

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF MEWBOURNE OIL
COMPANY FOR COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.

Case No. 12826

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.

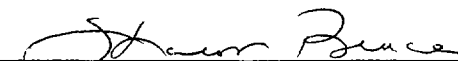
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the Application filed herein.

4. Notice of the Application was provided to the interest owner at his correct address by certified mail. Copies of the notice letter and certified return receipt 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 5th day of March, 2002, by James Bruce.


Notary Public

My Commission Expires:
3/14/2005

OIL CONSERVATION DIVISION

CASE NUMBER _____

EXHIBIT 2

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

324 MCKENZIE STREET
SANTA FE, NEW MEXICO 87501

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

February 13, 2002

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 Mewbourne Oil Company, regarding the E½ of Section 17, Township 18 South, Range 28 East, N.M.P.M., Eddy County, New Mexico. This application is scheduled to be heard at 8:15 a.m. on Thursday, March 7, 2002 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, March 1, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,


James Bruce

Attorney for Mewbourne Oil Company



EXHIBIT A

Judith Skidmore
7861 Kelly Circle
La Palma, California 90623-1646

Barbara Peregrine
P.O. Box 48
Glenbrook, Nevada 89413-0048

Lawrence D. Hillyer
2161 Suncrest Street
Atwater, California 95301-3236

Sharyn L. Simons
Apt No. 201
1750 South Bentley Avenue
West Los Angeles, California 90025-4339

Clifford Taylor
Suite 304
219 West Colorado Avenue
Colorado Springs, Colorado
80903-3338

Wendy Atkins-Pattenson
996 Grosvenor Place
Oakland, California 94610-2549

Phillips Petroleum Company
4001 Penbrook
Odessa, Texas 79762

Attention: Tom Atkins

ChevronTexaco Corporation
P.O. Box 1150
Midland, Texas 79702

Attention: Mike Mullins

Exxon Mobil Corporation
P.O. Box 4697
Houston, Texas 77210-4697

Attention: Paul Keffer

Frederick S. Brown
Marshall G. Brown
P.O. Box 38
Los Olivos, California 93441-0039

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

6907 6677 0000 0292 0000

Postage	\$ 0.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17

Sent To Lawrence D. Hillyer
2161 Suncrest Street
Atwater, California 95301-3236
City, State, ZIP+4

Article Addressed to:

1. Article Addressed to: 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.

2. Article Number (Copy from service label) 95301-3236

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:

Barbara Peregrine
P.O. Box 48
Glenbrook, Nevada 89413-0048

2. Article Number (Copy from service label) 89413-0048

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-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:

Lawrence D. Hillyer
2161 Suncrest Street
Atwater, California 95301-3236

Article Number (Copy from service label) 95301-3236

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) LAWRENCE D. HILLYER B. Date of Delivery 2-19-02

C. Signature [Signature] ☐ Agent ☒ Addressee

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

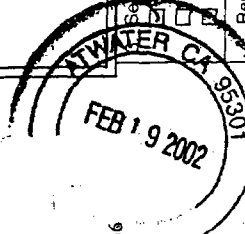
If YES, enter delivery address below:

Service Type ☒ Certified Mail ☐ Express Mail

☐ Registered ☒ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

Restricted Delivery? (Extra Fee) ☐ Yes ☒ No



COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) [Signature] B. Date of Delivery FEB 12 2002

C. Signature [Signature] ☐ 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

Article Number (Copy from service label) 89413-0048

Domestic Return Receipt

102595-00-M-0952

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

6907 6677 0000 0292 0000

Postage	\$ 0.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17

Sent To Barbara Peregrine
P.O. Box 48
Glenbrook, Nevada 89413-0048
City, State, ZIP+4

Article Number (Copy from service label) 89413-0048

PS Form 3800, 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:

Sharyn L. Simons
Apt No. 201
1750 South Bentley Avenue
West Los Angeles, California 90025-4339

2. Article Number (Copy from service label)

72802870 222 193 1076

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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

☐ No

If YES, enter delivery address below:

3. Service Type

☒ Certified Mail

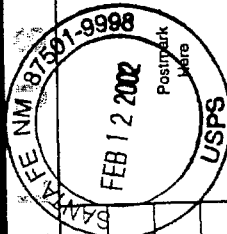
☐ Express Mail

☐ Registered

☐ Insured Mail

4. Restricted Delivery? (Extra Fee)

☐ Yes

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

Postage

\$

Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$

Sent To

Sharyn L. Simons

Apt No. 201

Street, Apt. No. 1750 South Bentley Avenue

City, State, ZIP+4 West Los Angeles, California 90025-4339

PS Form 3800, May 2000

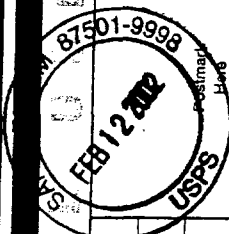
See Reverse for Instructions

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

Postage	\$ 0.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.38
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.05



Sent To
 Phillips Petroleum Company
 4001 Penbrook
 Odessa, Texas 79762
 Attention: Tom Atkins
 City, State, ZIP+4

PS Form 3800, 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:

Phillips Petroleum Company
 4001 Penbrook
 Odessa, Texas 79762

Attention: Tom Atkins

2. Article Number (Copy from service label)
 7022 2870 0000 193 105

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-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:

Clifford Taylor
 Suite 304
 219 West Colorado Avenue
 Colorado Springs, Colorado
 80903-3338

2. Article Number (Copy from service label)
 7022 2870 0000 193 1083

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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 ☐ 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

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

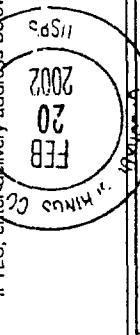
B. Date of Delivery

C. Signature

☐ Agent ☐ Addressee

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

If YES, enter delivery address below:



3. Service Type

☒ Certified Mail ☐ Express Mail

☐ Registered ☒ Return Receipt for Merchandise

☐ Insured Mail ☐ C.O.D.

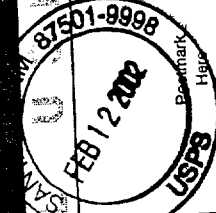
4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

Postage	\$ 2.10
Certified Fee	1.50
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17



Sent To

Clifford Taylor
 Suite 304
 219 West Colorado Avenue
 Colorado Springs, Colorado
 80903-3338

PS Form 3800, May 2000 See Reverse for Instructions

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

01 FEB 18 2002

Postage \$ 0.57
Certified Fee 2.10
Return Receipt Fee (Endorsement Required) 1.50
Restricted Delivery Fee (Endorsement Required) 4.17
Total Postage & Fees \$ 8.34

Sent To Exxon Mobil Corporation
P.O. Box 4697
Houston, Texas 77210-4697
Street, Apt. No.; or P.O. Box
City, State, ZIP+4 Attention: Paul Keffer

PS Form 3800, 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:
Chevron/Texaco Corporation
P.O. Box 1150
Midland, Texas 79702
Attention: Mike Mullins

2. Article Number (Copy from service label)
70002870 193 1117

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
Dad Bell FEB 19 2002

C. Signature X Agent
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.
Restricted Delivery? (Extra Fee) Yes

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:
Exxon Mobil Corporation
P.O. Box 4697
Houston, Texas 77210-4697
Attention: Paul Keffer

2. Article Number (Copy from service label)
70002870 193 1120

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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

01 FEB 18 2002

Postage \$ 0.57
Certified Fee 2.10
Return Receipt Fee (Endorsement Required) 1.50
Restricted Delivery Fee (Endorsement Required) 4.17
Total Postage & Fees \$ 8.34

Sent To Chevron/Texaco Corporation
P.O. Box 1150
Midland, Texas 79702
Street, Apt. No.; or P.O. Box
City, State, ZIP+4 Attention: Mike Mullins

PS Form 3800, 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:

Frederick S. Brown
Marshall G. Brown
P.O. Box 38
Los Olivos, California 93441-0039

2. Article Number (Copy from service label)

7200 4870 0000 193 137

PS Form 3841, July 1989

Domestic Return Receipt

NOV

102595-00-M-0952

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 ☐ 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)**

2ETT 66TT 0000 0202 0000

Postage

\$ 0.57

Certified Fee

2.10

Return Receipt Fee
(Endorsement Required)

1.50

Restricted Delivery Fee
(Endorsement Required)

4.17

Total Postage & Fees

\$ 8.34

Sent To

Frederick S. Brown

Marshall G. Brown

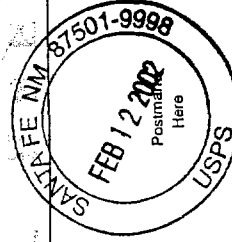
Street, Apt. No.; or P.O. Box 38

City, State, ZIP+4

Los Olivos, California 93441-0039

PS Form 3800, May 2000

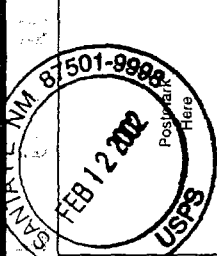
See Reverse for Instructions



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

7000 2870 0000 1293 1090

Postage	\$ 0.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17



Sent To Wendy Atkins-Patterson
996 Grosvenor Place
Street, Apt. No.; or PC 94610-2549
City, State, ZIP+4

PS Form 3800, May 2000 See Reverse for Instructions

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

5404 2870 0000 1293 1045

Postage	\$ 0.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17



Sent To Judith Skidmore
7861 Kelly Circle
Street, Apt. No.; or PC La Palma, California 90623-1646
City, State, ZIP+4

PS Form 3800, May 2000 See Reverse for Instructions