

**BEFORE THE OIL CONVERSION
DIVISION**
Santa Fe, New Mexico
Exhibit No. 6
Submitted by: **COG Operating LLC**
Hearing Date: January 8, 2015

**COG OPERATING LLC
BRAGG 10 FEE NO. 3H**

Pooled Parties:

Marathon Oil Company
PO BOX 3487
Houston, Texas 77253-3487

Oxy Y-1 Company
5 Greenway Plaza, Suite 10
Houston, TX 77046-0521

Offset Parties:

Yates Petroleum Corporation, Abo Petroleum
Corporation, Myco Industries, Inc., John A. Yates,
Trustee of Trust Q u/w/o Peggy A. Yates, dec'd,
John A. Yates, Trustee of Trust Q u/w/o Peggy A.
Yates, dec'd, John A. Yates
105 South 4th Street
Artesia, NM 88210

Sharbro Energy, LLC
P.O. Box 840
Artesia, NM 88211-0840

Yates Industries, LLC
P.O. Box 1091
Artesia, NM 88211-1091

Santo Legado, LLLP
P.O. Box 1020
Artesia, NM 88211-1020

Tulipan, LLC
P.O. Box 1020
Artesia, NM 88211-1020

Featherstone Development
Corporation
P.O. Box 429
Roswell, NM 88202

Exama Oil Company
Suite 1040 Sonat Tower
5599 San Felipe
Houston, TX 77056

Stanolind Oil and Gas SPV, LLC,
c/o Memorial Production Partners
GP, LLC
1301 McKinney Street, Suite 2100
Houston, TX 77010

Bassett-Birney Oil Corp.
P.O. Box 127
Artesia, NM 88210

Oxy Y-1 Company
5 Greenway Plaza, Suite 10
Houston, TX 77046-0521



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

December 19, 2014

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Bragg 10 Fee No. 3H**

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC 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 January 8, 2015. 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 Pedie Monta, at (432) 688-6605 or pmonta@concho.com.

Sincerely,

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

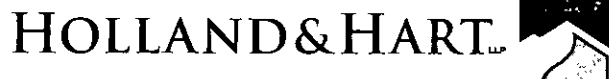
Michael H. Feldewert
ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

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

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

December 19, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSET PARTIES

**RE: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Bragg 10 Fee No. 3H Well**

This letter is to advise you that COG Operating LLC 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 January 8, 2015. 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.

If you have any questions about this matter please contact Pedie Monta, at (432) 688-6605 or pmonta@concho.com.

Sincerely,

A handwritten signature in black 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

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. ♻

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For delivery information visit OFFICIAL	MHF/COG BRAGG 3H
Postage \$ <u>69</u>	Postmark Here DEC 19 2013
Certified Fee <u>330</u>	
Return Receipt Fee (Endorsement Required) <u>270</u>	
Restricted Delivery Fee (Endorsement Required) <u>669</u>	
Marathon Oil Company PO BOX 3487 Houston, Texas 77253-3487	
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:

Marathon Oil Company
PO BOX 3487
Houston, Texas 77253-3487

2. Article Number 11111
(Transfer from service label)

7006 2760 0001 6382 1902

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent
☒ Addressee

B. Received by (Printed Name)

JAMES FELDER

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® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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- 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 Y-1 Company
5 Greenway Plaza, Suite 10
Houston, TX 77046-0521

2. Article Number 11111
(Transfer from service label)

7006 2760 0001 6390 8252

PS Form 3811, July 2013

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent
☒ Addressee

B. Received by (Printed Name)

Jenna W. M.

C. Date of Delivery

12-23-14

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

3. Service Type

☒ Certified Mail® ☐ Priority Mail Express™
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4. Restricted Delivery? (Extra Fee)

☐ Yes

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Return Receipt Fee (Endorsement Required) <u>270</u>	
Restricted Delivery Fee (Endorsement Required) <u>669</u>	
Oxy Y-1 Company 5 Greenway Plaza, Suite 10 Houston, TX 77046-0521	
for instructions	

7006 2760 0001 6382 1889

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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For delivery information: **OFFI**

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Certified Fee 330

Return Receipt Fee (Endorsement Required) 270

Restricted Delivery Fee (Endorsement Required) 669

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DEC 19 2013

Yates Petroleum Corporation, Abo Petroleum Corporation, Myco Industries, Inc., John A. Yates, Trustee of Trust Q u/w/o Peggy A. Yates, dec'd, John A. Yates, Trustee of Trust Q u/w/o Peggy A. Yates, dec'd, John A. Yates
 105 South 4th Street
 Artesia, NM 88210

for instructions

7006 2760 0001 6382 1872

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only)

For delivery information: **OFFI**

MHF/COG
BRAGG 3H

Postage \$ 69

Certified Fee 330

Return Receipt Fee (Endorsement Required) 270

Restricted Delivery Fee (Endorsement Required) 669

Postmark Here
DEC 19 2013

Sharbro Energy, LLC
 P.O. Box 840
 Artesia, NM 88211-0840

for instructions

SENDER: COMPLETE THIS SECTION

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.

1. Article Addressed to:

Yates Petroleum Corporation, Abo Petroleum Corporation, Myco Industries, Inc., John A. Yates, Trustee of Trust Q u/w/o Peggy A. Yates, dec'd, John A. Yates, Trustee of Trust Q u/w/o Peggy A. Yates, dec'd, John A. Yates
 105 South 4th Street
 Artesia, NM 88210

2. Article Number 7006 2760 0001 6382 1889

(Transfer from service label)

PS Form 3811, July 2013 Domestic Return Receipt

COMPLETION ON DELIVERY

A. Signature X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) S. Huerta 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® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

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.

1. Article Addressed to:

Sharbro Energy, LLC
 P.O. Box 840
 Artesia, NM 88211-0840

2. Article Number 7006 2760 0001 6382 1872

(Transfer from service label)

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COMPLETION ON DELIVERY

A. Signature X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) Colby Hanley C. Date of Delivery 12-23-14

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

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Return Receipt Fee (Endorsement Required) 270

Restricted Delivery Fee (Endorsement Required) 169

Postmark
DEC 19 2014
ARTESIA, NM

Yates Industries, LLC
 P.O. Box 1091
 Artesia, NM 88211-1091

See Reverse for Instructions

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Postage \$ 50

Certified Fee 230

Return Receipt Fee (Endorsement Required) 270

Restricted Delivery Fee (Endorsement Required) 169

Postmark
DEC 19 2014
ARTESIA, NM

Santo Legado, LLLP
 P.O. Box 1020
 Artesia, NM 88211-1020

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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.

1. Article Addressed to:

Yates Industries, LLC
 P.O. Box 1091
 Artesia, NM 88211-1091

2. Article Number (Transfer from service label): 7006 2760 0001 6382 1865

3. Service Type
☒ Certified Mail®
☐ Registered
☐ Insured Mail

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: *Frances Moreau*
☐ Agent
☐ Addressee

B. Received by (Printed Name): *FRANCES MOREAU*

C. Date of Delivery: *12-22-14*

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

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SENDER: COMPLETE THIS SECTION

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.

1. Article Addressed to:

Santo Legado, LLLP
 P.O. Box 1020
 Artesia, NM 88211-1020

2. Article Number (Transfer from service label): 7006 2760 0001 6382 1858

3. Service Type
☒ Certified Mail®
☐ Registered
☐ Insured Mail

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: *F. Legado*
☐ Agent
☐ Addressee

B. Received by (Printed Name): *F. Legado*

C. Date of Delivery: *12/29/14*

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

PS Form 3811, July 2013 Domestic Return Receipt

7006 2760 0001 6382 1841

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

Postmark Here
 DEC 19 2014

Tulipan, LLC
 P.O. Box 1020
 Artesia, NM 88211-1020

See Reverse for Instructions

7006 2760 0001 6382 1834

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 (Domestic Mail Only)
 For delivery information: MHF/COG BRAGG 3H
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Postage \$ 69
 Certified Fee 330
 Return Receipt Fee (Endorsement Required) 270
 Restricted Delivery Fee (Endorsement Required) 669

Postmark Here
 DEC 19 2014

Featherstone Development Corporation
 P.O. Box 429
 Roswell, NM 88202

For Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Tulipan, LLC
 P.O. Box 1020
 Artesia, NM 88211-1020

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1841

PS Form 3811, July 2013 Domestic Return Receipt

RECEIVED BY ADDRESSEE

A. Signature *Fugua*
☐ Agent
☒ Addressee

B. Received by (Printed Name) *Fugua* C. Date of Delivery *12/29/14*

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Featherstone Development Corporation
 P.O. Box 429
 Roswell, NM 88202

2. Article Number (Transfer from service label) 7006 2760 0001 6382 1834

PS Form 3811, July 2013 Domestic Return Receipt

RECEIVED BY ADDRESSEE

A. Signature *Jennifer Andazola*
☐ Agent
☒ Addressee

B. Received by (Printed Name) *Jennifer Andazola* C. Date of Delivery *12/29/14*

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

3. Service Type
☒ Certified Mail® ☐ Priority Mail Express™
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ Collect on Delivery

4. Restricted Delivery? (Extra Fee) ☐ Yes

7006 2760 0001 6382 1827

U.S. Postal Service TM	
CERTIFIED MAIL TM RECEIPT	
(Domestic Mail Only; No International Mail)	
For delivery information, see back of mailpiece	MHF/COG BRAGG 3H
OFFICIAL	
Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Exama Oil Company Suite 1040 Sonat Tower 5599 San Felipe Houston, TX 77056	
See Reverse for Instructions	

7006 2760 0001 6382 1810

U.S. Postal Service TM	
CERTIFIED MAIL TM RECEIPT	
(Domestic Mail Only; No International Mail)	
For delivery information, see back of mailpiece	MHF/COG BRAGG 3H
OFFICIAL	
Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Stanolind Oil and Gas SPV, LLC c/o Memorial Production Partners GP, LLC 1301 McKinney Street, Suite 2100 Houston, TX 77010	
See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		SECTION ON DELIVERY	
■ 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.		A. Signature X <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to: Stanolind Oil and Gas SPV, LLC, c/o Memorial Production Partners GP, LLC 1301 McKinney Street, Suite 2100 Houston, TX 77010		B. Received by (Printed Name) <i>Alexander S. Perry</i>	
2. Article Number (Transfer from service label)		C. Date of Delivery D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
3. Service Type <input checked="" type="checkbox"/> Certified Mail [®] <input type="checkbox"/> Priority Mail Express [™] <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, July 2013 Domestic Return Receipt			

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**

(Domestic Mail Only; No

MHF/COG
BRAGG 3H

For delivery information visi

OFFICIAL

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



Bassett-Birney Oil Corp.
P.O. Box 127
Artesia, NM 88210

See Reverse for Instructions

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**

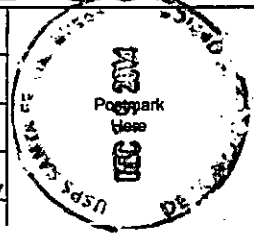
(Domestic Mail Only; No

MHF/COG
BRAGG 3H

For delivery information

OFFICIAL

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



Oxy Y-1 Company
5 Greenway Plaza, Suite 10
Houston, TX 77046-0521

See Reverse for Instructions

Returned

SENDER: COMPLETE THIS SECTION		ACTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <u>[Signature]</u> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <div style="border: 1px solid black; padding: 10px; margin: 10px;"> <p>Oxy Y-1 Company 5 Greenway Plaza, Suite 10 Houston, TX 77046-0521</p> </div>		<p>B. Received by (Printed Name) <u>Genaro M</u> C. Date of Delivery <u>12-23-14</u></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>3. Service Type <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Priority Mail Express™ <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> Collect on Delivery </p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	
<p>2. Article Number (Transfer from service label) <u>7006 2760 0001 6382 1896</u></p>			

PS Form 3811, July 2013

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