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

APPLICATION OF PURVIS OPERATING CO. FOR COMPULSORY POOLING, LEA COUNTY, NEW MEXICO.

Case No. 14,258

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 Purvis Operating Co.

3. Purvis Operating Co. 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 1207.

James Bruce

SUBSCRIBED AND SWORN TO before me this 17th day of December, 2008 by James Bruce.

My Commission Expires: 3/14/09

Notary Public

Oil Conservation Division
Case No. _____
Exhibit No. 5

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

November 21, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Purvis Operating Co., regarding the E½ of Section 7, Township 15 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, December 18, 2008, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well 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, December 11, 2008 if you intend to participate in the hearing.

Very truly yours,

James Bruce

Attorney for Purvis Operating Co.

EXHIBIT A

EXHIBIT A

Rodney D. Dickens
1315 Spring Water
Canyon Lake, Texas 78133

Mary Francis Bell
Apartment 407
834 South Getty Street
Uvalde, Texas 78801

Melissa E. Smith
P.O. Box 40
Carrizo Springs, Texas 78834

Roy Campbell
46 Delaney Lane
Plainview, Arkansas 72857

Charles Phillips
243 Atlantic
Angleton, Texas 77515

Odus Phillips
P.O. Box 1056
Angleton, Texas 77516

Lawrence Dotson
P.O. Box 556
Sierra Blanca, Texas 79851

Charee Dotson
P.O. Box 662
Somerset, Texas 78069

Charlee Dotson
P.O. Box 662
Somerset, Texas 78069

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:

Lawrence Dotson
P.O. Box 556
Sierra Blanca, Texas 79851

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 12-9-08

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. Article Number (Transfer from service label) 7008 0500 0001 4439 5129

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

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

SANTA FE NM Postmark Here NOV 21 2008

Sent To: Melissa E. Smith
Street, Apt. No.; or PO Box No.: P.O. Box 40
City, State, ZIP+4: Carrizo Springs, Texas 78834

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4439 5082

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

For delivery information visit our website at www.usps.com

OFFICIAL USE

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

SANTA FE NM Postmark Here NOV 21 2008

Sent To: Lawrence Dotson
Street, Apt. No.; or PO Box No.: P.O. Box 556
City, State, ZIP+4: Sierra Blanca, Texas 79851

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4439 5129

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:

Melissa E. Smith
P.O. Box 40
Carrizo Springs, Texas 78834

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 11/25/08

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. Article Number (Transfer from service label) 7008 0500 0001 4439 5082

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

Postmark
NOV 21 2008
USPS 87501

Sent To: Mary Francis Bell
Street, Apt. No., or PO Box No.: Apartment 407
834 South Getty Street
City, State, ZIP+4: Uvalde, Texas 78801

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4439 5068

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:

Charlee Dotson
P.O. Box 662
Somerset, Texas 78069

3. Se
4. Rest

2. Article Number (Transfer from service label) 7008 0500 0001

PS Form 3811, February 2004 Domestic Return Receip

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:

Mary Francis Bell
Apartment 407
834 South Getty Street
Uvalde, Texas 78801

COMPLETE THIS SECTION ON DELIVERY

A. Signature
x Mary Bell ☐ Agent ☐ Addressee

B. Received by (Printed Name) mary Bell
C. Date of Delivery 11-25-08

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. Article Number (Transfer from service label) 7008 0500 0001 4439 5068

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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For delivery information visi
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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.: Cha
City, State, ZIP+4: P.O. Son

PS Form 3800, August 2006

7008 0500 0001 4439 5143

U.S. Postal Service
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Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here
NOV 21 2006

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

Rodney D. Dickens
1315 Spring Water
Canyon Lake, Texas 78133

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4439 5051

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:

Roy Campbell
46 Delaney Lane
Plainview, Arkansas 72857

COMPLETE TH

A. Signature
X

B. Received by

D. Is delivery ad
If YES, enter

3. Service Type
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☐ Registere
☐ Insured M

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PS Form 3811, February 2004 Domestic Return Receipt

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:

Rodney D. Dickens
1315 Spring Water
Canyon Lake, Texas 78133

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Catherine Ivey ☐ Agent ☒ Addressee

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

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. Article Number
(Transfer from service label) 7008 0500 0001 4439 5051

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL
(Domestic Mail Only; No Ins

For delivery information visit our website

OFFICI

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. Roy Campb 46 Delaney
City, State, ZIP+4 Plainview,

PS Form 3800, August 2006

7008 0500 0001 4439 5099

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:

Charles Phillips
243 Atlantic
Angleton, Texas 77515

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) | C. Date of Delivery 11/25/08

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. Article Number (Transfer from service lab) 7008 0500 0001 4439 5105

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7008 0500 0001 4439 5136

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

Postmark Here
SANTA FE NM
NOV 21 2008

Sent To: Charee Dotson
Street, Apt. No.; or PO Box No.: P.O. Box 662
City, State, ZIP+4: Somerset, Texas 78069

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4439 5105

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

Postmark Here
SANTA FE NM
NOV 21 2008

Sent To: Charles Phillips
Street, Apt. No.; or PO Box No.: 243 Atlantic
City, State, ZIP+4: Angleton, Texas 77515

PS Form 3800, August 2006 See Reverse for Instructions

7008 0500 0001 4439 5112

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

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Sent To
Street, Apt. No., or PO Box No. Odus Phillips P.O. Box 1056
City, State, ZIP+4 Angleton, Texas 77516

PS Form 3800, August 2006 See Reverse for Instructions

CERTIFIED MAIL™

ALBUQUERQUE NM 871

21 NOV 2008 PM 3

7008 0500 0001 4439 5112

James Bruce
PO Box 1056
Santa Fe, NM 87504-1056

1ST NOTICE 12-4
2ND NOTICE
RETURN

NOV 2 4 2008
1ST NOTICE
2nd NOTICE
RETURN

RETURN RECEIPT REQUESTED

FWD
IA

Odus Phillips
P.O. Box 1056
Angleton, Texas 77516

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