

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

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

Case No. 12929

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.

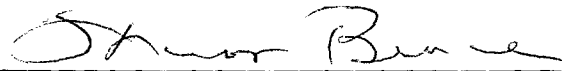
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the Application filed herein.

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 18th day of September, 2002, by James Bruce.


Notary Public

My Commission Expires:
3/14/05

OIL CONSERVATION DIVISION

CASE NUMBER

 EXHIBIT 13

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)

August 28, 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 W½ of Section 14, Township 21 South, Range 27 East, N.M.P.M., Eddy County, New Mexico. This application is scheduled to be heard at 8:15 a.m. on Thursday, September 19, 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, September 13, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,

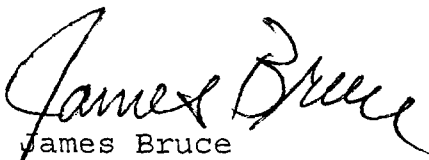

James Bruce
Attorney for Mewbourne Oil Company



EXHIBIT A

Yates Energy Corporation
P.O. Box 2323
Roswell, New Mexico 88202

Attention: Shari Hamilton

Devon Energy Production Company, L.P.
P.O. Box 108838
Oklahoma City, Oklahoma 73101-8838

Attention: Ken Gray

Cibola Energy Corporation
Jalapeno Corporation
P.O. Box 1668
Albuquerque, New Mexico

Mr. & Mrs. Michael D. Hayes
3608 Meadowridge
Midland, Texas 79707

Estate of Mary Elizabeth Locker
1513 Flintridge Road
Austin, Texas 78746

Mr. & Mrs. Mark T. Owen
3323 Providence Drive
Midland, Texas 79707

Shinnery Investment Company
Suite C
906 South St. Francis Drive
Santa Fe, New Mexico 87501

Harvey E. Yates Company
P.O. Box 1933
Roswell, New Mexico 88202

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

OFFICIAL USE

Postage	\$ 0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To Devon Energy Production Company, L.P.
P.O. Box 108838
Oklahoma City, Oklahoma 73101-8838
Street, Apt. No.; or P.O. Box
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:

Devon Energy Production Company, L.P.
P.O. Box 108838
Oklahoma City, Oklahoma 73101-8838

2. Article Number
(Transfer from service label)
7000 2870 0000 0292 0000

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-0381

M-14

COMPLETE THIS SECTION ON DELIVERY

A. Signature Harold ☐ 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

7000 2870 0000 0292 0000

102595-01-M-0381

Domestic Return Receipt

PS Form 3811, August 2001

102595-01-M-0381

M-14

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:

Mr. & Mrs. Mark T. Owen
3323 Providence Drive
Midland, Texas 79707

2. Article Number
(Transfer from service label)
7000 2870 0000 0292 0000

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-0381

M-14

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

OFFICIAL USE

Postage	\$ 0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To Mr. & Mrs. Mark T. Owen
3323 Providence Drive
Midland, Texas 79707
Street, Apt. No.; or P.O. Box
City, State, ZIP+4

PS Form 3800, May 2000

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature Mark T. Owen ☐ Agent ☒ Addressee

B. Received by (Printed Name) Mark Owen C. Date of Delivery 8-31

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

7000 2870 0000 0292 0000

Domestic Return Receipt

102595-01-M-0381

M-14

Prepared by:



U.S. Postal Service

CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$ 0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To
Yates Energy Corporation
P.O. Box 2323
Roswell, New Mexico 88202
Street, Apt. No.; or PO Box
City, State, ZIP+ 4

PS Form 3800, May 2000 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1 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:

Yates Energy Corporation
P.O. Box 2323
Roswell, New Mexico 88202

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-0381

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☒ Agent ☐ Addressee

B. Received by (Printed Name) Michael D. Hayes C. Date of Delivery 9-3-02

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

(Transfer from service label)

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-0381

SENDER: COMPLETE THIS SECTION

- Complete items 1 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:

Mr. & Mrs. Michael D. Hayes
3608 Meadowridge
Midland, Texas 79707

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-M-0381

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

OFFICIAL USE

Postage	\$ 0.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

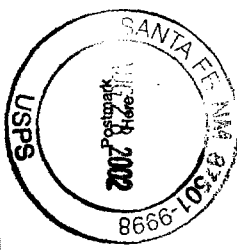
Sent To

Mr. & Mrs. Michael D. Hayes
3608 Meadowridge
Midland, Texas 79707
Street, Apt. No.; or PO Box
City, State, ZIP+ 4

PS Form 3800, May 2000

See Reverse for Instructions

Prepared by:



U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$ 0-60
Certified Fee	2-30
Return Receipt Fee (Endorsement Required)	1-75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4-65

Sent To

Cibola Energy Corporation
Jalapeno Corporation
P.O. Box 1668
Albuquerque, New Mexico
City, State, ZIP+4

PS Form 3800, May 2000

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:

Cibola Energy Corporation
Jalapeno Corporation
P.O. Box 1668
Albuquerque, New Mexico

Article Number

(Transfer from service label)

PS Form 3811, August 2001

Domestic Return Receipt

M-14

102595-01-M-0381

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:

Harvey E. Yates Company
P.O. Box 1933
Roswell, New Mexico 88202

Article Number

(Transfer from service label)

PS Form 3811, August 2001

Domestic Return Receipt

M-14

102595-01-M-0381

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) ☒ Date of Delivery 8/29/02
- C. Is delivery address different from item 1? ☐ Yes ☐ No
- D. 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

87103

Article Number

(Transfer from service label)

PS Form 3811, August 2001

Domestic Return Receipt

M-14

102595-01-M-0381

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) ☒ Date of Delivery 9-4-02
- C. Is delivery address different from item 1? ☐ Yes ☐ No
- D. 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)

OFFICIAL USE

Postage	\$ 0-60
Certified Fee	2-30
Return Receipt Fee (Endorsement Required)	1-75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4-65

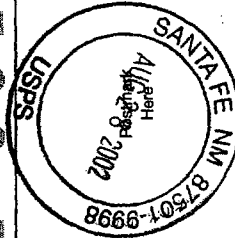
Sent To

Harvey E. Yates Company
P.O. Box 1933
Roswell, New Mexico 88202
City, State, ZIP+4

PS Form 3800, May 2000

See Reverse for Instructions

Prepared by:



U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage

\$ 0-60

Certified Fee

2-30

Return Receipt Fee
(Endorsement Required)

1-75

Restricted Delivery Fee
(Endorsement Required)

4-65

Total Postage & Fees

\$ 4-65

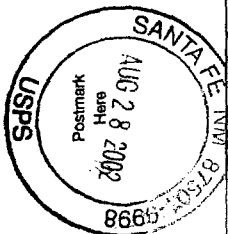
Sent To

Estate of Mary Elizabeth Locker

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

1513 Flintridge Road
Austin, Texas 78746

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:

Shinnery Investment Company
Suite C
906 South St. Francis Drive
Santa Fe, New Mexico 87501

2. Article Number

(Transfer from service label)

PS Form 3811, August 2001

7000 2870 0000 0292 0002

Domestic Return Receipt

M14

102595-01-M-0381

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

If YES, enter delivery address below: ☐ No

Service Type

☒ Certified Mail

☐ Registered

☐ Insured Mail

☐ C.O.D.

Return Receipt for Merchandise

4. Restricted Delivery? (Extra Fee) ☐ Yes

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage

\$ 0-60

Certified Fee

2-30

Return Receipt Fee
(Endorsement Required)

1-75

Restricted Delivery Fee
(Endorsement Required)

4-65

Total Postage & Fees

\$ 4-65

Sent To

Shinnery Investment Company

Suite C

906 South St. Francis Drive

Santa Fe, New Mexico 87501

City, State, ZIP+4

Prepared by:



PS Form 3800, May 2000

See Reverse for Instructions