

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF CONCHO RESOURCES
INC. FOR COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.

Case No. 12674

AFFIDAVIT REGARDING NOTICE

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

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 set forth herein.

2. I am an attorney for Applicant.

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 1207.



James Bruce

SUBSCRIBED AND SWORN TO before me this 8th day of August, 2001, by James Bruce.



Notary Public

My Commission Expires:

3/14/01

OIL CONSERVATION DIVISION

CASE NUMBER

EXHIBIT

5

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

3304 CAMINO LISA
HYDE PARK ESTATES
SANTA FE, NEW MEXICO 87501

(505) 982-2043
(505) 982-2151 (FAX)

May 3, 2001

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Caroline Howell Lee
P.O. Box 7427
Jackson Hole, Wyoming 83002

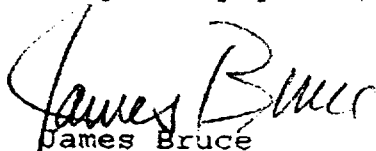
Virginia Collier Howell
2524 Long Avenue
Beaumont, Texas 77702

Charles A. Howell, Jr.
2524 Long Avenue
Beaumont, Texas 77702

Ladies and Gentlemen:

Enclosed is an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Concho Resources, Inc., regarding the S½ of Section 32, Township 18 South, Range 24 East, N.M.P.M., Eddy County, New Mexico. This matter has been set for hearing at 8:15 a.m. on Thursday, May 31, 2001 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 hearing. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

Very truly yours,


James Bruce

Attorney for Concho Resources, Inc.

cc: Robert Wade w/encl.

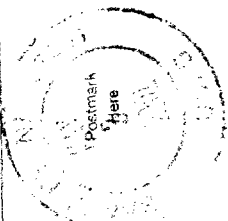


U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Available)

7000 0600 0024 3122 7660

Postage	\$ 5.55
Certified Fee	1.90
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 3.95



Sent To
Robert Wade
650 North 9th Street
Beaumont, Texas 77002
City, State, Zip+4

PS Form 3811, July 1999

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:

Robert Wade
650 North 9th Street
Beaumont, Texas 77002

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print) Robert Wade B. Date of Delivery July 3, 1999
- C. Signature Robert Wade ☐ 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 ☐ No

2. Article Number (Copy from service label)

7000 0600 0024 3122 7660

PS Form 3811, July 1999

Domestic Return Receipt

10255-00 M-0952

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:

Virginia Collier Howell
2524 Long Avenue
Beaumont, Texas 77002

2. Article Number (Copy from service label)

7000 0600 0024 3122 7660

PS Form 3811, July 1999

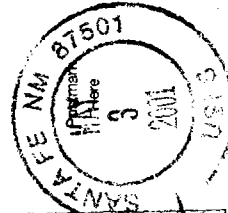
Domestic Return Receipt

10255-00 M-0952

U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Available)

Postage	\$ 0.55
Certified Fee	1.90
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 3.95



Recipient's Name (Please Print Clearly) (to be completed by mailer)

Virginia Collier Howell
2524 Long Avenue
Beaumont, Texas 77002

PS Form 3811, July 1999

Domestic Return Receipt

10255-00 M-0952

U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

7292 221E 5200 0090 0002

Postage	\$ 55
Certified Fee	1.40
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 3.95

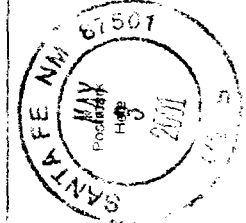
Recipient's Name Caroline Howell Lee (by mailer)

Street, Apt. No. or P.O. Box 7427

City, State, ZIP+4 Jackson Hole, Wyoming 83002

PS Form 3811, July 1999

See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, & 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 A. Howell, Jr.
2524 Long Avenue
Beaumont, Texas 77702

2. Article Number (Copy from service label)

100006000002431227684

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

CONCH

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, & 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:

Caroline Howell Lee
P.O. Box 7427
Jackson Hole, Wyoming 83002

2. Article Number (Copy from service label)

100006000002431227684

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

CONCH

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print name) Caroline Howell Lee B. Date of Delivery 5-8-01
- C. Signature Caroline Howell Lee Agent ☒ Addresssee ☐
- 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

U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

7292 221E 5200 0090 0002

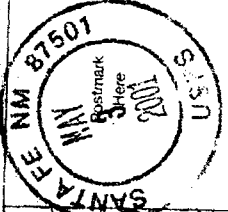
Postage	\$ 55
Certified Fee	1.40
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 3.95

Recipient's Name (Please Print Name) (to be completed by mailer)

Charles A. Howell, Jr.
Street, Apt. No. or P.O. Box 2524 Long Avenue
City, State, ZIP+4 Beaumont, Texas 77702

PS Form 3811, July 1999

See Reverse for Instructions



COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print name) Lizette Hall B. Date of Delivery 5/7
- C. Signature Charles A. Howell, Jr. Agent ☒ Addresssee ☐
- 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

Article Number (Copy from service label)

100006000002431227684

Domestic Return Receipt

102595-00-M-0952

CONCH