

HINKLE SHANOR LLP

ATTORNEYS AT LAW PO BOX 2068 SANTA FE, NEW MEXICO 87504 505-982-4554 (FAX) 505-982-8623

WRITER:

Gary W. Larson, Partner glarson@hinklelawfirm.com

September 4, 2015

VIA CERTIFIED MAIL

ConocoPhillips Attn: Gianni Esparza P.O. Box 2197, P10-05-5038 Houston, TX 77252-2197

Re: COG Operating LLC NMOCD Application

Dear Mr. Esparza:

Enclosed is a copy of an application for approval of a non-standard spacing and proration unit and compulsory pooling that COG Operating LLC ("COG") has filed with the New Mexico Oil Conservation Division ("the Division"). The proposed non-standard spacing and proration unit is comprised of the W/2 W/2 of Section 12, Township 23 South, Range 32 East, N.M.P.M., Lca County, New Mexico and will be dedicated as the project area for COG's Resolver Federal Com #1H well.

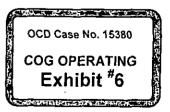
This matter (Division Case No. 15380) is scheduled for hearing at 8:15 a.m. on Thursday, October 1, 2015 in Porter Hall at the Division's offices located at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. ConocoPhillips is not required to attend this hearing, but as an owner of an interest that may be affected by this application, ConocoPhillips may appear at the hearing and present testimony. If ConocoPhillips does not appear at that time and become a party of record it will be precluded from contesting the matter at a later date.

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, September 24, 2015. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,

Gary W. Larson



GWL:rc Enclosure

PO BOX 10 ROSWELL, NEW MEXICO 88202 575-622-6510 (FAX) 575-623-9332

PO BOX 1720 ARTESIA, NEW MEXICO 88210 575-622-6510 (FAX) 575-746-6316 PO BOX 2068 SANTA FE, NEW MEXICO 87504 505-982-4554 (FAX) 505-982-8623

COMPLETENT SENDER: COMPLETE THIS SECTION SECTIONONDE Complete items 1, 2, and 3. Also complete A. Signatury RA item 4 if Restricted Delivery is desired... ٦Ľ X I Print your name and address on the reverse ✓Ď Addressee C. Date of Delivery so that we can return the card to you. B. Received by (Printed Name) Ō. Attach this card to the back of the malipiece, or on the front if space permits. D. Is delivery address different from item 🖸 Yes 1. Article Addressed to: If YES, enter delivery address below: ConocoPhillips Alth: Gianni Esparza P. o. Box 2197, P10-05-5038 3. Service Type Certified Mail® Priority Mail Express* Houston, TX Registered 77252-2197 Beturn Receipt for Merchandise Collect on Delivery Insured Mail 4. Restricted Delivery? (Extra Fee) C Yes 2. Article Number Article Number [] [] [(Transfer from service label) 17013 3020 0000 4641/2117 11 PS Form 3811, July 2013 **Domestic Return Receipt**