

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

**APPLICATION OF COG OPERATING LLC
TO AMEND ORDER NO. R-21345-A TO EXTEND
TIME TO COMMENCE DRILLING OPERATIONS,
LEA COUNTY, NEW MEXICO**

CASE NO. 22077

**COG OPERATING LLC'S
HEARING EXHIBITS**

Exhibit A	Self-Affirmed Statement of Matt Solomon
A-1	Applications & Proposed Notice of Hearing
A-2	Division Order No. R-21345
A-3	Division Order No. R-21345-A
A-4	Hearing Notice Letter and Return Receipts
A-5	Affidavit of Publication

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

APPLICATION OF COG OPERATING LLC
TO AMEND ORDER NO. R-21345-A TO EXTEND
TIME TO COMMENCE DRILLING OPERATIONS,
LEA COUNTY, NEW MEXICO

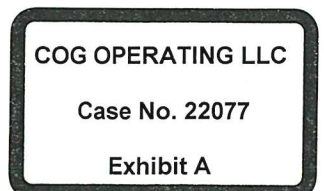
CASE NO. 22077

**SELF-AFFIRMED STATEMENT
OF MATT SOLOMON**

1. I am a landman for COG Operating LLC (“COG”). I am over 18 years of age, have personal knowledge of the matters addressed herein, and am competent to provide this Self-Affirmed Statement. I have previously testified before the Division, and my qualifications as an expert in petroleum land matters were accepted. I am familiar with the above-referenced application and the land matters involved. Copies of this application and proposed hearing notice are attached as **Exhibit A-1**.

2. The Division issued Order No. R-21345 in Case No. 21264 on June 5, 2020, which created a 480-acre, more or less, standard horizontal spacing unit comprised of the E/2 of Section 20 and NE/4 of Section 29, Township 25 South, Range 35 East, Lea County, New Mexico (“Unit”), and designated COG as the operator of the Unit.

3. Order No. R-21345 further pooled all uncommitted interests within the WC-025 G-08 S2535340; Bone Spring Pool (97088) underlying the Unit and dedicated the Unit to the Green Beret Federal Com 501H, 601H, and 602H wells (“Wells”). A copy of Order No. R-21345 is attached as **Exhibit A-2**.



4. Paragraph 20 of Order No. R-21345 required COG to commence drilling the Wells within one (1) year of the date of the Order unless COG obtained a time extension from the Division Director for good cause shown.

5. On January 7, 2021, the Division issued Order No. R-21345-A, extending the deadline for COG to commence drilling the Wells until January 7, 2022. A copy of Order No. R-21345-A is attached as **Exhibit A-3**.

6. Good cause exists to extend the time for COG to commence drilling the Wells authorized in Order No. R-21345-A since it was necessary for COG to revise its drilling schedule due to delays associated with Covid-19 and now plans to commence drilling the Wells after January 2022.

8. As such, COG requests the Division amend Order No. R-21345-A to extend the deadline for COG to commence drilling the Wells until June 30, 2022.

9. COG further requests that the other provisions of the Orders remain in force and effect.

10. COG is in good standing under the statewide rules and regulations.


11. In my opinion, the granting of COG's application would best serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

12. Notice of this application and the Division hearing was provided to all interested parties entitled to notice at least 20 days prior to the hearing date. A sample notice letter and associated receipts are attached as **Exhibit A-4**.

13. Notice of this application and the Division hearing was published more than ten business days prior to the hearing date. The affidavit of publication is attached as **Exhibit A-5**.

14. The exhibits to my Self-Affirmed Statement were either prepared by me or under my supervision or were compiled from company business records.

15. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 14 above is true and correct and is made under penalty of perjury under the laws of the State of New Mexico. My testimony is made as of the date identified next to my signature below.


Matt Solomon

7/15/21
Date

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

APPLICATION OF COG OPERATING LLC
TO AMEND ORDER NO. R-21345-A TO EXTEND
TIME TO COMMENCE DRILLING OPERATIONS,
LEA COUNTY, NEW MEXICO

CASE NO. 22077

APPLICATION

COG Operating LLC ("COG") (OGRID No. 229137), through its undersigned attorneys, files this application with the Oil Conservation Division ("Division") requesting that the Division amend Order No. R-21345-A to extend the deadline to commence drilling operations until June 30, 2022. In support of its application, COG states the following.

1. The Division issued Order No. R-21345 in Case No. 21264 on June 5, 2020, which created a 480-acre, more or less, standard horizontal spacing unit comprised of the E/2 of Section 20 and NE/4 of Section 29, Township 25 South, Range 35 East, Lea County, New Mexico ("Unit"), and designated COG as the operator of the Unit.

2. Order No. R-21345 further pooled all uncommitted interests within the WC-025 G-08 S2535340; Bone Spring Pool (97088) underlying the Unit and dedicated the Unit to the Green Beret Federal Com 501H, 601H, and 602H wells ("Wells").

3. Paragraph 20 of Order No. R-21345 required COG to commence drilling the Wells within one (1) year of the date of the Order unless COG obtained a time extension from the Division Director for good cause shown.

4. On January 7, 2021, the Division issued Order No. R-21345-A, extending the deadline for COG to commence drilling the Wells until January 7, 2022.

COG OPERATING LLC
Case No. 22077
Exhibit A-1

5. As a result of delays associated with Covid-19, it was necessary for COG to revise its drilling schedule. COG now plans to commence drilling the Wells after January 2022.

6. COG requests that the Division amend Order No. R-21345-A to extend the deadline for COG to commence drilling the Wells until June 30, 2022.

WHEREFORE, COG requests that this application be set for hearing on August 5, 2021, and after notice and hearing as required by law, the Division amend Order No. R-21345-A to extend the deadline for COG to commence drilling the wells until June 30, 2022.

Respectfully submitted,

HINKLE SHANOR LLP

/s/ Dana S. Hardy

Dana S. Hardy
Michael Rodriguez
P.O. Box 2068
Santa Fe, NM 87504-2068
Phone: (505) 982-4554
Facsimile: (505) 982-8623
dhardy@hinklelawfirm.com
mrodriguez@hinklelawfirm.com
ATTORNEYS FOR COG OPERATING LLC

Application of COG Operating, LLC to Amend Order No. R-21345-A to Extend Time to Commence Drilling Operations, Lea County, New Mexico. COG Operating, LLC (“COG”) seeks an order amending Order No. R-21345-A to extend the deadline to commence drilling operations until June 30, 2022. Order No. R-21345 approved a 480-acre, more or less, standard horizontal spacing unit comprised of the E/2 of Section 20 and NE/4 of Section 29, Township 25 South, Range 35 East, Lea County, New Mexico (“Unit”), and designated COG as the operator of the Unit. Order No. R-21345 further pooled all uncommitted interests within the WC-025 G-08 S2535340; Bone Spring Pool (97088) underlying the Unit and dedicated the Unit to the Green Beret Federal Com 501H, 601H, and 602H wells (“Wells”). Order No. R-21345 required COG to commence drilling the Wells within one (1) year of the date of the Order. On January 7, 2021, the Division issued Order No. R-21345-A, extending the deadline for COG to commence drilling the Wells until January 7, 2022. COG requests that the Division amend Order No. R-21345-A to extend the deadline for COG to commence drilling the Wells until June 30, 2022. The Wells are located approximately 11 miles west of Jal, New Mexico.

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

IN THE MATTER OF APPLICATION FOR
COMPULSORY POOLING SUBMITTED BY
COG OPERATING, LLC

CASE NO. 21264
ORDER NO. R-21345

ORDER

The Director of the New Mexico Oil Conservation Division (“OCD”), having heard this matter through a Hearing Examiner on May 28th, 2020, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

FINDINGS OF FACT

1. COG Operating, LLC (“Operator”) submitted an application (“Application”) to compulsorily pool the uncommitted oil and gas interests within the spacing unit (“Unit”) described in Exhibit A. The Unit is expected to be a standard horizontal spacing unit. 19.15.16.15(B) NMAC. Operator seeks to be designated the operator of the Unit.
2. Operator will dedicate the well(s) described in Exhibit A (“Well(s)”) to the Unit.
3. Operator proposes the supervision and risk charges for the Well(s) described in Exhibit A.
4. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice was given.
5. The Application was heard by the Hearing Examiner on the date specified above, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

CONCLUSIONS OF LAW

6. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
7. Operator is the owner of an oil and gas working interest within the Unit.
8. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.

COG OPERATING LLC
Case No. 22077
Exhibit A-2

- 9. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.
- 10. Operator has the right to drill the Well(s) to a common source of supply at the depth(s) and location(s) in the Unit described in Exhibit A.
- 11. The Unit contains separately owned uncommitted interests in oil and gas minerals.
- 12. Some of the owners of the uncommitted interests have not agreed to commit their interests to the Unit.
- 13. The pooling of uncommitted interests in the Unit will prevent waste and protect correlative rights, including the drilling of unnecessary wells.
- 14. This Order affords to the owner of an uncommitted interest the opportunity to produce his just and equitable share of the oil or gas in the pool.

ORDER

- 15. The uncommitted interests in the Unit are pooled as set forth in Exhibit A.
- 16. The Unit shall be dedicated to the Well(s) set forth in Exhibit A.
- 17. Operator is designated as operator of the Unit and the Well(s).
- 18. If the location of a well will be unorthodox under the spacing rules in effect at the time of completion, Operator shall obtain the OCD's approval for a non-standard location in accordance with 19.15.16.15(C) NMAC.
- 19. The Operator shall commence drilling the Well(s) within one year after the date of this Order, and complete each Well no later than one (1) year after the commencement of drilling the Well.
- 20. This Order shall terminate automatically if Operator fails to comply with Paragraph 19 unless Operator obtains an extension by amending this Order for good cause shown.
- 21. The infill well requirements in 19.15.13.9 NMAC through 19.15.13.12 NMAC shall be applicable.
- 22. Operator shall submit each owner of an uncommitted working interest in the pool ("Pooled Working Interest") an itemized schedule of estimated costs to drill, complete, and equip the well ("Estimated Well Costs").

23. No later than thirty (30) days after Operator submits the Estimated Well Costs, the owner of a Pooled Working Interest shall elect whether to pay its share of the Estimated Well Costs or its share of the actual costs to drill, complete and equip the well ("Actual Well Costs") out of production from the well. An owner of a Pooled Working Interest who elects to pay its share of the Estimated Well Costs shall render payment to Operator no later than thirty (30) days after the expiration of the election period, and shall be liable for operating costs, but not risk charges, for the well. An owner of a Pooled Working Interest who fails to pay its share of the Estimated Well Costs or who elects to pay its share of the Actual Well Costs out of production from the well shall be considered to be a "Non-Consenting Pooled Working Interest."
24. No later than one hundred eighty (180) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the Actual Well Costs. The Actual Well Costs shall be considered to be the Reasonable Well Costs unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Reasonable Well Costs after public notice and hearing.
25. No later than sixty (60) days after the expiration of the period to file a written objection to the Actual Well Costs or OCD's order determining the Reasonable Well Costs, whichever is later, each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs shall pay to Operator its share of the Reasonable Well Costs that exceed the Estimated Well Costs, or Operator shall pay to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs its share of the Estimated Well Costs that exceed the Reasonable Well Costs.
26. The reasonable charges for supervision to drill and produce a well ("Supervision Charges") shall not exceed the rates specified in Exhibit A, provided however that the rates shall be adjusted annually pursuant to the COPAS form entitled "Accounting Procedure-Joint Operations."
27. No later than within ninety (90) days after Operator submits a Form C-105 for a well, Operator shall submit to each owner of a Pooled Working Interest an itemized schedule of the reasonable charges for operating and maintaining the well ("Operating Charges"), provided however that Operating Charges shall not include the Reasonable Well Costs or Supervision Charges. The Operating Charges shall be considered final unless an owner of a Pooled Working Interest files a written objection no later than forty-five (45) days after receipt of the schedule. If an owner of a Pooled Working Interest files a timely written objection, OCD shall determine the Operating Charges after public notice and hearing.

28. Operator may withhold the following costs and charges from the share of production due to each owner of a Pooled Working Interest who paid its share of the Estimated Well Costs: (a) the proportionate share of the Supervision Charges; and (b) the proportionate share of the Operating Charges.
29. Operator may withhold the following costs and charges from the share of production due to each owner of a Non-Consenting Pooled Working Interest: (a) the proportionate share of the Reasonable Well Costs; (b) the proportionate share of the Supervision and Operating Charges; and (c) the percentage of the Reasonable Well Costs specified as the charge for risk described in Exhibit A.
30. Operator shall distribute a proportionate share of the costs and charges withheld pursuant to paragraph 29 to each Pooled Working Interest that paid its share of the Estimated Well Costs.
31. Each year on the anniversary of this Order, and no later than ninety (90) days after each payout, Operator shall provide to each owner of a Non-Consenting Pooled Working Interest a schedule of the revenue attributable to a well and the Supervision and Operating Costs charged against that revenue.
32. Any cost or charge that is paid out of production shall be withheld only from the share due to an owner of a Pooled Working Interest. No cost or charge shall be withheld from the share due to an owner of a royalty interests. For the purpose of this Order, an unleased mineral interest shall consist of a seven-eighths (7/8) working interest and a one-eighth (1/8) royalty interest.
33. Except as provided above, Operator shall hold the revenue attributable to a well that is not disbursed for any reason for the account of the person(s) entitled to the revenue as provided in the Oil and Gas Proceeds Payment Act, NMSA 1978, Sections 70-10-1 *et seq.*, and relinquish such revenue as provided in the Uniform Unclaimed Property Act, NMSA 1978, Sections 7-8A-1 *et seq.*
34. The Unit shall terminate if (a) the owners of all Pooled Working Interests reach a voluntary agreement; or (b) the well(s) drilled on the Unit are plugged and abandoned in accordance with the applicable rules. Operator shall inform OCD no later than thirty (30) days after such occurrence.
35. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION



Date: 6/05/2020

ADRIENNE SANDOVAL
DIRECTOR
AS/kms

CASE NO. 21264
ORDER NO. R-21345


Exhibit "A"

COMPULSORY POOLING APPLICATION CHECKLIST	
ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS	
Case: 21264	APPLICANT'S RESPONSE
Date: May 28, 2020	
Applicant	COG Operating LLC
Designated Operator & OGRID (affiliation if applicable)	229137
Applicant's Counsel:	Holland & Hart
Case Title:	APPLICATION OF COG OPERATING LLC FOR COMPULSORY POOLING, LEA COUNTY, NEW MEXICO.
Entries of Appearance/Intervenors:	
Well Family	Green Beret
Formation/Pool	
Formation Name(s) or Vertical Extent:	Bone Spring
Primary Product (Oil or Gas):	Oil
Pooling this vertical extent:	N/A
Pool Name and Pool Code:	WC-025 G-08 S2535340;BONE SPRING (97088)
Well Location Setback Rules:	Standard
Spacing Unit Size:	480-acres
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	480-acres
Building Blocks:	quarter-quarter sections
Orientation:	North-South
Description: TRS/County	E/2 of Sec. 20 and NE/4 of Sec. 29, 25S, 35E, Lea County
Standard Horizontal Well Spacing Unit (Y/N), if No, describe	Yes
Other Situations	
Depth Severance: Y/N. If yes, description	No
Proximity Tracts: If yes, description	Yes, E/2 E/2 of Sec 20 and E/2 NE/4 of Sec. 29
Proximity Defining Well: if yes, description	Green Beret Federal Com #602H
Applicant's Ownership in Each Tract	Exhibit A-3
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	

CASE NO. 21264
 ORDER NO. R-21345

Well #1	Green Beret Federal Com 501H (API pending) SHL: 465 FNL and 2095 FEL (Unit B) of Section 20 BHL: 2590 FNL and 1980 FEL (Unit G) of Section 29 Township 25 South, Range 35 East Completion Target: Bone Spring formation Well Orientation: North to South Completion Location expected to be: Standard
Well #2	Green Beret Federal Com 601H (API pending) SHL: 370 FNL and 760 FEL (Unit A) of Section 20 BHL: 2590 FNL and 660 FEL (Unit H) of Section 29 Township 25 South, Range 35 East Completion Target: Bone Spring formation Well Orientation: North to South Completion Location expected to be: Standard
Well #3	Green Beret Federal Com 602H (API pending) SHL: 465 FNL and 2035 FEL (Unit B) of Section 20 BHL: 2590 FNL and 1640 FEL (Unit G) of Section 29 Township 25 South, Range 35 East Completion Target: Bone Spring formation Well Orientation: North to South Completion Location expected to be: Standard
Horizontal Well First and Last Take Points	Exhibit A-1
Completion Target (Formation, TVD and MD)	Exhibit A-4
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$7,500
Production Supervision/Month \$	\$750
Justification for Supervision Costs	Exhibit A
Requested Risk Charge	200%
Notice of Hearing	
Proposed Notice of Hearing	Exhibit C
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit C
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit D
Ownership Determination	
Land Ownership Schematic of the Spacing Unit	Exhibit A-3
Tract List (including lease numbers and owners)	Exhibit A-3
Pooled Parties (including ownership type)	Exhibit A-3
Unlocatable Parties to be Pooled	Exhibit D
Ownership Depth Severance (including percentage above & below)	N/A
Joinder	

CASE NO. 21264
ORDER NO. R-21345

Sample Copy of Proposal Letter	Exhibit A-4, A-5, A-6 and A-7
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A-3
Chronology of Contact with Non-Joined Working Interests	Exhibit A-9
Overhead Rates In Proposal Letter	Exhibit A-4
Cost Estimate to Drill and Complete	Exhibit A-8
Cost Estimate to Equip Well	Exhibit A-8
Cost Estimate for Production Facilities	Exhibit A-8
Geology	
Summary (including special considerations)	Exhibit B
Spacing Unit Schematic	Exhibit A-2
Gunbarrel/Lateral Trajectory Schematic	Exhibit A-2
Well Orientation (with rationale)	Exhibit B
Target Formation	Exhibit B
HSU Cross Section	Exhibit B-4 and B-5
Depth Severance Discussion	N/A
Forms, Figures and Tables	
C-102	Exhibit A-1
Tracts	Exhibit A-3
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-3
General Location Map (including basin)	Exhibit A-2
Well Bore Location Map	Exhibit A-2
Structure Contour Map - Subsea Depth	Exhibit B-1 and B-2
Cross Section Location Map (including wells)	Exhibit B-3
Cross Section (including Landing Zone)	Exhibit B-4 and B-5
Additional Information	
Special Provisions/Stipulations	None
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	Michael H. Feldewert
Signed Name (Attorney or Party Representative):	
Date:	26-May-20

CASE NO. 21264
 ORDER NO. R-21345

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

IN THE MATTER OF APPLICATION FOR
COMPULSORY POOLING SUBMITTED BY
COG OPERATING, LLC

CASE NO. 21561
ORDER NO. R-21345-A

ORDER

The Director of the New Mexico Oil Conservation Division (“OCD”), having heard this matter through a Hearing Examiner on January 7, 2021, and after considering the testimony, evidence, and recommendation of the Hearing Examiner, issues the following Order.

FINDINGS OF FACT

1. COG Operating, LLC (“Operator”), submitted an application (“Application”) requesting an extension to commence drilling the initial well authorized by division Order R-21345.
2. Operator identified the owners of uncommitted interests in oil and gas minerals in the Unit and provided evidence that notice of the Application was given.
3. The Application was heard by the Hearing Examiner, during which Operator presented evidence through affidavits in support of the Application. No other party presented evidence at the hearing.

CONCLUSIONS OF LAW

4. OCD has jurisdiction to issue this Order pursuant to NMSA 1978, Section 70-2-17.
5. Operator satisfied the notice requirements for the Application and the hearing as required by 19.15.4.12 NMAC.
6. OCD satisfied the notice requirements for the hearing as required by 19.15.4.9 NMAC.

ORDER

7. The period to drill the well is extended for one (1) year from the date of this Order.
8. This Order shall terminate automatically if Operator fails to comply with Paragraph 7 unless prior to termination Operator applies, and OCD grants, to amend Order R-21345-A for good cause shown.
9. OCD retains jurisdiction of this matter for the entry of such orders as may be deemed necessary.

COG OPERATING LLC
Case No. 22077
Exhibit A-3

10. The provisions of Order R-21345 otherwise remain in force or effect.

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION



ADRIENNE SANDOVAL
DIRECTOR
AES/kms

Date: 1/19/2021

CASE NO. 21561
ORDER NO. R-21345-A

Page 2 of 2



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

WRITER:
Dana S. Hardy, Partner
dhardy@hinklelawfirm.com

July 9, 2021

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO ALL INTERESTED PARTIES SUBJECT TO NOTICE

Re: Case No. 22077 - Application of COG Operating LLC to Amend Order No. R-21345-A to Extend Time to Commence Drilling Operations, Lea County, New Mexico.

To whom it may concern:

This letter is to advise you that COG Operating LLC filed the enclosed application with the New Mexico Oil Conservation Division. The hearing will be conducted on **August 5, 2021** beginning at 8:15 a.m.

During the COVID-19 Public Health Emergency, state buildings are closed to the public and hearings will be conducted remotely. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website: <http://www.emnrd.state.nm.us/OCD/announcements.html>. 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.

Pursuant to Division Rule 19.15.4.13.B, a party who intends to present evidence at the hearing shall file a pre-hearing statement and serve copies on other parties, or the attorneys of parties who are represented by counsel, at least four business days in advance of a scheduled hearing, but in no event later than 5:00 p.m. mountain time, on the Thursday preceding the scheduled hearing date. The statement must be filed at the Division's Santa Fe office or electronically submitted to ocd.hearings@state.nm.us and should include: the names of the parties and their attorneys, a concise statement of the case, the names of all 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 are to be resolved prior to the hearing.

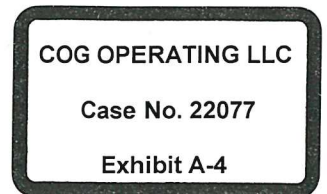
Please do not hesitate to contact me if you have any questions about this matter.

Sincerely,

/s/ Dana S. Hardy

Dana S. Hardy

Enclosure



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

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

7601 JEFFERSON ST NE • SUITE 180
ALBUQUERQUE, NEW MEXICO 87109
505-858-8320
(FAX) 505-858-8321

7020 2450 0002 1363 4731

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Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Beverly Jean Renfro Barr, Trustee _____


Richard K. Barr Family Trust _____

8027 Chalk Knoll Drive _____

City, State Austin, TX 78735 _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature X [Signature] <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery _____</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Beverly Jean Renfro Barr, Trustee Richard K. Barr Family Trust 8027 Chalk Knoll Drive Austin, TX 78735</p> <p> 9590 9402 5751 0003 3964 21</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1363 4731</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

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Extra Services & Fees (check box, add fee as appropriate)		
<input type="checkbox"/> Return Receipt (hardcopy)	\$	
<input type="checkbox"/> Return Receipt (electronic)	\$	
<input type="checkbox"/> Certified Mail Restricted Delivery	\$	
<input type="checkbox"/> Adult Signature Required	\$	
<input type="checkbox"/> Adult Signature Restricted Delivery	\$	
Postage	\$	
Total Postage and Fees	\$	
Sent To		
Street	Estate of William J. Kendall c/o Joseph Mark Gregory 8905 Random Road	
City, State	Ft. Worth, TX 76179	



7020 2450 0002 1363 4809

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature</p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>J. Gregory Hays</i></p> <p>C. Date of Delivery <i>7/9/21</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to:</p> <p>Estate of William J. Kendall c/o Joseph Mark Gregory 8905 Random Road Ft. Worth, TX 76179</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1363 4809</p>	<p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>



9590 9402 5751 0003 3963 53

7020 2450 0002 1363 4779

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To
Street and Apt. Mr. Arthur Reynolds
P.O. Box 2617
Wrightwood, CA 92397

City, State, ZIP _____

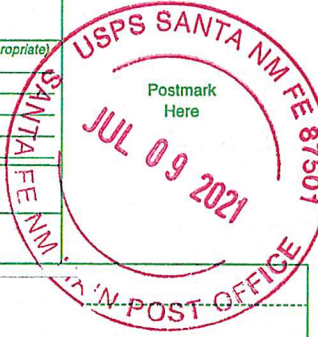
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature X <i>[Signature]</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Ambera Cavilla J</i> C. Date of Delivery <i>7-15-21</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Mr. Arthur Reynolds P.O. Box 2617 Wrightwood, CA 92397</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1363 4779</p>	
<p>9590 9402 5751 0003 3963 84</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

7020 2450 0002 1363 4786

CERTIFIED MAIL® RECEIPT	
Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
OFFICIAL USE	
Certified Mail Fee	\$
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	
Street an	Mr. MacKenzie Reynolds P.O. Box 2617 Wrightwood, CA 92397
City, State	
PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions	



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>Adriana Castillo</u></p> <p>C. Date of Delivery <u>7-15-21</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Mr. MacKenzie Reynolds P.O. Box 2617 Wrightwood, CA 92397</p>	<p>3. Service Type</p> <ul style="list-style-type: none"> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1363 4786</p>	<p>Domestic Return Receipt</p>
PS Form 3811, July 2015 PSN 7530-02-000-9053	

7020 2450 0002 1363 4762

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee
\$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____


Postage
\$ _____

Total Postage and Fees
\$ _____

Sent To
Street and City, State
Ms. Maureen Reynolds
3220 N. 66th Place, #1003
Scottsdale, AZ 85251

Postmark Here
JUL 09 2021
USPS SANTA FE NM 87501
SANTA FE NM MAIN POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. 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. 	<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>1. Article Addressed to</p> <p>Ms. Maureen Reynolds 3220 N. 66th Place, #1003 Scottsdale, AZ 85251</p> <p> 9590 9402 5751 0003 3963 91</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Certified Mail® <input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Signature Confirmation™, Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Signature Confirmation</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> Signature Confirmation Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>7020 2450 0002 1363 4762</p>	
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt

7020 2450 0002 1363 4724

CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street or PO Box: United Exploration
320 S. Oak Street, #216
Roanoke, TX 76262

City, State, ZIP+4®: _____

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

United Exploration
320 S. Oak Street, #216
Roanoke, TX 76262



2. Article Number (Transfer from service label)

7020 2450 0002 1363 4724

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ Agent
X _____ Addressee

B. Received by (Printed Name) _____ C. Date of Delivery _____

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

3. Service Type
- Adult Signature
 - Adult Signature Restricted Delivery
 - Certified Mail®
 - Certified Mail Restricted Delivery
 - Collect on Delivery
 - Collect on Delivery Restricted Delivery
 - Insured Mail
 - Insured Mail Restricted Delivery (over \$500)
 - Priority Mail Express®
 - Registered Mail™
 - Registered Mail Restricted Delivery
 - Return Receipt for Merchandise
 - Signature Confirmation™
 - Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7020 2450 0002 1363 4793

CERTIFIED MAIL® RECEIPT

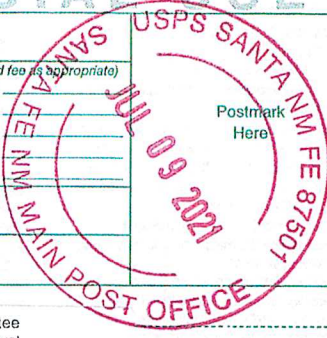
Domestic Mail Only

For delivery information, visit our website at www.usps.com®

OFFICIAL USE

Certified Mail Fee	\$
Extra Services & Fees (check box, add fees as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$
<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$
Postage	\$
Total Postage and Fees	\$
Sent To	
Street: Cynthia Mae Wilson, Trustee Scott E. Wilson Bypass Trust 4601 Mirador Drive	
City, St: Austin, TX 78735	

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Cynthia Mae Wilson, Trustee
Scott E. Wilson Bypass Trust
4601 Mirador Drive
Austin, TX 78735

9590 9402 5751 0003 3963 60

2. Article Number (Transfer from service label)
7020 2450 0002 1363 4793

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 Cynthia Mae Wilson Agent
 Addressee

B. Received by (Printed Name)
Cynthia M. Wilson

C. Date of Delivery
7-21-21

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

3. Service Type

<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input checked="" type="checkbox"/> Certified Mail®	<input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Collect on Delivery Restricted Delivery	
<input type="checkbox"/> Insured Mail	
<input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt

Affidavit of Publication

STATE OF NEW MEXICO
COUNTY OF LEA

I, Daniel Russell, Publisher of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, solemnly swear that the clipping attached hereto was published in the regular and entire issue of said newspaper, and not a supplement thereof for a period of 3 issue(s).

Beginning with the issue dated
July 01, 2021
and ending with the issue dated
July 15, 2021.



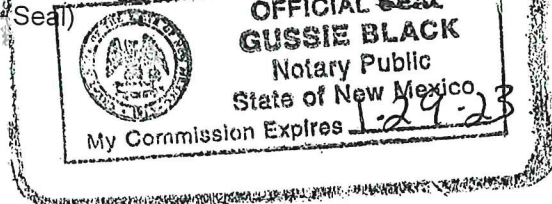
Publisher

Sworn and subscribed to before me this
15th day of July 2021.



Business Manager

My commission expires
January 29, 2023



This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937 and payment of fees for said

LEGAL NOTICE July 15, 2021

This is to notify all interested parties, including United Exploration; Beverly Jean Renfro Barr, Trustee of the Richard K. Barr Family Trust; Donna Reynolds; Steve Reynolds; Maureen Reynolds; Arthur Reynolds; MacKenzie Reynolds; Cynthia Mae Wilson, Trustee of the Scott E. Wilson Bypass Trust; the Estate of William J. Kendall; and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by COG Operating LLC (Case No. 22077). During the COVID-19 Public Health Emergency, state buildings are closed to the public and hearings will be conducted remotely. The hearing will be conducted on August 5, 2021 beginning at 8:15 a.m. To participate in the electronic hearing, see the instructions posted on the docket for the hearing date: <http://www.emnrd.state.nm.us/OCD/hearings.html>. COG Operating, LLC ("COG") seeks an order amending Order No. R-21345-A to extend the deadline to commence drilling operations until June 30, 2022. Order No. R-21345 approved a 480-acre, more or less, standard horizontal spacing unit comprised of the E/2 of Section 20 and NE/4 of Section 29, Township 25 South, Range 35 East, Lea County, New Mexico ("Unit"), and designated COG as the operator of the Unit. Order No. R-21345 further pooled all uncommitted interests within the WC-025 G-08 S2535340; Bone Spring Pool (97088) underlying the Unit and dedicated the Unit to the Green Beret Federal Com 501H, 601H, and 602H wells ("Wells"). Order No. R-21345 required COG to commence drilling the Wells within one (1) year of the date of the Order. On January 7, 2021, the Division issued Order No. R-21345-A, extending the deadline for COG to commence drilling the Wells until January 7, 2022. COG requests that the Division amend Order No. R-21345-A to extend the deadline for COG to commence drilling the Wells until June 30, 2022. The Wells are located approximately 11 miles west of Jal, New Mexico. #36644

01100597

00255925

HEIDEL, SAMBERSON,
P.O. DRAWER 1599
LOVINGTON, NM 88260

