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December 11, 2007

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

Sidney Roger Davis
P.O. Box 29330
Austin, Texas 78755

Occidental Permian Ltd.
P.O. Box 50250
Midland, Texas 79710

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit and compulsory pooling, filed with the New Mexico Oil Conservation Division by Cimarex Energy Co., regarding the W $\frac{1}{2}$ NE $\frac{1}{4}$ of Section 13, Township 15 South, Range 37 East, N.M.P.M., Lea County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, January 10, 2008, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify (in writing) the Division, and the undersigned, by Thursday, January 3, 2008 if you intend to participate in the hearing.

Very truly yours,



James Bruce

Attorney for Cimarex Energy Co.

EXHIBIT A

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:

Sidney Roger Davis
P.O. Box 29330
Austin, Texas 78755

3. Service Type

- Certified Mail
- Registered
- Insured Mail
- Restricted Delivery? (Extra Fee) Yes

2. Article Number (Transfer from service label) **7006 0100 0005 5774 8549**

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

Cx - Mex

2006 0100 0005 5774 8532

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



Sent To

Occidental Permian Ltd.
P.O. Box 50250
Midland, Texas 79710

PS Form 3800, June 2002

See Reverse for Instructions

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



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P.O. Box 29330
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PS Form 3800, June 2002

See Reverse for Instructions

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Occidental Permian Ltd.
P.O. Box 50250
Midland, Texas 79710

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* Agent Addressee
- B. Received by (Printed Name) *[Signature]* C. Date of Delivery *12/11/07*
- D. Is delivery address different from item 1? Yes No

If YES, enter delivery address below:

3. Service Type
- Certified Mail
 - Registered
 - Insured Mail
 - Restricted Delivery? (Extra Fee) Yes

Article Number **7006 0100 0005 5774 8532**

Domestic Return Receipt

102595-02-M-1540

Cx - Mex