

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

August 29, 2014

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: APPLICATION OF CHEVRON U.S.A. INC. FOR A NON-STANDARD
SPACING AND PRORATION UNIT, AND COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.
(Gamma Ridge 14-24-34-8H Well)**

Ladies & Gentlemen:

This letter is to advise you that Chevron U.S.A. 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 September 18, 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 Cody Cole, at (713) 372-1103 or ccole@chevron.com.

Sincerely,

Michael H. Feldewert

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. ♻️



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

August 29, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

**RE: APPLICATION OF CHEVRON U.S.A. INC. FOR A NON-STANDARD
SPACING AND PRORATION UNIT, AND COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.
(Gramma Ridge 14-24-34-8H Well)**

This letter is to advise you that Chevron U.S.A. 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 September 14, 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 Cody Cole at (713) 372-1103 or ccole@chevron.com.

Sincerely,

Michael H. Feldewert

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. ♻️

**CHEVRON U.S.A. INC.
GRAMMA RIDGE 14-24-34-8H WELL**

OFFSETS

Energex, LLC
Attn.: Tim Lilley
4425 98th Street, Suite 200
Lubbock Texas 79424

Crump Energy Partners, LLC
Attn.: Brian Hall
P.O. Box 50820
Midland, Texas 79710

Partners IV, LP
Attn.: Brian Hall
P.O. Box 50820
Midland, TX 79710

COG Operating LLC
One Concho Center
Midland, TX 79701

POOLED PARTIES

Robert E. Landreth
1600 Country Club Drive
Midland, TX 79701

Carter Legacy, LLC
5331 85th Street
Lubbock, TX 79424

Debra D. Dye
P.O. Box 834
La Porte, TX 77572

Burlington Resources Oil &
Gas Company, LP
P.O. Box 2267
Midland, TX 79702

Estate of Lawrence Gordon
Dotson
P.O. Box 556
Sierra Blanca, TX 79851

Charee Joe Dotson
P.O. Box 510
Aurla, AZ 85320

Charlee Jessica Dotson
P.O. Box 662
Summerset, TX 78060

Babe Development LLC
Attn: Shari Hamilton
P.O. Box 758
Roswell, NM 88202

Sandi Miller
1015 Fern Drive
Roswell, NM 88203

7006 2760 0001 6377 2952

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

Postmark Here
 AUG 29 2014
 SANTA FE, NM 87594

Energex, LLC
 ATTN: Tim Lilley
 4425 98th St., Ste 200
 Lubbock, TX 79424

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

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

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 SANTA FE, NM 87594

Crump Energy Partners, LLC
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

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

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:

Energex, LLC
 ATTN: Tim Lilley
 4425 98th St., Ste 200
 Lubbock, TX 79424

2. Article Number (Transfer from service label) 7006 2760 0001 6377 2952

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 9/2

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

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:

Crump Energy Partners, LLC
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

2. Article Number (Transfer from service label) 7006 2760 0001 6377 2952

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] Agent Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 9/2

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 6377 2716

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OFFICIAL *Cherwon 8/H*

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

Partners IV, LP
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

Postmark Here: AUG 29 2014

PS Form 3811, February 2004

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:

Partners IV, LP
 ATTN: Brian Hall
 P.O. Box 50820
 Midland, Texas 79710

2. Article Number (Transfer from service label): 7006 2760 0001 6377 2716

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): *apme w* Date of Delivery: *9-3-14*

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 6377 2723

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OFFICIAL *Cherwon 8/H*

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

COG Operating LLC
 One Concho Center
 Midland, TX 79701

Postmark Here: AUG 29 2014

PS Form 3811, February 2004 See Reverse for Instructions

7006 2760 0001 6377 2730

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OFFICIAL *Chenons SF*

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

Postmark Here
 AUG 29 2014
 SANTA FE, N.M. 79701

Robert E. Landreth
 1600 Country Club Dr.
 Midland, TX 79701

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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 E. Landreth
 1600 Country Club Dr.
 Midland, TX 79701

2. Article Number (Transfer from service label) 7006 2760 0001 6377 2730

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X Donna P. Landreth

B. Received by (Printed Name) Donna P. Landreth 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

7006 2760 0001 6377 2037

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OFFICIAL *Chenons SF*

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

Postmark Here
 AUG 29 2014
 SANTA FE, N.M. 79701

Carter Legacy, LLC
 5331 85th St.
 Lubbock, TX 79424

PS Form 3811, February 2004

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:
 Carter Legacy, LLC
 5331 85th St.
 Lubbock, TX 79424

2. Article Number (Transfer from service label) 7006 2760 0001 6377 2037

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
 X Steve P. Sings

B. Received by (Printed Name) Steve P. Sings 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

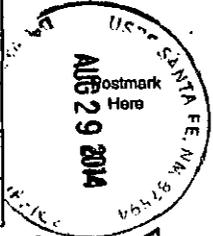
7006 2760 0001 6377 2013

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OFFICIAL MAIL

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



Debra D. Dye
 P.O. Box 834
 La Porte, TX 77572

PS Form 3811, August 2004 See the reverse for instructions

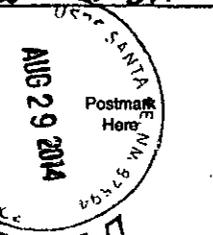
7006 2760 0001 6377 2013

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OFFICIAL MAIL

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



Burlington Resources Oil &
 Gas Company, LP
 P.O. Box 2267
 Midland, TX 79702

PS Form 3811, February 2004 See the reverse for instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED 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 <i>Robert Foree</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>R. Foree</i></p> <p>C. Date of Delivery <i>9-2-14</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
1. Article Addressed to:	
<p>Burlington Resources Oil & Gas Company, LP P.O. Box 2267 Midland, TX 79702</p>	
2. Article Number (Transfer from service label)	7006 2760 0001 6377 2013
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.
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes

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

7006 2760 0001 6377 2006

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OFFICIAL *CHRONISSE*

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

Postmark Here
 AUG 29 2014
 SANTA FE, NM 87501

Estate of Lawrence Gordon
 Dotson
 P.O. Box 556
 Sierra Blanca, TX 79851

PS Form 3800, August 2006 See Reverse for Instructions

Returned

7006 2760 0001 6377 1999

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OFFICIAL *CHRONISSE*

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

Postmark Here
 AUG 29 2014
 SANTA FE, NM 87501

Charee Joe Dotson
 P.O. Box 510
 Aurla, AZ 85320

PS Form 3800, August 2006 See Reverse for Instructions

Returned

9961 237 6377 1979

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OFFICIAL RETURN RECEIPT

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

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 AUG 29 2014
 U.S. POST OFFICE
 SANTA FE, NM 87504

Charlee Jessica Dotson
 P.O. Box 662
 Summerset, TX 78060

PS Form 3800, August 2006 See Reverse for Instructions

9961 237 6377 1979

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OFFICIAL RETURN RECEIPT

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

Postmark Here
 AUG 29 2014
 U.S. POST OFFICE
 SANTA FE, NM 87504

Babe Development LLC
 Attn: Shari Hamilton
 P.O. Box 758
 Roswell New Mexico, 88202

PS Form 3800, August 2006 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:

Babe Development LLC
 Attn: Shari Hamilton
 P.O. Box 758
 Roswell New Mexico, 88202

2. Article Number: 7006 2760 0001 6377 1979
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) Yes

A. Signature: Tracee Per...
 Agent Addressee

B. Received by (Printed Name): Tracee Per...
 C. Date of Delivery: AUG 29 2014

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

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

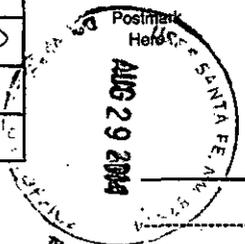
296T 22E9 T000 0922 9002

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

OFFICIAL *Cheney*

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



Sandi Miller
1015 Fern Dr.
Roswell, NM 88203

PS Form 3800, August 2005 See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS SOLD AT POSTAL OFFICE

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 <i>S. Miller</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p> <p>SEP 6 2014</p>
1. Article Addressed to:	
<p>Sandi Miller 1015 Fern Dr. Roswell, NM 88203</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.	
4. Restricted Delivery? (Extra Fee)	<input type="checkbox"/> Yes
2. Article Number (Transfer from service label)	7006 2760 0001 6377 1962

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