

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

IN THE MATTER OF THE HEARING:
CALLED BY THE OIL CONSERVATION
DIVISION FOR THE PURPOSE OF
CONSIDERING:

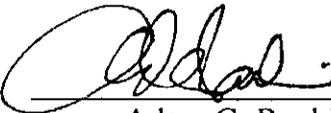
AMENDED APPLICATION OF EOG RESOURCES, INC. FOR CREATION OF A NON-STANDARD 160-ACRE SPACING AND PRORATION UNIT FOR ALL FORMATION AND/OR POOLS DEVELOPED ON 40 ACRE SPACING FROM THE SURFACE TO THE BASE OF THE BONE SPRINGS FORMATION, FOR CREATION OF A NON-STANDARD 320-ACRE SPACING AND PRORATION UNIT IN THE WOLFCAMP FORMATION, AND FOR COMPULSORY POOLING, LEA COUNTY, NEW MEXICO.

CASE NO. 15126

AFFIDAVIT

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

Adam G. Rankin, attorney in fact and authorized representative of EOG Resources, Inc., the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter and proof of receipt attached hereto.

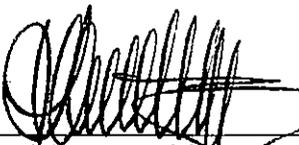


Adam G. Rankin

SUBSCRIBED AND SWORN to before this 28th day of May 2013 by Adam G. Rankin.



OFFICIAL SEAL
MARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01/14/15



Notary Public

BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 5
Submitted by: EOG RESOURCES, INC.
Hearing Date: June 12, 2014

HOLLAND & HART^{LLP}



Michael H. Feldewert
Recognized Specialist in the Area
of Natural Resources - oil and gas law
New Mexico Board of Legal
Specialization
mfeldewert@hollandhart.com

May 9, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

Re: Case No. 15126: Amended Application of EOG Resources, Inc. For Creation Of A Non-Standard 160-Acre Spacing And Proration Unit For All Formations And/Or Pools Developed On 40-Acre Spacing From The Surface To The Base Of The Bone Springs Formation, For Creation Of A Non-Standard 320-Acre Spacing And Proration Unit In The Wolfcamp Formation, And For Compulsory Pooling, Lea County, New Mexico. Ophelia 27 701H Well

This letter is to advise you that EOG Resources, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on May 29, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint 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 challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all 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 are to be resolved prior to the hearing.

Questions concerning this application should be directed to Dan McCright at (432) 686-3741 or dan_mccright@eogresources.com.

Sincerely,

Michael H. Feldewert

ATTORNEY FOR EOG RESOURCES, INC.

Holland & Hart^{LLP}

Phone [505] 988-4421 Fax [505] 983-6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe, NM 87501 Mailing Address P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. ☺

HOLLAND & HART



Michael H. Feldewert
Recognized Specialist in the Area of
Natural Resources - oil and gas law - New
Mexico Board of Legal Specialization
mfeldewert@hollandhart.com

May 9, 2014

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

Re: Case No. 15126: Amended Application of EOG Resources, Inc. For Creation Of A Non-Standard 160-Acre Spacing And Proration Unit For All Formations And/Or Pools Developed On 40-Acre Spacing From The Surface To The Base Of The Bone Springs Formation, For Creation Of A Non-Standard 320-Acre Spacing And Proration Unit In The Wolfcamp Formation, And For Compulsory Pooling, Lea County, New Mexico. Ophelia 27 701H Well

Ladies & Gentlemen:

This letter is to advise you that EOG Resources, Inc., has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on May 29, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint 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 challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all 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 are to be resolved prior to the hearing.

If you have any questions about this matter please contact Dan McCright, at (432) 686-3741 or dan_mccright@eogresources.com.

Sincerely,

Michael H. Feldewert
ATTORNEY FOR EOG RESOURCES, INC.

Holland & Hart LLP

Phone (505) 988-4421 Fax (505) 983-6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe, NM 87501 Mailing Address PO Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. ☺

**EOG RESOURCES, INC
AMENDED OPHELIA 27 #701H WELL**

POOLED PARTIES

Ricki Raindl
P.O. Box 142454
Irving, Texas 75014-2454

Debra Kay Primera
P.O. Box 28504
Austin, Texas 78755

OFFSET:

Bennett T. Easterling
P. O. Box 1888
Quemado, New Mexico 87829

Lance Sears Easterling
522 Harbert Street
Columbus, Texas 78934

Susan Swaim
P. O. Box 1014
Truth or Consequences, NM
87901

Katherine Ross Madera Sharbutt
433 Chaco Drive
Alamogordo, New Mexico 88310

Lela Ellen Madera
1815 Scenic View Drive
Canyon Lake, Texas 78113

Zane Kiehne
2107 S. Cactus
Pecos, Texas 79772

Elizabeth Lucille Rectenwald
5320 Sandywood Court
Carmichael, CA 95608

Ross Eugene Easterling, Jr.
P. O. Box 771435
Steamboat Springs, CO 80477

Nail Bay Royalties, LLC
P. O. Box 671099
Dallas, Texas 75367

Oscura Resources, Inc.
P. O. Box 2292
Roswell, New Mexico 88202

Robert Mitchell Raindl
P. O. Box 853
Tahoka, Texas 79373

Raymond F. Fort
P. O. Box 65043
Lubbock, Texas 79464

Dorchester Minerals
3838 Oak Lawn Avenue,
Suite 300
Dallas, Texas 75219

ConocoPhillips Company
600 North Dairy Ashford
Houston, Texas 77079

Bureau of Land Management
620 East Greene Street
Carlsbad, New Mexico 88220

7006 2760 0001 6376 5183

U.S. Postal Service™
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Postage \$ 6.49
 Certified Fee 3.30
 Return Receipt Fee (Endorsement Required) 2.70
 Restricted Delivery Fee (Endorsement Required) _____
 Total Postage & Fees \$ 6.49

Postmark Here
MAY -9 2014

Ricki Raindl
 P.O. Box 142454
 Irving, Texas 75014-2454

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:
 Ricki Raindl
 P.O. Box 142454
 Irving, Texas 75014-2454

2. Article Number (Transfer from service label) 7006 2760 0001 6376 5183

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X Ricky D. Raindl

B. Received by (Printed Name) Ricky D. Raindl C. Date of Delivery 5-13-14

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

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 2760 0001 6376 5220

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 Certified Fee 3.30
 Return Receipt Fee (Endorsement Required) 2.70
 Restricted Delivery Fee (Endorsement Required) _____
 Total Postage & Fees \$ 6.49

Postmark Here
MAY -9 2014

Debra Kay Primera
 P.O. Box 28504
 Austin, Texas 78755

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.

Article Addressed to:
 Debra Kay Primera
 P.O. Box 28504
 Austin, Texas 78755

2. Article Number (Transfer from service label) 7006 2760 0001 6376 5220

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X Debra Kay Primera

B. Received by (Printed Name) Debra Kay Primera C. Date of Delivery 5-19-14

D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

MAY 19 2014

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 2760 0001 6376 5299

U.S. Postal Service™
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 For delivery information: OPHELIA 701H
OFFICE

Postage	\$ 6.49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	6.49
Total Postage & Fees	\$ 18.98



Bennett T. Easterling
 P. O. Box 1888
 Quemado, New Mexico 87829

Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

- 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.

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Cathy Carrejo* Agent Addressee

B. Received by (Printed Name): *Cathy Carrejo* 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

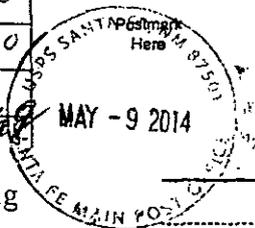
1. Article Addressed to:
 Bennett T. Easterling
 P. O. Box 1888
 Quemado, New Mexico 87829

2. Article Number (Transfer from service label) 7006 2760 0001 6376 5299

7006 2760 0001 6376 5190

U.S. Postal Service™
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OFFICE

Postage	\$ 6.49
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	6.49
Total Postage & Fees	\$ 18.98



Lance Sears Easterling
 522 Harbert Street
 Columbus, Texas 78934

Instructions

7006 2760 0001 6376 5466

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Provided)
 MHF/EOG
 OPHELIA 701H

OFFICE

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$ 1668

Postmark Here
 MAY -9 2014

To
 Susan Swaim
 P. O. Box 1014
 Truth or Consequences, NM
 87901

Instructions

CERTIFIED MAIL
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature X [Signature] Agent Addressee
 B. Received by (Printed Name) Ken Swaim C. Date of Delivery 5-13-14
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

1. Article Addressed to:
 Susan Swaim
 P. O. Box 1014
 Truth or Consequences, NM
 87901

2. Article Number (Transfer from service label) 7006 2760 0001 6376 5466

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

7006 2760 0001 6376 5305

U.S. Postal Service
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OFFICE

Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669
 Total Postage & Fees \$ 1668

Postmark Here
 MAY -9 2014

To
 Katherine Ross Madera Sharbutt
 433 Chaco Drive
 Alamogordo, New Mexico 88310

Instructions

CERTIFIED MAIL
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

COMPLETE THIS SECTION ON DELIVERY

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature X [Signature] Agent Addressee
 B. Received by (Printed Name) B. M. Jorum C. Date of Delivery 05/13/14
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

1. Article Addressed to:
 Katherine Ross Madera Sharbutt
 433 Chaco Drive
 Alamogordo, New Mexico 88310

2. Article Number (Transfer from service label) 7006 2760 0001 6376 5305

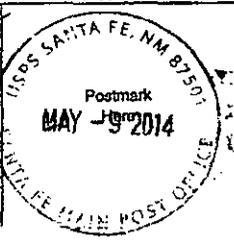
3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

7006 2760 0001 6376 5206

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Postage	\$	68
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	668

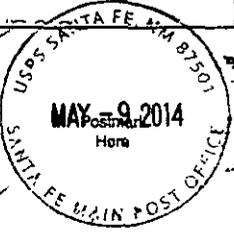


Lela Ellen Madera
 1815 Scenic View Drive
 Canyon Lake, Texas 78113

7006 2760 0001 6376 5275

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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 MHF/EOG
 For delivery information, visit **OPHELIA 701H**
OFFIC

Postage	\$	68
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	668



Sent to: Zane Kiehne
 Street or PO: 2107 S. Cactus
 City: Pecos, Texas 79772

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

Lela Ellen Madera
 1815 Scenic View Drive
 Canyon Lake, Texas 78113

2. Article Number (Transfer from service label): 7006 2760 0001 6376 5206

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Lela Ellen Madera* 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

102595-02-M-1540

Returned

U.S. Postal Service
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 MHF7EUG
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Postage \$ 6.68
 Certified Fee 3.30
 Return Receipt Fee (Endorsement Required) 2.70
 Restricted Delivery Fee (Endorsement Required) 6.68

Postmark Here
MAY -9 2014
 U.S. POST OFFICE
 SANTA FE, NM 87501

Elizabeth Lucille Rectenwald
 5320 Sandywood Court
 Carmichael, CA 95608

7006 2760 0001 6376 5312

RECEIVED MAIL
 PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE
 COMPLETE THIS SECTION ON DELIVERY

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. Attach this card to the back of the mailpiece, or on the front if space permits.

A. Signature Agent Addressee
Elizabeth Rectenwald

B. Received by (Printed Name) _____ C. Date of Delivery _____

D. Is delivery address different from 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

1. Article Addressed to:
 Elizabeth Lucille Rectenwald
 5320 Sandywood Court
 Carmichael, CA 95608

2. Article Number (Transfer from service label) 7006 2760 0001 6376 5312

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U.S. Postal Service
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 For delivery information visit **OFFIC**
 MHF7EUG
 OPHELIA 701H

Postage \$ 6.68
 Certified Fee 3.30
 Return Receipt Fee (Endorsement Required) 2.70
 Restricted Delivery Fee (Endorsement Required) 6.68

Postmark Here
MAY -9 2014
 U.S. POST OFFICE
 SANTA FE, NM 87501

Ross Eugene Easterling, Jr.
 P. O. Box 771435
 Steamboat Springs, Colorado
 80477

7006 2760 0001 6376 5212

7006 2760 0001 6376 5282

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 MHF/EOG
 For delivery information visit **OPHELIA 701H**
OFFICE

Postage	\$	6.69
Certified Fee		3.30
Return Receipt Fee (Endorsement Required)		2.70
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	6.69



Nail Bay Royalties, LLC
 P. O. Box 671099
 Dallas, Texas 75367

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:
 Nail Bay Royalties, LLC
 P. O. Box 671099
 Dallas, Texas 75367

2. Article Number (Transfer from service label): 7006 2760 0001 6376 5282

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *X MARGIT* Agent Addressee

B. Received by (Printed Name): *MARGIT* C. Date of Delivery: *05/13/14*

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

7006 2760 0001 6376 5329

U.S. Postal Service™
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 MHF/EOG
 For delivery information visit **OPHELIA 701H**
OFFICE

Postage	\$	6.69
Certified Fee		3.30
Return Receipt Fee (Endorsement Required)		2.70
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	6.69



Oscura Resources, Inc.
 P. O. Box 2292
 Roswell, New Mexico 88202

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:
 Oscura Resources, Inc.
 P. O. Box 2292
 Roswell, New Mexico 88202

2. Article Number (Transfer from service label): 7006 2760 0001 6376 5329

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *X [Signature]* Agent Addressee

B. Received by (Printed Name): C. Date of Delivery: *MAY 12 2014*

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

7006 2760 0001 6376 5336

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only, No In...)
 MHF/EUG
 OPHELIA 701H
OFFIC

Postage \$ 6.68
 Certified Fee 3.30
 Return Receipt Fee (Endorsement Required) 2.70
 Restricted Delivery Fee (Endorsement Required) 6.68
 Total Postage & Fees 19.36

Postmark Here
 MAY -9 2014
 SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Send to:
 Recipient's Name: Robert Mitchell Raindl
 Recipient's Address: P. O. Box 853
 City: Tahoka, Texas 79373

PS Form 3811, February 2004

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:
 Robert Mitchell Raindl
 P. O. Box 853
 Tahoka, Texas 79373

2. Article Number (Transfer from service label): 7006 2760 0001 6376 5336

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: Robert Mitchell Raindl Agent Addressee

B. Received by (Printed Name): Robert Mitchell Raindl

C. Date of Delivery: 5-14-14

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

7006 2760 0001 6376 5350

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only, No In...)
 MHF/EUG
 OPHELIA 701H
OFFIC

Postage \$ 6.68
 Certified Fee 3.30
 Return Receipt Fee (Endorsement Required) 2.70
 Restricted Delivery Fee (Endorsement Required) 6.68
 Total Postage & Fees 19.36

Postmark Here
 MAY -9 2014
 SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Send to:
 Recipient's Name: Raymond F. Fort
 Recipient's Address: P. O. Box 65043
 City: Lubbock, Texas 79464

PS Form 3811, February 2004

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:
 Raymond F. Fort
 P. O. Box 65043
 Lubbock, Texas 79464

2. Article Number (Transfer from service label): 7006 2760 0001 6376 5350

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: Paulette Boyd Agent Addressee

B. Received by (Printed Name): Paulette Boyd

C. Date of Delivery: 5-14-14

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

7006 2760 0001 6376 5367

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only, No Insurance)
 MHF/EOG
 For delivery information visit **OPHELIA 701H**
OFFICE

Postage	\$	6.99
Certified Fee		3.30
Return Receipt Fee (Endorsement Required)		2.70
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	6.68

Postmark Here
 MAY - 9 2014
 U.S. POST OFFICE
 SANTA FE, NM 87501

Dorchester Minerals
 3838 Oak Lawn Avenue, Suite 300
 Dallas, Texas 75219

PS Form 3811, February 2004

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:
 Dorchester Minerals
 3838 Oak Lawn Avenue, Suite 300
 Dallas, Texas 75219

2. Article Number (Transfer from service label) 7006 2760 0001 6376 5367

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Carol Crabtree
 Agent Addressee

B. Received by (Printed Name) **CAROL CRABTREE** C. Date of Delivery **5-12-14**

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 2760 0001 6376 5367

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only, No Insurance)
 MHF/EOG
 For delivery information visit **OPHELIA 701H**
OFFICE

Postage	\$	6.99
Certified Fee		3.30
Return Receipt Fee (Endorsement Required)		2.70
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	6.68

Postmark Here
 MAY - 9 2014
 U.S. POST OFFICE
 SANTA FE, NM 87501

ConocoPhillips Company
 600 North Dairy Ashford
 Houston, Texas 77079

PS Form 3811, February 2004

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:
 ConocoPhillips Company
 600 North Dairy Ashford
 Houston, Texas 77079

2. Article Number (Transfer from service label) 7006 2760 0001 6376 5367

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 [Signature]
 Agent Addressee

B. Received by (Printed Name) [Signature] 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

7006 2760 0001 6376 5176

U.S. Postal Service TM
CERTIFIED MAIL™ RECEIPT
(Domestic Mail Only; No Postage Necessary for Return Receipt)

For delivery information visit **OPHELIA 701H OFFICE**

Postage	\$	
Certified Fee		330
Return Receipt Fee (Endorsement Required)		270
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		

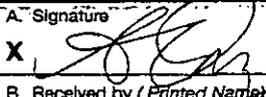
Postmark
MAY - 9 2014

USPS SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Bureau of Land Management
 620 East Greene Street
 Carlsbad, New Mexico 88220

For Instructions:

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS. FOLD AT PORTED LINE.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> 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. 	<p>A. Signature X  <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery 5/12/14</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below: _____</p>
<p>1. Article Addressed to:</p> <p>Bureau of Land Management 620 East Greene Street Carlsbad, New Mexico 88220</p>	<p>3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>
<p>2. Article Number (Transfer from service label)</p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
<p>7006 2760 0001 6376 5176</p>	

Lisamarie Ortiz

From: Gabrielle Gerholt
Sent: Wednesday, April 09, 2014 3:58 PM
To: Lisamarie Ortiz
Cc: Michael Feldewert
Subject: EOG: Ophelia 701H notice

Pooled parties:
Ricky D. Raindl
PO Box 142454
Irving, TX 75014

Debra Kay Primera
PO Box 28504
Austin, TX 78755

Offsets:
ConocoPhillips Company
600 N. Dairy Ashford
Houston, TX 77079

Gabrielle A Gerholt

Holland & Hart LLP
110 North Guadalupe Suite 1
Santa Fe, NM 87501
Phone (505) 988-4421
Fax (505) 983-6043
E-mail: gagerholt@hollandhart.com

HOLLAND & HART. 

CONFIDENTIALITY NOTICE: This message is confidential and may be privileged. If you believe that this email has been sent to you in error, please reply to the sender that you received the message in error; then please delete this e-mail. Thank you.

HOLLAND & HART



Michael H. Feldewert
Recognized Specialist in the Area
of Natural Resources - oil and gas law
New Mexico Board of Legal
Specialization
mfeldewert@hollandhart.com

April 11, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

**TO: OFFSETTING LESSEES AND
OPERATORS**

**RE: Application of EOG Resources, Inc. for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.
(Ophelia 27 701H Well)**

This letter is to advise you that EOG Resources, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on May 1, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint 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 challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-Hearing Statement with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all 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 are to be resolved prior to the hearing.

Questions concerning this application should be directed to Dan McCright at (432) 686-3741 or dan_mccright@eogresources.com.

Sincerely,


Michael H. Feldewert
ATTORNEY FOR EOG RESOURCES, INC.

Holland & Hart LLP

Phone (505) 908-4421 Fax (505) 983-6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe, NM 87501 Mailing Address P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. ☺

HOLLAND & HART^{LLP}



Michael H. Feldewert
Recognized Specialist in the Area of
Natural Resources - oil and gas law - New
Mexico Board of Legal Specialization
mfeldewert@hollandhart.com

April 11, 2014

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of EOG Resources, Inc. for a non-standard spacing and
proration unit and compulsory pooling, Lea County, New Mexico.
Ophelia 27 701H Well**

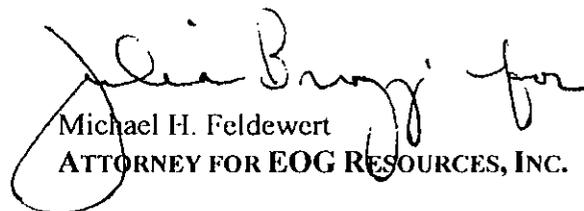
Ladies & Gentlemen:

This letter is to advise you that EOG Resources, Inc., has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on May 1, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint 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 challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address and should include: the names of the parties and their attorneys; a concise statement of the case; the names of all 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 are to be resolved prior to the hearing.

If you have any questions about this matter please contact Dan McCright, at (432) 686-3741 or dan_mccright@eogresources.com.

Sincerely,


Michael H. Feldewert
ATTORNEY FOR EOG RESOURCES, INC.

Holland & Hart LLP

Phone (505) 988-4421 Fax (505) 983-6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe, NM 87501 Mailing Address P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. 

7006 0100 0005 5771 0720

U.S. Postal Service™
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For delivery information visit our website at www.usps.com/

OFFICIAL *Ricky D Raindl*

Postage	\$	
Certified Fee		3.30
Return Receipt Fee (Endorsement Required)		2.70
Restricted Delivery Fee (Endorsement Required)		

Postmark Here
APR 11 2014

Ricky D. Raindl
 Post Office Box 142454
 Irving, Texas 75014

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:

Ricky D. Raindl
 Post Office Box 142454
 Irving, Texas 75014

2. Article Number (Transfer from service label): 7006 0100 0005 5771 0720

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Ricky D Raindl* Agent Addressee

B. Received by (Printed Name): *Ricky D Raindl* C. Date of Delivery: *4-21-14*

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

7006 0100 0005 5771 0959

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OFFICIAL *Debra K Primera*

Postage	\$	
Certified Fee		3.30
Return Receipt Fee (Endorsement Required)		2.70
Restricted Delivery Fee (Endorsement Required)		

Postmark Here
APR 11 2014

Debra K. Primera
 P.O. Box 28504
 Austin, TX 78755

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:

Debra K. Primera
 P.O. Box 28504
 Austin, TX 78755

2. Article Number (Transfer from service label): 7006 0100 0005 5771 0959

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Debra K Primera* Agent Addressee

B. Received by (Printed Name): *Debra K Primera* C. Date of Delivery: *4/15/14*

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

7006 0100 0005 5771 0966

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

For delivery information, visit our website at www.usps.com

OFFICE *SALE / UPHOLDER*

Postage	\$
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	0.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	



ConocoPhillips Company
600 N. Dairy Ashford
Houston, TX 77079

For instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

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:

ConocoPhillips Company
600 N. Dairy Ashford
Houston, TX 77079

2. Article Number: (Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *CHAD B* Agent Addressee

B. Received by (Printed Name): *CHAD B*

C. Date of Delivery: *2/11/04*

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

7006 0100 0005 5771 0966