

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

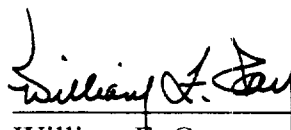
IN THE MATTER OF DAVID H. ARRINGTON
OIL & GAS, INC. FOR COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.

CASE NO. 12297

AFFIDAVIT

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

William F. Carr, attorney in fact and authorized representative of David H.
Arrington Oil & Gas, Inc., the applicant herein, being first duly sworn, upon oath, states
that notice has been given to all interested parties entitled to receive notice of this
application under Oil Conservation Division rules, and that notice has been given at the
addresses shown on Exhibit "A" attached hereto.




William F. Carr

SUBSCRIBED AND SWORN to before this 29th day of November, 1999 by
William F. Carr.



OFFICIAL SEAL
Mara Dalton
NOTARY PUBLIC
STATE OF NEW MEXICO

My Commission Expires: 8/25/01



Mara Dalton, Notary Public

EXHIBIT A

Santa Fe Energy Resources, Inc.
550 West Texas, Suite 11330
Midland, TX 79701

12297

CAMPBELL, CARR, BERGE
& SHERIDAN, P.A.
LAWYERS

MICHAEL B. CAMPBELL
WILLIAM F. CARR
BRADFORD C. BERGE
MARK F. SHERIDAN
MICHAEL H. FELDEWERT
PAUL R. OWEN
ANTHONY F. MEDEIROS

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E-MAIL: ccbspa@ix.netcom.com

November 10, 1999

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Santa Fe Energy Resources
550 W. Texas, Suite 11330
Midland, TX 79701

TO AFFECTED INTEREST OWNERS:

Re: Application of David H. Arrington Oil & Gas, Inc. for Compulsory Pooling,
Eddy County, New Mexico

Gentlemen:

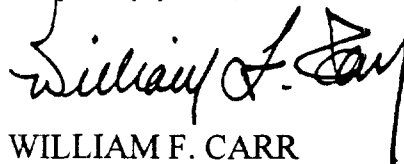
This letter is to advise you that David H. Arrington Oil & Gas, Inc. filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of all mineral interests from the surface to the base of the Morrow formation, Foster Ranch-Morrow Gas Pool in W/2of Section 28, Township 20 South, Range 24 East, NMPM., Eddy County, New Mexico. Arrington proposes to dedicate the referenced pooled unit to its proposed Orange Stimulator Caddis Federal Com Well No. 1 to be drilled at a standard location 1650 feet from the South line and 1980 feet from the West line of said Section 28.

This application has been set for hearing before a Division Examiner on December 2, 1999. 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.

Santa Fe Energy Resources, Inc.
November 10, 1999
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Parties appearing in cases have been requested by the Division (Memorandum 2-90) to file a Prehearing Statement substantially in the form prescribed by the Division. Prehearing statements should be filed by 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,



WILLIAM F. CARR
ATTORNEY FOR DAVID H. ARRINGTON
OIL & GAS, INC.

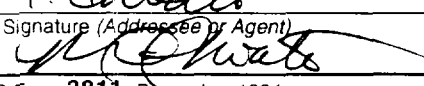
Enclosure

P 326 932 130

WFC
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Arr

US Postal Service
Receipt for Certified Mail

Santa Fe Energy Resources
550 W. Texas, Suite 11330
Midland, TX 79701

SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services. <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery	
3. Article Addressed to: Santa Fe Energy Resources 550 W. Texas, Suite 11330 Midland, TX 79701		4a. Article Number P 326 932 130	
		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
5. Received By: (Print Name) M. Cheats		7. Date of Delivery 11-12-99	
6. Signature (Addressee or Agent) 		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1994 102595-99-B-0223 Domestic Return Receipt

Thank you for using Return Receipt Service.
PS Form 3800, April 1995

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Return Receipt Showing To Whom Delivered	NOV 18 1999
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