

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

**APPLICATION OF CIMAREX ENERGY CO. FOR
A NON-STANDARD OIL SPACING AND PRORATION
UNIT AND COMPULSORY POOLING, LEA COUNTY,
NEW MEXICO.**

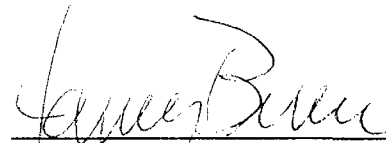
Case No. 14,582

AFFIDAVIT OF NOTICE

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

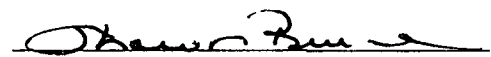
James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Cimarex Energy Co.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or working interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the operators or working interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rules.


James Bruce

SUBSCRIBED AND SWORN TO before me this 5th day of January, 2011 by James Bruce.

My Commission Expires: 3/14/13


Notary Public

Oil Conservation Division
Case No. 7
Exhibit No.

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruce@aol.com

November 24, 2010

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit, *etc.*, filed with the New Mexico Oil Conservation Division by Cimarex Energy Co., regarding the E½E½ of Section 23, Township 20 South, Range 34 East, N.M.P.M., Lea County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, December 16, 2010, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **The Division requires applicant to notify offset operators or working interest owners of the non-standard unit portion of the application, and you offset the above well unit.** As an offset operator or working interest owner, 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, December 9, 2010 if you intend to participate in the hearing.

Very truly yours,



James Bruce

Attorney for Cimarex Energy Co.

EXHIBIT A

EXHIBIT A

Mewbourne Oil Company
Suite 1020
500 West Texas
Midland, Texas 79701

Legacy Reserves Operating, LP
P.O. Box 10848
Midland, Texas 79702

BTA Oil Producers, LLC
104 South Pecos
Midland, Texas 79701

Nearburg Producing Company
Building 2, Suite 120
3300 North A Street
Midland, Texas 79705

Samson Resources Co.
Suite 1010
200 North Loraine
Midland, Texas 79701

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:

Mewbourne Oil Company
 Suite 1020
 500 West Texas
 Midland, Texas 79701

2. Article Number (Transfer from service label) 7008 0500 0001 4684 0689

PS Form 3811, February 2004 Domestic Return Receipt *OK* - *Lyndal 2/2* 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X* *Lyndal* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Lyndal* C. Date of Delivery *12-1-10*

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 ☐ No

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OFFICIAL USE

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

Sent To Legacy Reserves Operating, LP
 P.O. Box 10848
 Midland, Texas 79702

Street, Apt. No., or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions



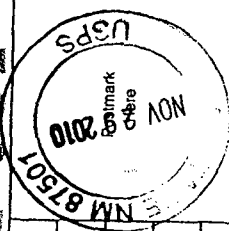
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OFFICIAL USE

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

Sent To Mewbourne Oil Company
 Suite 1020
 Street, Apt. No., or PO Box No. 500 West Texas
 City, State, ZIP+4 Midland, Texas 79701

PS Form 3800, August 2006 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Legacy Reserves Operating, LP
 P.O. Box 10848
 Midland, Texas 79702

2. Article Number (Transfer from service label) 7008 0500 0001 4684 0689

PS Form 3811, February 2004 Domestic Return Receipt *OK* - *Lyndal 2/2* 102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature *X* ☐ Agent ☐ Addressee

B. Received by (Printed Name) 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 ☐ No

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:

BTA Oil Producers, LLC
104 South Pecos
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7008 0500 0001 4684 0702

PS Form 3811, February 2004

Domestic Return Receipt *Lyndy 23-2*

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) *LYNDY SOSA* C. Date of Delivery
- D. Is delivery address different from item 17 ☐ 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 ☐ No

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

Sent to Samson Resources Co.
Suite 1010
200 North Loraine
Midland, Texas 79701
City, State, ZIP+4

PS Form 3800, August 2005

See Reverse for Instructions

U.S. Postal ServiceTM
CERTIFIED MAILTM RECEIPT
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OFFICIAL USE

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

Sent to BTA Oil Producers, LLC
104 South Pecos
Midland, Texas 79701
City, State, ZIP+4

PS Form 3800, August 2005

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:

Samson Resources Co.
Suite 1010
200 North Loraine
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7008 0500 0001 4684 0726

PS Form 3811, February 2004

Domestic Return Receipt *Lyndy 23-2*

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *x De Kemper* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) *De Kemper* C. Date of Delivery *10-10*
- D. Is delivery address different from item 17 ☐ 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 ☐ No

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Label/Receipt Number: 7008 0500 0001 4684 0719

Service(s): Certified Mail™

Status: Delivered

Your item was delivered at 11:22 am on December 01, 2010 in MIDLAND, TX 79705.

Track & Confirm

Enter Label/Receipt Number.

[Go >](#)

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Track & Confirm by email

Get current event information or updates for your item sent to you or others by email. [Go >](#)[Site Map](#)[Customer Service](#)[Forms](#)[Gov't Services](#)[Careers](#)[Privacy Policy](#)[Terms of Use](#)[Business Customer Gateway](#)

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OFFICIAL USE	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Sent To Nearburg Producing Company Building 2, Suite 120 3300 North A Street Midland, Texas 79705	
PS Form 3800, August 2006 See Reverse for Instructions	

7008 0500 0001 4684 0719

Stamp: 87581, Nov 18, 2010