

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

**APPLICATION OF ROSETTA RESOURCES
OPERATING LP FOR APPROVAL OF A SALT
WATER DISPOSAL WELL, SAN JUAN
COUNTY, NEW MEXICO.**


Case No. 14,266

AFFIDAVIT OF NOTICE

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

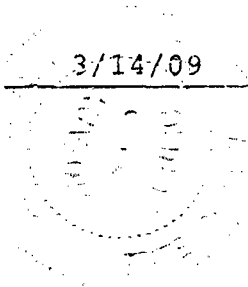
James Bruce, being duly sworn upon his oath, deposes and states:

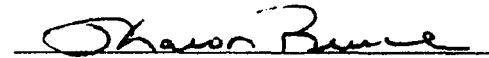
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Rosetta Resources Operating, LP.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application 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 Rules.


James Bruce

SUBSCRIBED AND SWORN TO before me this 17th day of February, 2009 by James Bruce.

My Commission Expires: 3/14/09




Notary Public

Oil Conservation Division
Case No. 14 14266 266
Exhibit No.

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

December 11, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

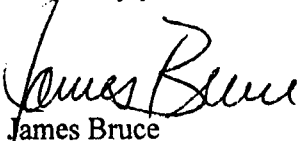
Ladies and gentlemen:

Enclosed is a copy of an application for approval of a salt water disposal well, filed with the New Mexico Oil Conservation Division by Rosetta Resources Operating LP, regarding a well in the SE¼NW¼ of Section 36, Township 25 North, Range 10 West, N.M.P.M., San Juan County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Wednesday, January 8, 2009, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an 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 contesting the matter at a later date.

A party appearing in a Division case is required by Division Rule 1208.B to file a Pre-Hearing Statement no later than Thursday, December 31, 2008. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the 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 need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Rosetta Resources Operating LP

EXHIBIT A

EXHIBIT A

J Bar Cane, Inc.
P.O. Box 16
Stanley, New Mexico 87056

XTO Energy Inc.
Suite 2000
810 Houston Street
Fort Worth, Texas 76102

Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

Kaiser-Francis Oil Co.
P.O. Box 21468
Tulsa, Oklahoma 74121

W.R. Speer
900 Crestview Drive
Farmington, New Mexico 87401

Oil, Gas and Minerals Division
Commissioner of Public Lands
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

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:

Kaiser-Francis Oil Co.
P.O. Box 21468
Tulsa, Oklahoma 74121

3. Service Type
- ☒ Certified Mail ☐ Express Mail
- ☒ Registered ☐ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number 7008 0500 0001 4530 1631
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

ROS-36

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *X M.E. W...*
- B. Received by (Printed Name) *Michael W...* C. Date of Delivery *DEC 18 2004*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

- Sent To
- W.R. Speer
- 900 Crestview Drive
- Farmington, New Mexico 87401
- City, State, Zip+4

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal ServiceTM

CERTIFIED MAILTM 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 \$

Sent To Kaiser-Francis Oil Co.
P.O. Box 21468
Tulsa, Oklahoma 74121
City, State, Zip+4

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

W.R. Speer
900 Crestview Drive
Farmington, New Mexico 87401

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

ROS-36

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *X Anne R. Speer* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery *12.17.04*
- 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 ☐ No

7008 0500 0001 4530 1624

PS Form 3800, August 2006

Domestic Return Receipt

ROS-36

102595-02-M-1540

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Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees \$

Sent To

W.R. Speer

900 Crestview Drive

Farmington, New Mexico 87401

City, State, Zip+4

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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- 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 Corporation
105 South Fourth Street
Artesia, New Mexico 88210

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02

Ros-36

7008 0500 0001 4530 1648

COMPLETE THIS SECTION ON DELIVERY

A. Signature *xn [Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Marcos Contreras* 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
☐ C.O.D.

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

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

Sent To
Street, Apt. No., or PO Box No. Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Oil, Gas and Minerals Division
Commissioner of Public Lands
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

2. Article Number
(Transfer from service label)

7008 0500 0001 4530 1617

PS Form 3811, February 2004

Domestic Return Receipt

102595-02

Ros-36

COMPLETE THIS SECTION ON DELIVERY

A. Signature *[Signature]* ☒ Agent ☐ Addressee

B. Received by (Printed Name) 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 ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

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

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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. Oil, Gas and Minerals Division
Commissioner of Public Lands
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501
City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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- 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:

J Bar Cane, Inc.
P.O. Box 16
Stanley, New Mexico 87056

3. Service Type
- ☒ Certified Mail
 - ☐ Registered
 - ☐ Insured Mail
 - ☐ Express Mail
 - ☐ Return Receipt for Merchandise
 - ☐ C.O.D.
 - ☐ Restricted Delivery? (Extra Fee)

4. Yes ☐ No ☐

2. Article Number
(Transfer from service label) 7008 0500 0001 4530 1662

PS Form 3811, February 2004

Domestic Return Receipt Ros 36

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Bryan Stein
- C. Date of Delivery 12/12/08
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

1. Article Addressed to:

J Bar Cane, Inc.
P.O. Box 16
Stanley, New Mexico 87056

3. Service Type
- ☒ Certified Mail
 - ☐ Registered
 - ☐ Insured Mail
 - ☐ Express Mail
 - ☐ Return Receipt for Merchandise
 - ☐ C.O.D.
 - ☐ Restricted Delivery? (Extra Fee)

4. Yes ☐ No ☐

2. Article Number
(Transfer from service label) 7008 0500 0001 4530 1662

PS Form 3811, February 2004

Domestic Return Receipt Ros 36

102595-02-M-1540

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Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees

Sent To

J Bar Cane, Inc.

P.O. Box 16

Stanley, New Mexico 87056

Street, Apt. No., or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions.

SENDER: COMPLETE THIS SECTION

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- 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:

XTO Energy Inc.
Suite 2000
810 Houston Street
Fort Worth, Texas 76102

2. Article Number
(Transfer from service label) 7008 0500 0001 4530 1655

PS Form 3811, February 2004

Domestic Return Receipt Ros 36

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) DEC 13 2008
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

1. Article Addressed to:

XTO Energy Inc.
Suite 2000
810 Houston Street
Fort Worth, Texas 76102

3. Service Type

- ☒ Certified Mail
- ☐ Registered
- ☐ Insured Mail
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ C.O.D.
- ☐ Restricted Delivery? (Extra Fee)

4. Article Number
(Transfer from service label) 7008 0500 0001 4530 1655

PS Form 3800, August 2006

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Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees

Sent To

XTO Energy Inc.

Suite 2000

810 Houston Street

Fort Worth, Texas 76102

Street, Apt. No., or PO Box No.

City, State, ZIP+4

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See Reverse for Instructions.