

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF SANTA FE ENERGY
OPERATING PARTNERS, L.P. FOR
AN UNORTHODOX GAS WELL LOCATION,
EDDY COUNTY, NEW MEXICO.

No. 10,837

AFFIDAVIT REGARDING NOTICE

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

Curtis D. Smith, being duly sworn upon his oath, deposes and states:

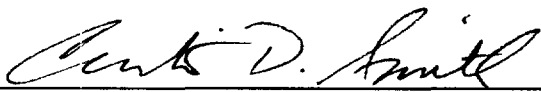
1. I am over the age of 18 and have personal knowledge of the matters stated herein.

2. I am a landman for Applicant herein.

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

4. Notice of the Application was provided to the interest owners at their correct addresses by mailing them, by certified mail, a copy of the Application. Copies of the notice letters and certified return receipts are attached hereto.

5. The notice provisions of Rule 1207 have been complied with.


Curtis D. Smith

SUBSCRIBED AND SWORN TO before me this 6th day of October, 1993.


Notary Public

My commission expires:

8-15-95

JGB5\93H82.d

NEW MEXICO
CONSERVATION DIVISION

EXHIBIT 3

FILE NO. _____



Santa Fe Energy Operating Partners, L.P.

Santa Fe Pacific Exploration Company
Managing General Partner

CERTIFIED MAIL - RETURN RECEIPT

September 14, 1993

TO: Offset Operators
(See Attached List)

Re: Application for Unorthodox Location
SFEOP Cont. #NM-4517-2
North Pure Gold "9" Fed. #2 Well
660' FSL & 660' FWL
Sec. 9: T-23-S, R-31-E
Eddy County, New Mexico

Gentlemen:

Enclosed is a copy of an Application for an unorthodox gas well location filed at the New Mexico Oil Conservation Division by Santa Fe Energy Operating Partners, L.P. regarding the S½ of Section 9, Township 23 South, Range 31 East, N.M.P.M., Eddy County, New Mexico. Santa Fe's records indicate that you are an operator or lessee offsetting the proposed well unit. This matter has been scheduled for hearing on Thursday, October 7, 1993 at 8:15 a.m. at the Division's offices at 310 Old Santa Fe Trail, Santa Fe, New Mexico. Failure to appear at that time will preclude you from contesting this matter at a later date.

If you plan to enter an appearance in this matter, Division Memorandum 2-90 requests that you file a Pre-Hearing Statement with the Division, and send a copy thereof to the applicant, no later than 4:00 p.m. on Friday, October 1, 1993.

Yours very truly,

SANTA FE ENERGY OPERATING PARTNERS, L.P.
By: Santa Fe Pacific Exploration Company
Managing General Partner

By: 
Curtis D. Smith, Senior Landman

CDS/efw
1 Encl a/s

EWP1174

OFFSET OPERATORS LIST

Pure Gold "9" Fed #2 Well

1. Mitchell Energy Corporation
400 West Illinois
Suite 1000
Midland, Texas 79701
ATTN: Mr. Don McClung
2. Siete Oil & Gas Corporation
Petroleum Bldg., Suite 200
Roswell, New Mexico 88201
ATTN: Mr. Gene Shumate
3. Perry R. Bass, Inc.
Sid R. Bass, Inc.
Thru-Line, Inc.
Keystone, Inc.
Lee M. Bass, Inc.
c/o Bass Enterprises Production Co.
201 Main Street
Fort Worth, Texas 76102
ATTN: Mr. Jens Hansen
4. Pogo Producing Company
500 West Illinois
Suite 600
Midland, Texas 79701
ATTN: Mr. Scott McDaniel
5. Enron Oil & Gas Company
P.O. Box 2267
Midland, Texas 79702
ATTN: Mr. Patrick J. Tower

Is your RETURN ADDRESS completed on the reverse side? Is

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:
ATTN: MR. DON McCLEUNG
MITCHELL ENERGY CORP.
400 WEST ILLINOIS SUITE 1000
MIDLAND TEXAS 79701

4a. Article Number
P 237 056 837

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

7. Date of Delivery
9-15-93

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)
Don McCleung

P 237 056 837



Receipt for Certified Mail
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Mitchell Energy Corp.	
400 W. Illinois Ste 1000	
Midland, Texas, 79701	
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	

PS Form 3800, June 1991

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side? Is

SENDER:

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- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

ATTN: MR. GENE SHUMATE
SIETE OIL & GAS CORPORATION
PETROLEUM BLDG SUITE 200
ROSWELL NEW MEXICO 88201

5. Signature (Addressee)

6. Signature (Agent)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

For a Postmaster for fee.

4a. Article Number

P 237 056 838

4b. Service Type

☐ Registered ☐ Insured

☒ Registered Mail ☐ COD

☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery

9-15-93

8. Addressee's Address (Only if requested and fee is paid)

P 237 056 838

**Receipt for
Certified Mail**

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)



Sent to:

Siete Oil & Gas Corp.

Street and No.

Petroleum Bldg Ste. 200

P.O. State and ZIP Code

Roswell, New Mexico 88201

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

PS Form 3800, June 1991

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side? Is

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
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- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:
ATTN: JR. JENS HANSEN
BASS ENTERPRISES PROD. CO.
201 MAIN STREET
FORT WORTH TEXAS 76102

5. Signature (Addressee)

6. Signature (Agent)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

P. 237 056 839

4b. Service Type

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery

SEP 16 1993

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

P 237 056 839



**Receipt for
Certified Mail**

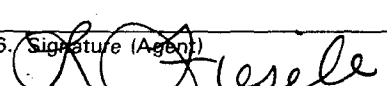
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Start To	Bass Enterprises Prod. Co.
Street and No.	201 Main Street
P.O. Number and ZIP Code	Ft. Worth, Texas 76102
Postage	\$
Certification 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	

PS Form 3800, June 1991

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: <ul style="list-style-type: none">• Complete items 1 and/or 2 for additional services.• Complete items 3, and 4a & b.• Print your name and address on the reverse of this form so that we can return this card to you.• Attach this form to the front of the mailpiece, or on the back if space does not permit.• Write "Return Receipt Requested" on the mailpiece below the article number.• The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: ATTN: MR. SCOTT McDANIEL POGO PRODUCING COMPANY 500 WEST ILLINOIS SUITE 600 MIDLAND TEXAS 79701		4a. Article Number P 237 056 843	
5. Signature (Addressee) 		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input checked="" type="checkbox"/> Express Mail <input checked="" type="checkbox"/> Return Receipt for Merchandise	
6. Signature (Agent)		7. Date of Delivery 9-15-93	
		8. Addressee's Address (Only if requested and fee is paid)	

P 237 056 843



Pogo Producing Company	
500 W Illinois Ste 600	
Midland, Texas 79701	
By	\$
Certified Fee	
Signature	
Postage	
Return Receipt	
Registered	
Insured	
Express Mail	
Return Receipt for Merchandise	
Signature	
Date	

Fold at line over top of envelope to the return address

Thank you for using Return Receipt Service.

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- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

ATTN: MR. PATRICK J. TOWER
ENRON OIL & GAS COMPANY
P.O. BOX 2267
MIDLAND TEXAS 79702

5. Signature (Addressee)

6. Signature (Agent)

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

P 237 056 844

4b. Service Type

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery

SEP 15 1993

8. Addressee's Address (Only if requested and fee is paid)

P 237 056 844



**Receipt for
Certified Mail**

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

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

PS Form 3800, June 1991

PS Form 3811, December 1991

★U.S. GPO: 1992-323-402

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.