

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


APPLICATION OF COG OPERATING LLC, TO MAKE PERMANENT THE SPECIAL RULES ADOPTED UNDER ORDER R-13523 FOR THE DODD GLORIETA UPPER YESO POOL AND THE BURCH KEELY GLORIETA UPPER YESO POOL, EDDY COUNTY, NEW MEXICO.

CASE NOS. 14669, 14670, 14758,  
and 14759 (Reopened)

AFFIDAVIT

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

Gabrielle A. Gerholt, attorney in fact and authorized representative of COG Operating LLC, 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.

  
\_\_\_\_\_  
Gabrielle A. Gerholt

SUBSCRIBED AND SWORN to before this 1st day of October 2014 by Gabrielle A. Gerholt.



OFFICIAL SEAL  
LISAMARIE 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. 4  
Submitted by: COG OPERATING LLC  
Hearing Date: October 2, 2014

## COG OPERATING LLC

### OFFSET OPERATORS IN THE DODD FEDERAL UNIT

Cimarex Energy Co. of Colorado  
600 N. Marienfeld Street  
Midland, TX 79701

Oxy USA WTP Limited Partnership  
5 Greenway Plaza  
Houston, TX 77046

Loco Hills GSF, Ltd.  
1231 Old Anneta Road  
Aledo, TX 76008

Apache Corporation  
Attn: Land Department  
303 Veterans Airpark Lane  
Suite 300  
Midland, TX 79705

### OFFSET OPERATORS IN THE BURCH KEELY UNIT

Cimarex Energy Co. of Colorado  
600 N. Marienfeld Street  
Midland, TX 79701

Mack Energy Corporation  
11344 Lovington Hwy  
Artesia, NM 88210

Burnett Oil Co., Inc.  
Burnett Plaza-Suite 1500  
801 Cherry Street, Unit 9  
Fort Worth, TX 76102

Loco Hills GSF, Ltd.  
1231 Old Anneta Road  
Aledo, TX 76008

Apache Corporation  
Attn: Land Department  
303 Veterans Airpark Lane  
Suite 300  
Midland, TX 79705

ConocoPhillips Company  
P.O Box 2197  
Houston, TX 77252-2197



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

September 12, 2014

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO: AFFECTED PARTIES**

**Re: Application of COG Operating LLC, to make permanent the  
Special Rules adopted under Order R-13523 for the Dodd Glorieta  
Upper Yeso Pool and the Burch Keely Glorieta Upper Yeso Pool,  
Eddy County, New Mexico.**

Ladies and Gentlemen:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division seeking to make permanent the Special Rules adopted under R-13523 for the Dodd Glorieta Upper Yeso Pool and the Burch Keely Glorieta Upper Yeso Pool, Eddy County, New Mexico.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on October 2, 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.

Sincerely,

A handwritten signature in dark ink, appearing to read "Michael H. Feldewert".

Michael H. Feldewert  
ATTORNEY FOR COG OPERATING LLC

**Holland & Hart LLP**

Phone [505] 988-4421 Fax [505] 983-6043 [www.hollandhart.com](http://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 2760 0001 6376 7675

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For delivery information visit

**MHF/COG**  
**BURCH KEELY**

OFFICIAL

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	664
Total Postage & Fees	\$

Sent To

Street, Apt. No.  
 or PO Box No.  
 City, State

Cimarex Energy Co. of Colorado  
 600 N. Marienfeld Street  
 Midland, TX 79701

PS Form

Postmark  
Here

SEP 12 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:

Cimarex Energy Co. of Colorado  
 600 N. Marienfeld Street  
 Midland, TX 79701

2. Article Number  
 (Transfer from service label)

7006 2760 0001 6376 7675

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sadie Garcia*
☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*Sadie Garcia*

C. Date of Delivery

9-15-14

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 7668

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For delivery information visit

**MHF/COG**  
**BURCH KEELY**

OFFICIAL

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	664
Total Postage & Fees	\$

Sent To

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

Mack Energy Corporation  
 11344 Lovington Hwy  
 Artesia, NM 88210

PS Form 3800

Postmark  
Here

SEP 12 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:

Mack Energy Corporation  
 11344 Lovington Hwy  
 Artesia, NM 88210

2. Article Number  
 (Transfer from service label)

7006 2760 0001 6376 7668

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Kim Rodriguez*
☐ Agent  
☐ Addressee

B. Received by (Printed Name)

*Kim Rodriguez*

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 7651

U.S. Postal Service™ <b>CERTIFIED MAIL™ RECEIPT</b> (Domestic Mail Only; Insurance Coverage Provided)	
For delivery information <b>OFFICIAL</b>	<b>MHF/COG BURCH KEELY</b>
Postage \$	69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	669
Sent To Street, Apt. or PO Box City, State, PS Form 3811	Burnett Oil Co., Inc. Burnett Plaza-Suite 1500 801 Cherry Street, Unit 9 Fort Worth, TX 76102

## 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:

Burnett Oil Co., Inc.  
Burnett Plaza-Suite 1500  
801 Cherry Street, Unit 9  
Fort Worth, TX 76102

## 2. Article Number

(Transfer from service label)

7006 2760 0001 6376 7651

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Susan McKnight* ☒ Agent ☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

9-15-11

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

## 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:

Loco Hills GSF, Ltd.  
1231 Old Anneta Road  
Aledo, TX 76008

## 2. Article Number

(Transfer from service label)

7006 2760 0001 6376 7644

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Melissa Hall* ☐ Agent ☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

9-15-11

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 2760 0001 6376 7644

U.S. Postal Service™ <b>CERTIFIED MAIL™ RECEIPT</b> (Domestic Mail Only; Insurance Coverage Provided)	
For delivery information <b>OFFICIAL</b>	<b>MHF/COG BURCH KEELY</b>
Postage \$	69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	669
Sent To Street, Apt. or PO Box City, State, PS Form 3811	Loco Hills GSF, Ltd. 1231 Old Anneta Road Aledo, TX 76008



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For delivery information visit **OFFICIAL**  
**MHF/COG BURCH KEELY**

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$ 1338

Postmark Here  
 SEP 12 2004

Sent To  
 Street, Apt. or PO Box  
 City, State,  
 Zip

Apache Corporation  
 Attn: Land Department  
 303 Veterans Airpark Lane  
 Suite 300  
 Midland, TX 79705

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:

Apache Corporation  
 Attn: Land Department  
 303 Veterans Airpark Lane  
 Suite 300  
 Midland, TX 79705

2. Article Number  
 (Transfer from service label)

7006 2760 0001 6376 7637

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

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X Sheila Treat ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
 Sheila Treat

C. Date of Delivery  
 9-15-04

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 ☐ S.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

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For delivery information visit **OFFICIAL**  
**MHF/COG BURCH KEELY**

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	\$ 1338

Postmark Here  
 SEP 12 2004

Sent To  
 Street, Apt. or PO Box  
 City, State,  
 Zip

ConocoPhillips Company  
 P.O. Box 2197  
 Houston, TX 77252-2197

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  
 P.O. Box 2197  
 Houston, TX 77252-2197

2. Article Number  
 (Transfer from service label)

7006 2760 0001 6376 7620

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)  
 [Signature]

C. Date of Delivery  
 SEP 16 2004

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 7682

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**OFFICE**

**MHF/COG**  
**DODD FEDERAL**

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

SEP 12 2014

Postmark  
Here

Sent To  
 Street, Apt.  
 or PO Box  
 City, State

Cimarex Energy Co. of Colorado  
 600 N. Marienfeld Street  
 Midland, TX 79701

PS Form 3811

Instructions

7006 2760 0001 6376 7699

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**CERTIFIED MAIL<sup>TM</sup> RECEIPT**  
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For delivery information visit

**OFFICE**

**MHF/COG**  
**DODD FEDERAL**

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

SEP 12 2014

Postmark  
Here

Sent To  
 Street, Apt.  
 or PO Box  
 City, State

Oxy USA WTP Limited Partnership  
 5 Greenway Plaza  
 Houston, TX 77046

PS Form 3811

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:

Cimarex Energy Co. of Colorado  
 600 N. Marienfeld Street  
 Midland, TX 79701

2. Article Number  
 (Transfer from service label)

7006 2760 0001 6376 7682

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:

Oxy USA WTP Limited Partnership  
 5 Greenway Plaza  
 Houston, TX 77046

2. Article Number  
 (Transfer from service label)

7006 2760 0001 6376 7699

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Sadil Garcia*☐ Agent☐ Addressee

B. Received by (Printed Name)

Sadil Garcia

C. Date of Delivery

9-15-14

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

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Gengron*☐ Agent☐ Addressee

B. Received by (Printed Name)

Gengron

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 7705

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**MHF/COG**  
**DODD FEDERAL**

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**OFFICIAL USE**

Postage \$ 6.94  
 Certified Fee 3.30  
 Return Receipt Fee (Endorsement Required) 2.70  
 Restricted Delivery Fee (Endorsement Required) 6.00  
 Total Postage & Fees \$ 18.94



Sent To  
 Street, or P.O. Box  
 City, State, ZIP+4®  
 Loco Hills GSF, Ltd.  
 1231 Old Anneta Road  
 Aledo, TX 76008

PS Form 3811, February 2004

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

**RECEIPT**

**MHF/COG**  
**DODD FEDERAL**

For delivery information visit [usps.com](http://usps.com)

**OFFICIAL USE**

Postage \$ 6.94  
 Certified Fee 3.30  
 Return Receipt Fee (Endorsement Required) 2.70  
 Restricted Delivery Fee (Endorsement Required) 6.00  
 Total Postage & Fees \$ 18.94



Sent To  
 Street, or P.O. Box  
 City, State, ZIP+4®  
 Apache Corporation  
 Attn: Land Department  
 303 Veterans Airpark Lane  
 Suite 300  
 Midland, TX 79705

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:

Loco Hills GSF, Ltd.  
 1231 Old Anneta Road  
 Aledo, TX 76008

2. Article Number  
 (Transfer from service label)

7006 2760 0001 6376 7705

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature Melissa Hall ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) M/Hg II C. Date of Delivery 9-15-14  
 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

**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:

Apache Corporation  
 Attn: Land Department  
 303 Veterans Airpark Lane  
 Suite 300  
 Midland, TX 79705

2. Article Number  
 (Transfer from service label)

7006 2760 0001 6377 2280

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature Sheila Treat ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) Sheila Treat C. Date of Delivery 9-15-14  
 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