

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

APPLICATION OF MEWBOURNE OIL COMPANY  
FOR APPROVAL OF A NON-STANDARD OIL SPACING  
AND PRORATION UNIT, AN UNORTHODOX OIL  
WELL LOCATION AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.

Case No. 14,587

AFFIDAVIT OF NOTICE

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

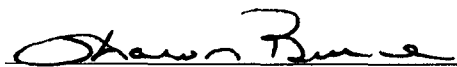
James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Mewbourne Oil Company.
3. Mewbourne Oil Company has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or working interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the offsets 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 NMAC 19.15.4.9 and 19.15.4.12.C.

  
\_\_\_\_\_  
James Bruce

SUBSCRIBED AND SWORN TO before me this 5th day of January, 2011 by  
James Bruce.

My Commission Expires: 3/14/13

  
\_\_\_\_\_  
Notary Public

Oil Conservation Division  
Case No. \_\_\_\_\_  
Exhibit No. 6

**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)

December 8, 2010

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

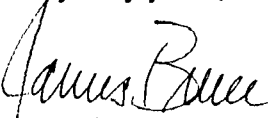
To Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit, unorthodox well location, *etc.*, filed with the New Mexico Oil Conservation Division by Mewbourne Oil Company, regarding the N½N½ of Section 29, Township 18 South, Range 30 East, N.M.P.M., Eddy County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, January 6, 2011, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **The Division requires applicant to notify offset operators or working interest owners of the non-standard unit portion of the application, and you offset the above well unit.** The surface location of the well is unorthodox, but the producing interval of the well will be at an orthodox location. As an offset operator or lessee, 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 30, 2010 if you intend to participate in the hearing.

Very truly yours,

  
James Bruce

Attorney for Mewbourne Oil Company

EXHIBIT A

EXHIBIT A

Chesapeake Operating, Inc.  
Chesapeake Exploration, L.L.C.  
P.O. Box 18496  
Oklahoma City, Oklahoma 73154

Attention: Justin Zerkle

Chevron U.S.A. Inc.  
P.O. Box 2100  
Houston, Texas 77252

Attention: Kevin C. Stubbs

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  
Chevron U.S.A. Inc.  
P.O. Box 2100  
Houston, Texas 77252

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

City, State, ZIP+4

PS Form 3800, August 2005 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:

Chevron U.S.A. Inc.  
P.O. Box 2100  
Houston, Texas 77252

2. Article Number  
(Transfer from service label)

7008 0500 0001 4683 9638

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
X *[Signature]*

B. Received by (Printed Name)  
*[Signature]*

C. Date of Delivery  
DEC 13 2004

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

5496 8894 1000 0050 8002

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 \$

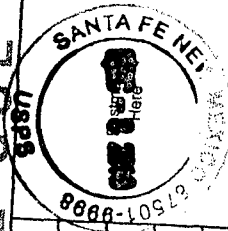
Sent To  
Chesapeake Operating, Inc.  
Chesapeake Exploration, L.L.C.  
P.O. Box 18496  
Oklahoma City, Oklahoma 73154

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

City, State, ZIP+4

PS Form 3800, August 2005

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:

Chesapeake Operating, Inc.  
Chesapeake Exploration, L.L.C.  
P.O. Box 18496  
Oklahoma City, Oklahoma 73154

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

City, State, ZIP+4

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7008 0500 0001 4683 9645

