

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

APPLICATION OF OGX RESOURCES LLC
FOR APPROVAL OF A NON-STANDARD OIL
SPACING AND PRORATION UNIT AND
COMPULSORY POOLING, LEA COUNTY,
NEW MEXICO.

Case No. 14,638

AFFIDAVIT OF NOTICE

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

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

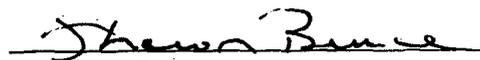
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for OGX Resources LLC.
3. OGX Resources LLC has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit 1.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.


James Bruce

SUBSCRIBED AND SWORN TO before me this 27th day of April, 2011 by James Bruce.

My Commission Expires:

3/14/13


Notary Public

Oil Conservation Division
Case No. 5 14638
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

April 7, 2011

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is an application for compulsory pooling and a non-standard unit, filed with the New Mexico Oil Conservation Division by OGX Resources LLC, regarding the W $\frac{1}{2}$ E $\frac{1}{2}$ of Section 22, Township 26 South, Range 28 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, April 28, 2011, in Porter Hall at the Division's offices at 1220 South St. 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 the application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from contesting this matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Thursday, April 21, 2011. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the 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 need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for OGX Resources LLC

EXHIBIT 1

EXHIBIT A

COG Operating LLC
Concho Oil & Gas LLC
2208 West Main Street
Artesia, New Mexico 88210

Chesapeake Exploration LLC
P.O. Box 18496
Oklahoma City, Oklahoma 73154

Mitchel E. Cheney
P.O. Box 570083
Houston, Texas 77257

Christina Speidel Fowlkes
Christopher C. Fowlkes
404 Glenosa
El Paso, Texas 79928

Frank Blow Fowlkes
316 Granda Avenue
El Paso, Texas 79912

Janet Renee Fowlkes Murrey
P.O. Box 23416
Waco, Texas 76702

Trey Fowlkes
P.O. Box 23416
Waco, Texas 76702

Lee M. Kugle
c/o John D. Elmore
Suite B
2002 Manor Road
Austin, Texas 78722

Ellen M. Ryan
5300 Mohawk Lane
Shawnee Mission, Kansas 66205

Russell Family LLC
15711 Charles Street
Omaha, Nebraska 68118

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:

Lee M. Kugle
 c/o John D. Elmore
 Suite B
 2002 Manor Road
 Austin, Texas 78722

2. Article Number

(Transfer from service label)

7010 3090 0000 2343 1768

PS Form 3811, February 2004

Domestic Return Receipt

06X D-22

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

4-11

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:

Trey Fowlkes
 P.O. Box 23416
 Waco, Texas 76702

2. Article Number

(Transfer from service label)

7010 3090 0000 2343 1751

PS Form 3811, February 2004

Domestic Return Receipt

06X D-22

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

[Handwritten Signature]

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

4-11-11

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:

Chesapeake Exploration LLC
 P.O. Box 18496
 Oklahoma City, Oklahoma 73154

2. Article Number

(Transfer from service label)

7010 3090 0000 2343 1706

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

RECEIVED

D. Is delivery address different from item 1? Yes

If YES, enter delivery address below: No

APR 11 2011

MAILROOM 9

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:

Russell Family LLC
15711 Charles Street
Omaha, Nebraska 68118

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Catherine Shroyer Agent
 Addressee

B. Received by (Printed Name) *Catherine Shroyer* 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

2. Article Number (Transfer from service label) **7010 3090 0000 2343 1782**

PS Form 3811, February 2004 Domestic Return Receipt *OGX D-22* 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:

Ellen M. Ryan
5300 Mohawk Lane
Shawnee Mission, Kansas 66205

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Ellen M. Ryan Agent
 Addressee

B. Received by (Printed Name) *Ellen M. Ryan* C. Date of Delivery *4-21-11*

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

2. Article Number (Transfer from service label) **7010 3090 0000 2343 1775**

PS Form 3811, February 2004 Domestic Return Receipt *OGX D-22* 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:

Janet Renee Fowlkes Murrey
P.O. Box 23416
Waco, Texas 76702

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Janet Renee Fowlkes Murrey Agent
 Addressee

B. Received by (Printed Name) *Janet Renee Fowlkes Murrey* C. Date of Delivery *4-11-11*

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

2. Article Number (Transfer from service label) **7010 3090 0000 2343 1744**

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:

Mitchel E. Cheney
P.O. Box 570083
Houston, Texas 77257

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Mitchel Cheney

B. Received by (Printed Name) *Mitchel Cheney*

C. Date of Delivery *4-19-2011*

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

2. Article Number

(Transfer from service label)

7010 3090 0000 2343 1713

PS Form 3811, February 2004

Domestic Return Receipt

OK D-22

102595-02-M

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:

Christina Speidel Fowlkes
Christopher C. Fowlkes
404 Glenosa
El Paso, Texas 79928

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Chris Fowlkes

B. Received by (Printed Name) *Chris Fowlkes*

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

2. Article Number

(Transfer from service label)

7010 3090 0000 2343 1720

PS Form 3811, February 2004

Domestic Return Receipt

OK D-22

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:

Frank Blow Fowlkes
316 Granda Avenue
El Paso, Texas 79912

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent
 Addressee
Frank Fowlkes

B. Received by (Printed Name) *Frank Fowlkes*

C. Date of Delivery *4-11-11*

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

2. Article Number

(Transfer from service label)

7010 3090 0000 2343 1737

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:

COG Operating LLC
Concho Oil & Gas LLC
2208 West Main Street
Artesia, New Mexico 88210

COMPLETE THIS SECTION ON DELIVERY

A. Signature: Jamie Jarlines Agent Addressee

B. Received by (Printed Name) Jamie Jarlines C. Date of Delivery 4-11-11

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

2. Article Number
(Transfer from service label)

7010 3090 0000 2343 1690

PS Form 3811, February 2004

Domestic Return Receipt OGX 7-22

102595-02-M-1540