

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

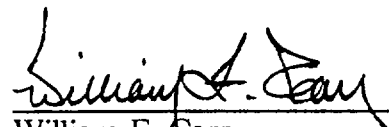
IN THE MATTER OF THE APPLICATION
OF YATES PETROLEUM CORPORATION
FOR APPROVAL OF A WATERFLOOD PROJECT,
LEA COUNTY, NEW MEXICO.

CASE NO. 10794

AFFIDAVIT

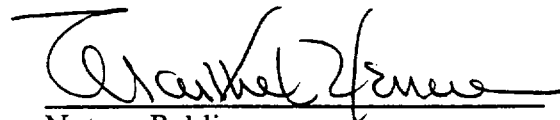
STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

William F. Carr, attorney in fact and authorized representative of Yates Petroleum Corporation, the Applicant herein, being first duly sworn, upon oath, states that in accordance with the notice provisions of Rule 1207 of the New Mexico Oil Conservation Division the Applicant has attempted to find the correct addresses of all interested persons entitled to receive notice of this application and that notice has been given at the addresses shown on Exhibit "A" attached hereto as provided in Rule 1207.



William F. Carr

SUBSCRIBED AND SWORN to before me this 11th day of August, 1993.



Notary Public

My Commission Expires:

August 19, 1995

BEFORE THE
OIL CONSERVATION DIVISION
Santa Fe, New Mexico

Case Nos. 10763 and 10794 Exhibit No. 8

Submitted by: Yates Petroleum Corporation

Hearing Date: August 12, 1993

EXHIBIT A

Penroc Oil Corporation
Post Office Box 5970
Hobbs, NM 88241

Fina Oil & Chemical Company
Post Office Box 2990
Midland, TX 79702

Elk Oil Company
Post Office Box 310
Roswell, NM 88202

H. L. Brown, Jr.
Post Office Box 2237
Midland, TX 79702

Commissioner of Public Lands
State Land Office
Post Office Box 1148
Santa Fe, NM 87504-1148

JFG Enterprises
Post Office Box 100
Artesia, NM 88210

Lynx Petroleum Consultants, Inc.
Post Office Box 1979
Hobbs, NM 88241

Eddy Potash, Inc.
Post Office Box 31
Carlsbad, NM 88220

Mobil Oil Corporation
12450 Greenspoint Drive
Houston, TX 77060-1991

CAMPBELL, CARR, BERGE

& SHERIDAN, P.A.

LAWYERS

MICHAEL B. CAMPBELL
WILLIAM F. CARR
BRADFORD C. BERGE
MARK F. SHERIDAN
WILLIAM P. SLATTERY

PATRICIA A. MATTHEWS
MICHAEL H. FELDEWERT
DAVID B. LAWRENZ

JACK M. CAMPBELL
OF COUNSEL

JEFFERSON PLACE
SUITE 1 - 110 NORTH GUADALUPE
POST OFFICE BOX 2208
SANTA FE, NEW MEXICO 87504-2208
TELEPHONE: (505) 988-4421
TELECOPIER: (505) 983-6043

July 19, 1993

CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

TO ALL LEASEHOLD OPERATORS WITHIN ONE-HALF MILE OF THE PROPOSED
INJECTION WELLS IN THE SANMAL UNIT WATERFLOOD AREA AND OWNERS
OF THE SURFACE ON WHICH THE WELLS WILL BE LOCATED

Re: Application of Yates Petroleum Corporation for a Waterflood Project, Lea
County, New Mexico

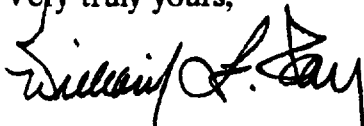
Gentlemen:

By certified letter dated July 14, 1993 you were provided a copy of the above-referenced application of Yates Petroleum Corporation for approval of a waterflood project in the Queen formation in its Sanmal Unit Area.

This application has been set for hearing before an Examiner of the Oil Conservation Division on August 12, 1993. As an owner of an interest who may be affected by this application, you may appear on the hearing date and present testimony. Failure to appear at that time or otherwise become a party of record in this case will preclude you from challenging this matter at a later date.

Parties appearing in cases before the Division have been requested to file a Pre-hearing Statement substantially in the form prescribed by the Division (Oil Conservation Division Memorandum 2-90). Pre-hearing statements should be filed by 4:00 o'clock p.m., on the Friday before a scheduled hearing.

Very truly yours,



WILLIAM F. CARR
ATTORNEY FOR YATES PETROLEUM CORPORATION
WFC:mlh

Penroc Oil Corporation
Post Office Box 5970
Hobbs, NM 88241

"Certified Mail-Return Receipt Requested"

Fina Oil & Chemical Company
Post Office Box 2990
Midland, TX 79702

"Certified Mail-Return Receipt Requested"

Elk Oil Company
Post Office Box 310
Roswell, NM 88202

"Certified Mail-Return Receipt Requested"

H. L. Brown, Jr.
Post Office Box 2237
Midland, TX 79702

"Certified Mail-Return Receipt Requested"

Commissioner of Public Lands
State Land Office
Post Office Box 1148
Santa Fe, NM 87504-1148

"Certified Mail-Return Receipt Requested"

JFG Enterprises
Post Office Box 100
Artesia, NM 88210

"Certified Mail-Return Receipt Requested"

Lynx Petroleum Consultants, Inc.
Post Office Box 1979
Hobbs, NM 88241

"Certified Mail-Return Receipt Requested"

Eddy Potash, Inc.
Post Office Box 31
Carlsbad, NM 88220

"Certified Mail-Return Receipt Requested"

Mobil Oil Corporation
12450 Greenspoint Drive
Houston, TX 77060-1991

"Certified Mail-Return Receipt Requested"



No Insurance Coverage Provided

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date <i>July 19, 1993</i>	

PS Form 3800, June 1991

[illegible]



Receipt for Certified Mail

No Insurance Coverage Provided

H. L. Brown, Jr.
Post Office Box 2237
Midland, TX 79702

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date July 19, 1993	

PS Form 3800, June 1991

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4 if it is a REGISTERED MAIL . Fill in the reverse of P-15. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for rates and conditions. For additional services request additional postage stamps and addressee's address.	
1. Article Addressed to:	2. Restricted Delivery <input type="checkbox"/> (Extra charge)
Large Number 711 333 419	
Type of Service: <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Return Receipt for Merchandise
Always obtain signature of addressee or Agent and DATE DELIVERED.	
8. Addressee's Address (ONLY if required and fee paid)	
Signature — Address	
Signature — Agent	
Date of Delivery	

PS Form 3811; Mar. 1968 U.S.G.P.O. 1968-212-666 DOMESTIC RETURN RECEIPT



Lynx Petroleum Consultants, Inc.
 Post Office Box 1979
 Hobbs, NM 88241

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date <i>July 19, 1993</i>	

PS Form 3800, June 1991

PS Form 3811, Mar. 1988 U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4 if the return receipt is to be sent to the sender. Failure to do this will prevent the card from being returned to you. The return receipt will provide the name of the person delivered to and the date of delivery. For additional services the following services are available. Consult postmaster for rates and special boxes for additional services requested.

1. ☒ Show to whom delivered, date, and addressee's address. *(No charge)*

2. Article Addressed to: *(No charge)*

3. Article Number: *111 333 418*

4. Type of Service:
☒ Registered
☐ Certified
☐ Insured
☐ COD
☐ Return Receipt for Merchandise
☐ Express Mail
☐ Restricted Delivery *(No charge)*

5. Signature - Address
 Lynx Petroleum Consultants, Inc.
 Post Office Box 1979
 Hobbs, NM 88241

6. Signature - Agent
[Signature]

7. Date of Delivery
7-21-93

8. Signature of Addressee (ONLY if requested and fee paid)
[Signature]

9. Always obtain signature of addressee or agent and DATE DELIVERED.



No Insurance Coverage Provided

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date <i>July 19, 1993</i>	

PS Form 3800, June 1991

<p>SENDER: Complete items 1 and 2 WITH ADDITIONAL SERVICES as desired. And complete item 3 if desired.</p> <p>1. Your address in the RETURN TO: space on the reverse side. Failure to do this will prevent mail sent from being returned to you. The return restriction fee will provide you the name of the period delivered during the date delivery. For additional fees the following services are available. Consult postmaster for details and check boxes for additional services requested.</p> <p>2. Show to whom delivered (date) and addressee's address.</p>					
<p>Article Addressed to: _____ (Do not change)</p>					
<p>Article Number: <u>711-330447</u></p>					
<p>Type of Service:</p> <p><input checked="" type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified Mail <input type="checkbox"/> Restricted Delivery</p> <p><input type="checkbox"/> Signature Required <input type="checkbox"/> Return Receipt <input type="checkbox"/> Express Mail <input type="checkbox"/> Priority Mail</p>					
<p>Make a note of listing of addresses of agent and DATE DELIVERED.</p>					
<p>8. Addressee's Address (ONLY IF REQUESTED AND PAID)</p>					
<p>Date of Delivery _____</p>					
<p>Signature - Agent _____</p>					
<p>Signature - Addressee _____</p>					
<p>Fina Oil & Chemical Company Post Office Box 2990 Midland, TX 79702</p>					
<p>Form 3811j Mar. 1988 U.S.A.P.O. 1988-212-665 DOMESTIC RETURN RECEIPT</p>					

No Insurance Coverage Provided

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date July 19, 1993	

PS Form 3800, June 1991

<p>SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4 when in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for rates and special boxes for additional services requested.</p> <p>1. <input checked="" type="checkbox"/> Show to whom delivered, date, and addressee's address. <input type="checkbox"/> Restricted Delivery</p> <p>2. <input type="checkbox"/> Signature Required (Extra charge)</p> <p>3. Article Addressed to: <input type="checkbox"/> (Extra charge)</p>		<p>Article Number: 7111333446</p>	
<p>Commissioner of Public Lands State Land Office Post Office Box 1148 Santa Fe, NM 87504-1148</p>		<p>Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> COO, Return Receipt for Merchandise</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p>	
<p>Signature - Addressee: <i>[Signature]</i></p> <p>Signature - Agent: <i>[Signature]</i></p> <p>Date of Delivery: <i>[Blank]</i></p>		<p>Always obtain signature of addressee of Agent and DATE DELIVERED.</p> <p>8. Address - Addressee: 7111333446</p> <p>9. Address - Agent: <i>[Blank]</i></p>	

201
1993

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-665 DOMESTIC RETURN RECEIPT

P 111 333 415



**Receipt for
Certified Mail**

No Insurance Coverage Provided

Eddy Potash, Inc.
Post Office Box 31
Carlsbad, NM 88220

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date <i>July 19, 1993</i>	

PS Form 3800, June 1991

1. Article Addressed to: Eddy Potash, Inc. Post Office Box 31 Carlsbad, NM 88220		2. Article Number: <i>211-333-415</i>	
3. Signature - Addressee: <i>[Signature]</i>		4. Type of Service: <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Restricted Delivery	
5. Signature - Agent: <i>[Signature]</i>		6. Addressee's Address (ONLY if returned and fee paid): Always attach signature of addressee or agent and DATE DELIVERED.	
7. Date of Delivery: <i>7-11-93</i>		8. Domestic Return Receipt: PS Form 3811, Mar. 1988	



P 111 333 414

**Receipt for
Certified Mail**

No Insurance Coverage Provided

Elk Oil Company
Post Office Box 310
Roswell, NM 88202

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date <i>July 19, 1993</i>	

PS Form 3800, June 1991

PS Form 3811, Mar. 1988 * Use P.D. 1086-212-865

DOMESTIC RETURN RECEIPT

1. Article Addressed to:
Elk Oil Company
Post Office Box 310
Roswell, NM 88202

2. Article Number:
111 333 414

3. Type of Service:
☒ Certified
☐ Registered
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

4. Addressee's signature of address
[Signature]

5. Date of delivery
7-19-93

6. Postmark or Date
July 19, 1993

7. Return Receipt Showing to Whom & Date Delivered
[Signature]

8. Return Receipt Showing to Whom, Date, and Addressee's Address
[Signature]

9. TOTAL Postage & Fees
\$

10. Postmark or Date
July 19, 1993



**Receipt for
Certified Mail**

No Insurance Coverage Provided

JFG Enterprises
Post Office Box 100
Artesia, NM 88210

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	July 19, 1993

PS Form 3800, June 1991

PS Form 3811, Mar. 1988 U.S.D.P.S. 1988-212-865 DOMESTIC RETURN RECEIPT

1. Article Addressed to: JFG Enterprises Post Office Box 100 Artesia, NM 88210		2. Complete items 1 and 2 when additional services are desired, and complete items 3 and 4 when a return receipt is desired. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this receipt being returned to you. The return receipt fee will provide you the name of the person delivered to, the date of delivery, for additional services requested, and the date and address of the person delivered to. Show to whom delivered, date, and addressee's address.	
3. Signature - Address Signature - Agent Date of Delivery 7-21-93		4. Article Number 0111 333 413	
5. Signature - Agent Date of Delivery 7-21-93		6. Type of Service: <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD <input type="checkbox"/> Return Receipt for Merchandise	
7. Addressee's Address (ONLY if requested and fee paid) Always obtain signature of addressee or agent and DATE DELIVERED.		8. Addressee's Address (ONLY if requested and fee paid) Always obtain signature of addressee or agent and DATE DELIVERED.	



P 111 333 412

**Receipt for
Certified Mail**

No Insurance Coverage Provided

Mobil Oil Corporation
12450 Greenspoint Drive
Houston, TX 77060-1991

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date <i>July 19, 1993</i>	

PS Form 3800, June 1991

PS Form 3811, Mar. 1988 U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes. Add additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

Mobil Oil Corporation
12450 Greenspoint Drive
Houston, TX 77060-1991

4. Article Number: *111 333 412*

5. Signature — Address

6. Signature — Agent: *[Signature]*

7. Date of Delivery: *JUL 26 1993*

8. Addressee's Address (ONLY if requested and fee paid):
Always obtain signature of addressee or agent and DATE DELIVERED.

Type of Service:
☒ Certified
☐ Registered
☐ Insured
☐ Express Mail
☐ COD
☐ Return Receipt for Merchandise