

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

September 8, 2011

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

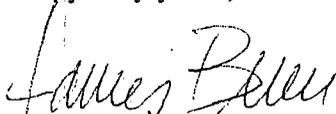
Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling and a non-standard spacing and proration unit, filed with the New Mexico Oil Conservation Division by Cimarex Energy Co., regarding the S½N½ of Section 3, Township 15 South, Range 31 East, N.M.P.M., Chaves County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, September 29, 2011, in Porter Hall at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, September 22, 2011. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Cimarex Energy Co.

EXHIBIT A

EXHIBIT A

Sigyn Lund
c/o Hilmer H. Graham
Apartment 307
110-55 72nd Road
Forrest Hills, New York 11375

Clare L. Fraser
133 East 64th Street
New York, New York 10021

Don M. Kidwell
4208 Fairwood Place
Midland, Texas 79707

Jase Minerals, LP
P.O. Box 904
Midland, Texas 79702

First Roswell Company
111 South Kentucky Avenue
Roswell, New Mexico 88203

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:

Signy Lund
 c/o Hilmer H. Graham
 Apartment 307
 110-55 72nd Road
 Forrest Hills, New York 11375

2. Article Number
(Transfer from service label)

7008 1140 0003 5861 6750

PS Form 3811, February 2004

Domestic Return Receipt

CX 3-1

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Hilmer Graham*

Agent

Addressee

B. Received by (Printed Name)

Hilmer Graham

C. Date of Delivery

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

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:

Clare L. Fraser
 133 East 64th Street
 New York, New York 10021

2. Article Number
(Transfer from service label)

7008 1140 0003 5861 6767

PS Form 3811, February 2004

Domestic Return Receipt

CX 3-1

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Clare L. Fraser*

Agent

Addressee

B. Received by (Printed Name)

Clare L. Fraser

C. Date of Delivery

9/19/11

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)

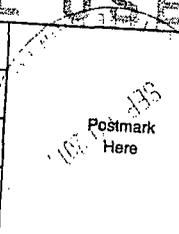
Yes

7006 1140 0003 5861 6750

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OFFICIAL USE

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

Sent To: Sigyn Lund
 c/o Hilmer H. Graham
 Apartment 307
 110-55 72nd Road
 Forrest Hills, New York 11375

Street, Apt. No., or PO Box No.
 City, State, ZIP+4

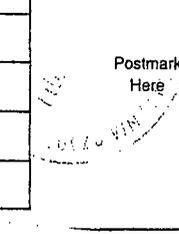
PS Form 3800, August 2006 See Reverse for Instructions

7006 1140 0003 5861 6757

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OFFICIAL USE

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

Sent To: Clare L. Fraser
 133 East 64th Street
 New York, New York 10021

Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions