

EXHIBIT

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)

August 28, 2001

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Wells Fargo Bank, N.A., Trustee
U/W/O J.M. Armstrong
Attention: Mike Talley
P.O. Box 2097
Midland, Texas 79702

Levy Brothers, LLC
5715 North Western
Oklahoma City, Oklahoma 73118

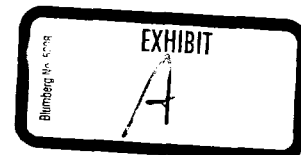
Robert Joe Reichert
2800 NW 34th Street
Oklahoma City, Oklahoma 73112

Trustees of the Coates Energy Trust
Attention: Sherrie Green
P.O. Box 171717
San Antonio, Texas 78217

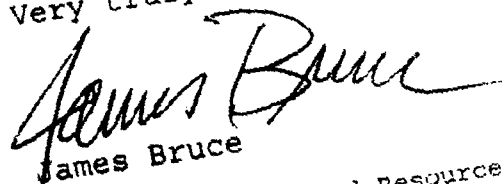
Ladies and Gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Leonard Resource Investment Corporation, regarding the SE~~1~~/~~4~~NW~~1~~/~~4~~ of Section 2, Township 20 South, Range 38 East, N.M.P.M., Lea County, New Mexico. This application is scheduled to be heard at 8:15 a.m. on Thursday, September 20, 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 appear at the hearing and present evidence. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are requested to notify the Division, and the undersigned, by Friday, September 14, 2001, if you intend to enter an appearance and participate in the case.



Very truly yours,

A handwritten signature in cursive script, appearing to read "James Bruce".

James Bruce

Attorney for Leonard Resource Investment Corporation

U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

Postage	\$ 0.57
Certified Fee	2.19
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	4.89
Total Postage & Fees	\$ 8.15

Levy Brothers, LLC
5715 North Western
Oklahoma City, Oklahoma 73118

PS Form 3811, May 2000 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:

Levy Brothers, LLC
5715 North Western
Oklahoma City, Oklahoma 73118

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

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

2. Article Number (Copy from service label)
7528 1670 2012 3768 6103

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

CRIC 82

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:

Trustees of the Coates Energy Trust
Attention: Sherric Green
P.O. Box 171717
San Antonio, Texas 78217

2. Article Number (Copy from service label)
7000 1670 2012 3768 6110

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

CRIC 82

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
J. Singleton 8/3/01

C. Signature

D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below:

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

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

U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

Postage	\$ 0.57
Certified Fee	2.19
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	4.89
Total Postage & Fees	\$ 8.15

Sent To
Trustees of the Coates Energy Trust
Attention: Sherric Green
P.O. Box 171717
San Antonio, Texas 78217

PS Form 3811, May 2000

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:

Wells Fargo Bank, N.A., Trustee
U/W/O J.M. Armstrong
Attention: Mike Talley
P.O. Box 2097
Midland, Texas 79702

2. Article Number (Copy from service label)

7200 1670 0012 3768 0097

PS Form 3811, July 1989

Domestic Return Receipt

102595-00-14-0652

CRIC

COMPLETE THIS SECTION ON DELIVERY

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

C. Signature

X Don Talley

☐ 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 Provided)

POSTAGE: \$ 0.57
2 P.S. SANTA FE, NM
Return Receipt Tag
Endorsement Tag and
Restricted Delivery Fee
(Endorsement Tag only)
Postmaster Here
AUG 2 2001
8368-0937

Total Postage & Fees: \$

Sent To

Wells Fargo Bank, N.A.

U/W/O J.M. Armstrong

Street, Apt. No. Attention: Mike Talley

P.O. Box 2097

City, State, ZIP+4 Midland, Texas 79702

PS Form 3800, N.A.

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 Joe Reichert
2800 NW 34th Street
Oklahoma City, Oklahoma 73112

2. Article Number (Copy from service label)

4000 0520 0021 6891 9516

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

CRIC 32

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. 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

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**

(Domestic Mail Only - Postage and Fees Provided)

9156 2689 1200 0250 0002

Postage	\$	0.53
Certified Fee	\$	1.50
Return Receipt Fee (Endorsement Required)	\$	0.25
Restricted Delivery Fee (Endorsement Required)	\$	0.00
Total Postage & Fees	\$	2.28

Recipient's Name (Print or Type)

Robert Joe Reichert

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

2800 NW 34th Street

City, State, ZIP+4

Oklahoma City, Oklahoma 73112

PS Form 3800, February 2000

See Reverse for Instructions