

Send to: Robert W. and Thelma M. Smith
Smith Rev. Trust Dated 11/6/97
P.O. Box 1034
Pagosa Springs, CO 81147

PS Form 3811, July 1999

- 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:

Robert W. and Thelma M. Smith
Smith Rev. Trust Dated 11/6/97
P.O. Box 1034
Pagosa Springs, CO 81147

2. Article

7001 1140 0002 5601 9612

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

A. Received by (Please Print Clearly) B. Date of Delivery
Rae Allen 8/4/03
C. Signature
X Rae Allen ☒ Agent ☐ Addressee
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

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 RECEIPT
(Domestic Mail Only; No Insurance Coverage)

OFFICIAL MAIL

Postage	\$	1.06
Certified Fee		2.30
Return Receipt Fee (Endorsement Required)		1.75
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	5.11

Phil W. Harvey
3203 De La Vista Street
San Antonio, TX 78233-5407

PS Form 3811, July 1999

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:

Phil W. Harvey
13203 De La Vista Street
San Antonio, TX 78233-5407

2. Article 7001 1140 0002 5601 9568

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

- 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:

Kay Beth Staveley
14000 County Road 478
May, TX 76857

2. Article 7001 1140 0002 5601 9629

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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

OFFICIAL MAIL

Postage	\$	1.06
Certified Fee		2.30
Return Receipt Fee (Endorsement Required)		1.75
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	5.11

M. A. & E. I. Zamora Rev. Trust
M.A.Zamora, E.L.Zamora, Trustees
P.O. Box 28667
Santa Fe, NM 87592-8667

PS Form 3811, July 1999

- 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:

M. A. & E. I. Zamora Rev. Trust
M.A.Zamora, E.L.Zamora, Trustees
P.O. Box 28667
Santa Fe, NM 87592-8667

2. Article 7001 1140 0002 5601 9636

PS Form 3811, July 1999

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 8-4-03

C. Signature X [Signature] ☐ Agent ☒ Addressee

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

A. Received by (Please Print Clearly) B. Date of Delivery 8-7-03

C. Signature X [Signature] ☐ Agent ☒ Addressee

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

A. Received by (Please Print Clearly) B. Date of Delivery [Signature]

C. Signature X [Signature] ☐ Agent ☒ Addressee

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

Domestic Return Receipt

102595-00-M-0952