

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

**APPLICATION OF COG OPERATING
LLC FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO**

Case No. 20863

**SELF-AFFIRMED STATEMENT OF
GRANT BOHLS**

1. I am over 18 years of age and am competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein.
2. I am a landman for COG Operating, LLC ("COG"). I have had direct involvement with COG's development of the 640-acre, more or less, standard horizontal spacing unit ("HSU") that is the subject of COG's application in this case.
3. The HSU is comprised of the W/2 of Section 22 and the W/2 of Section 27, Township 22 South, Range 34 East in Lea County.
4. COG seeks to pool all uncommitted interests in the Bone Spring formation underlying the HSU. A listing of the uncommitted interests and their respective working interests is attached hereto as Exhibit A. 79.86% of the working interests are committed to the proposed wells.
5. The HSU will be dedicated to the following wells: (1) the Squints Federal Com #7H well, which will be horizontally drilled from a surface location in Unit N in Section 27 to a bottom hole location in Unit C in Section 22; and (2) the Squints Federal Com #8H well, which will be horizontally drilled from a surface location in Unit M in Section 27 to a bottom hole location in Unit D in Section 22. The completed intervals for the wells will be orthodox. The C-102s for the wells are attached as Exhibit B.

Case No. 20863
COG OPERATING
Exhibit I

6. There are no depth exceptions in the Bone Spring formation.

7. COG sent well proposal letters to Alpha Energy Partners and Larry T. Long on August 1, 2019 and to Aleyna N. Pace and Tara N. Pace, through their parent and guardian Nuray K. Pace, on September 11, 2019. They all received the letter. Subsequently, I had follow-up communications with them. A sample of my well proposal letter is attached as Exhibit C.

8. In my opinion, COG has made a good faith effort to obtain the voluntary joinder of uncommitted interests in the proposed well.

9. Notice of COG's application and the Division hearing was provided to the uncommitted interests, overriding royalty interests, and production payment interests by certified mail. A sample of the notice letter and associated green cards are attached as Exhibit D.

10. Notice of COG's application and the Division hearing was also published. The affidavit of publication is attached as Exhibit E.

11. COG has the right to pool the overriding royalty owners and production payment interest owners in the HSU.

12. The AFEs for the proposed wells are attached hereto as Exhibit F. The estimated cost of the wells is fair and reasonable and is comparable to the cost of other wells of similar depth and length drilled in Lea County.

13. COG requests overhead and administrative rates of \$7,000 per month while the wells are being drilled and \$700 per month while the wells are producing. These rates are fair and are comparable to the rates charged by COG and by other operators in the vicinity. They are also the rates set forth in the Joint Operating Agreement for the HSU. COG further requests that the rates be adjusted periodically in accordance with the COPAS Accounting Procedure.


14. COG requests that it be designated the operator of the wells.

15. COG also requests that a 200% risk charge be assessed against the uncommitted interests if they are non-consenting working interest owners.

16. The exhibits attached hereto were either prepared by me or under my supervision, or were compiled from company business records.

17. In my opinion, the granting of COG's application would serve the interests of conservation and the prevention of waste.

18. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 17 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 handwritten next to my signature below.


Grant Bohls

11/13/19
Date

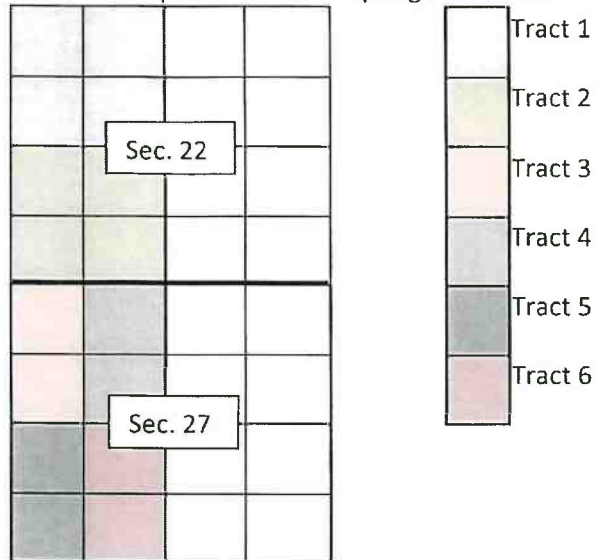
Ex. A

COG Operating, LLC – Squints Fed Com 7H & 8H

W2 Section 22, T22S-R34E

W2 Section 27, T22S-R34E

Limited in depth to the Bone Spring Formation



Tract 1: Section 22: NW (160 acres, all depths)

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.00000000%
Alpha Energy Partners, LLC	13.14583000%
Larry T. Long	6.25000000%
Axis Energy Corporation	3.12500000%
Wildcat Energy, LLC	0.31250000%
Clinton Pace	0.54166800%
Ryan Pace	0.54166800%
Tara N. Pace	0.54166700%
Aleyna N. Pace	0.54166700%
TOTAL:	100.00000000%

Tract 2: Section 22: SW (160 acres, all depths)

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	10.00000000%
Alpha Energy Partners, LLC	16.52083000%
Larry T. Long	13.75000000%
Axis Energy Corporation	6.87500000%
Wildcat Energy, LLC	0.68750000%
Clinton Pace	0.54166800%
Ryan Pace	0.54166800%
Tara N. Pace	0.54166700%
Aleyna N. Pace	0.54166700%
TOTAL:	100.00000000%

 Uncommitted Working interest Owners

Tract 3: Section 27: E2NW (80 acres, all depths)

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.00000000%
Alpha Energy Partners, LLC	13.14583000%
Larry T. Long	6.25000000%
Axis Energy Corporation	3.12500000%
Wildcat Energy, LLC	0.31250000%
Clinton Pace	0.54166800%
Ryan Pace	0.54166800%
Tara N. Pace	0.54166700%
Aleyna N. Pace	0.54166700%
TOTAL:	100.00000000%

Tract 4: Section 27: W2NW, SW (80 acres, all depths)

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.00000000%
Alpha Energy Partners, LLC	13.14583000%
Larry T. Long	6.25000000%
Axis Energy Corporation	3.12500000%
Wildcat Energy, LLC	0.31250000%
Clinton Pace	0.54166800%
Ryan Pace	0.54166800%
Tara N. Pace	0.54166700%
Aleyna N. Pace	0.54166700%
TOTAL:	100.00000000%

Tract 5: Section 27: W2SW (80 acres, surface to 12,880')

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	40.00000000%
Alpha Energy Partners, LLC	6.04375000%
Larry T. Long	1.87500000%
Axis Energy Corporation	0.93750000%
Wildcat Energy, LLC	0.93750000%
Clinton Pace	0.16250000%
Ryan Pace	0.16250000%
Tara N. Pace	0.16250000%
Aleyna N. Pace	0.16250000%
TOTAL:	100.00000000%

 Uncommitted Working interest Owners

Tract 6: Section 27: E2SW (80 acres, surface to 12,880')

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	40.00000000%
Alpha Energy Partners, LLC	6.04375000%
Larry T. Long	1.87500000%
Axis Energy Corporation	0.93750000%
Wildcat Energy, LLC	0.93750000%
Clinton Pace	0.16250000%
Ryan Pace	0.16250000%
Tara N. Pace	0.16250000%
Aleyna N. Pace	0.16250000%
TOTAL:	100.00000000%

Unit Working Interest (640 acres)

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.10000000%
Alpha Energy Partners, LLC	12.21406000%
Larry T. Long	7.03125000%
Axis Energy Corporation	3.51562500%
Wildcat Energy, LLC	0.35156250%
Clinton Pace	0.44687600%
Ryan Pace	0.44687600%
Tara N. Pace	0.44687530%
Aleyna N. Pace	0.44687530%
TOTAL:	100.00000000%



Uncommitted Working interest Owners

Record Title Owner Tract 1

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.00000000%
Axis Energy Corporation	12.50000000%
Joe Reynolds	10.33333000%
David H. Pace	2.16667000%
TOTAL	100.00000000%

Record Title Owner Tract 2

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	10.00000000%
Axis Energy Corporation	27.50000000%
Joe Reynolds	10.33333000%
David H. Pace	2.16667000%
TOTAL	100.00000000%

Record Title Owner Tract 3

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.00000000%
Axis Energy Corporation	12.50000000%
Joe Reynolds	10.33333000%
David H. Pace	2.16667000%
TOTAL	100.00000000%

Record Title Owner Tract 4


COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.00000000%
Hunt Oil Company	12.50000000%
Joe Reynolds	10.33333000%
David H. Pace	2.16667000%
TOTAL	100.00000000%

Record Title Owner Tract 5

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.00000000%
Axis Energy Corporation	12.50000000%
Joe Reynolds	12.50000000%
TOTAL	100.00000000%

Record Title Owner Tract 6

COG Operating, LLC	50.00000000%
BTA Oil Producers, LLC	25.00000000%
Hunt Oil Company	12.50000000%
Joe Reynolds	12.50000000%
TOTAL	100.00000000%

 Uncommitted Working interest Owners

ORRI Interests to be pooled

JJR, Inc.

Misty Morning Partnership, Ltd.

Douglas Investments, Inc,

Panther City Exploration Company, LLC

Robert E. Landreth

Production Payment Interests to be pooled

Norton LLC

Alan Jochimsen

Monty D. McLane

States Royalty Limited Partnership

Robert E. Landreth

Deborah Fedric

George H. Hunker, III

Margaret Hunker Tsui, as Trustee of the Margaret Hunker Tsui Trust

McMullen Minerals, LLC

Pegasus Resources, LLC



Ex. B

DISTRICT I
1020 N. FRANKLIN DR., SUITE 200, ALBUQUERQUE, NM 87102
Phone: (505) 263-4141 Fax: (505) 263-0780

DISTRICT II
511 S. FIRST ST., ALBUQUERQUE, NM 87102
Phone: (505) 748-1523 Fax: (505) 748-0782

DISTRICT III
1000 W. BRADLEY RD., ALBUQUERQUE, NM 87102
Phone: (505) 264-6170 Fax: (505) 264-6170

DISTRICT IV
1020 S. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 478-3400 Fax: (505) 478-3400

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-43167	Pool Code 96553	Pool Name Ojo Chiso; Bone Spring
Property Code 316103	Property Name SQUINTS FEDERAL COM	Well Number 7H
OGRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3404.1'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	27	22-S	34-E		220	SOUTH	2010	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	22	22-S	34-E		50	NORTH	2310	WEST	LEA

Dedicated Acres 320	Joint or Infill	Consolidation Code	Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<p>Y=504689.1 N X=810270.9 E</p> <p>LP 100' FSL & 2310' FSL Y=504598.4 N X=811260.9 E LAT.=32.384177° N LONG.=103.458928° W</p> <p>LEASE X-045 LAT.=32.382679° N LONG.=103.458924° W</p> <p>ETP 100' FSL & 2310' FSL Y=494236.3 N X=811322.6 E LAT.=32.355895° N LONG.=103.459003° W GRID A2 TO ETP 1112134</p> <p>Y=494128.3 N X=810333.6 E</p>	<p>2310' B.H. 50'</p> <p>Y=504701.6 N X=811591.3 E</p> <p>Y=504648.4 N X=811260.6 E LAT.=32.384315° N LONG.=103.458928° W</p> <p>SECTION 22 SECTION 27</p> <p>NMNM043565</p> <p>GRID A2 - 35939133 HORZ. DIST. - 10412.5'</p> <p>2010' S.L. 220'</p> <p>Y=494139.0 N X=811653.8 E</p>	<p>NAD 83 NME PROPOSED BOTTOM HOLE LOCATION Y=504648.4 N X=811260.6 E LAT.=32.384315° N LONG.=103.458928° W</p> <p>NAD 83 NME SURFACE LOCATION Y=494353.9 N X=811021.9 E LAT.=32.356025° N LONG.=103.459973° W</p>	<p>OPERATOR CERTIFICATION</p> <p>I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</p> <p><i>Mayte Reyes</i> 8-6-19 Signature Date Mayte Reyes Printed Name mreyes1@concho.com E-mail Address</p> <p>SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>JUNE 27, 2019 Date of Survey</p> <p>Signature & Seal of Professional Surveyor</p> <p><i>Chad L. Harcrow</i> 7/3/19 Certificate No. CHAD HARCROW 17777 W.O. #19-1203 DRAWN BY: WN</p>
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DISTRICT I1635 N. FORDWAY DR., ROSA, NM 88240
Phone: (505) 823-6151 Fax: (505) 823-0770**DISTRICT II**511 S. FIRST ST., ALBUQUERQUE, NM 87102
Phone: (505) 768-1233 Fax: (505) 768-9720**DISTRICT III**1000 E. BRADLEY RD., ALBUQUERQUE, NM 87102
Phone: (505) 834-6178 Fax: (505) 834-6170**DISTRICT IV**1220 S. ST. FRANCIS DR., SANTA FE, NM 87505
Phone: (505) 476-8480 Fax: (505) 476-9484State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
Santa Fe, New Mexico 87505

Form C-102

Revised August 1, 2011

Submit one copy to appropriate
District Office☐ AMENDED REPORT**WELL LOCATION AND ACREAGE DEDICATION PLAT**

API Number 30-025-43168	Pool Code 96553	Pool Name Ojo Chiso; Bone Spring
Property Code 316103	Property Name SQUINTS FEDERAL COM	Well Number 8H
OCRID No. 229137	Operator Name COG OPERATING, LLC	Elevation 3404.0'

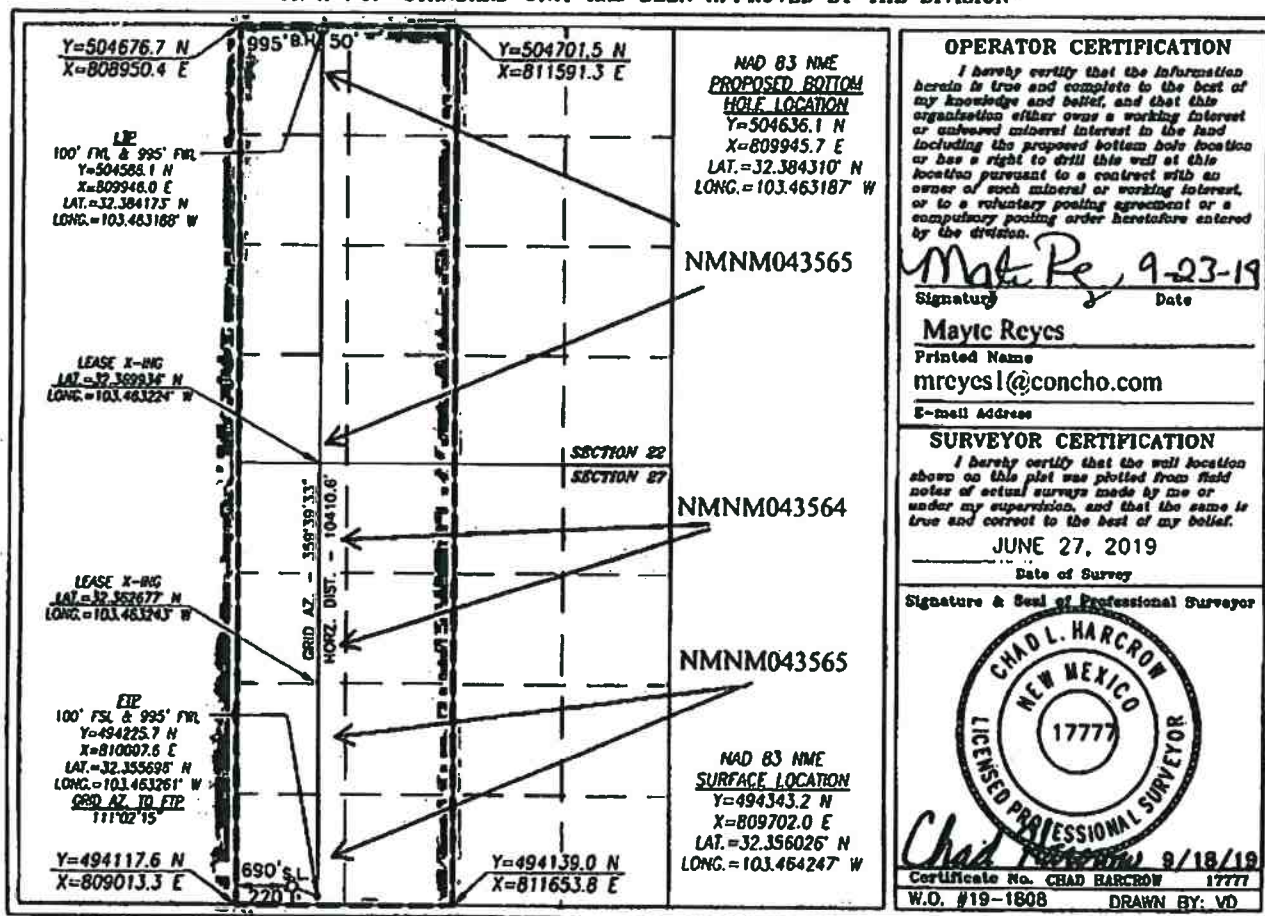
Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	27	22-S	34-E		220	SOUTH	690	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	22	22-S	34-E		50	NORTH	995	WEST	LEA

Dedicated Acres 640	Joint or Infill	Consolidation Code	Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

Ex. C



DANNY KIDWELL
SENIOR STAFF LANDMAN

August 1, 2019

Via Certified USPS – 9414 8149 0246 9822 0206 29

Alpha Energy Partners
PO BOX 10701
Midland, TX 79702

Re: Well Proposal – Squints Federal Com 3H

Sec 27: E/2W/2

Sec 22: E/2W/2

Township 22 South, Range 34 East, N.M.P.M.

SHL: 220' FSL and 1980' FWL, or a legal location in Sec 27 (Unit N)

BHL: 50' FNL and 1485' FWL, or a legal location in Sec 22 (Unit C)

Lea County, New Mexico

Well Proposal – Squints Federal Com 7H

Sec 27: E/2W/2

Sec 22: E/2W/2

Township 22 South, Range 34 East, N.M.P.M.

SHL: 220' FSL and 2010' FWL, or a legal location in Sec 27 (Unit N)

BHL: 50' FNL and 2310' FWL, or a legal location in Sec 22 (Unit C)

Lea County, New Mexico

Well Proposal – Squints Federal Com 8H

Sec 27: W/2W/2

Sec 22: W/2W/2

Township 22 South, Range 34 East, N.M.P.M.

SHL: 220' FSL and 690' FWL, or a legal location in Sec 27 (Unit M)

BHL: 50' FNL and 660' FWL, or a legal location in Sec 22 (Unit D)

Lea County, New Mexico

Dear Sir/Madam:

COG Operating LLC (“COG”), as Operator, hereby proposes to drill the **Squints Federal Com 3H** well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately **10,150'** and a MD of approximately **15,430'** to test the **Bone Spring** Formation (“Operation”). The total cost of the Operation is estimated to be **\$12,070,960.00**, and a detailed description of the cost is set out in the enclosed Authority for Expenditure (“AFE”).

COG Operating LLC (“COG”), as Operator, hereby proposes to drill the **Squints Federal Com 7H** well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately **10,385'** and a MD of approximately **15,665'** to test the **Bone Spring** Formation (“Operation”). The total cost of the Operation is estimated to be **\$12,070,960.00**, and a detailed description of the cost is set out in the enclosed Authority for Expenditure (“AFE”).

COG Operating LLC ("COG"), as Operator, hereby proposes to drill the **Squints Federal Com 8H** well as a horizontal well at the above-captioned location, or at a legal location as approved by the governing regulatory agency, to a TVD of approximately **10,375'** and a MD of approximately **15,655'** to test the **Bone Spring** Formation ("Operation"). The total cost of the Operation is estimated to be **\$12,070,960.00**, and a detailed description of the cost is set out in the enclosed Authority for Expenditure ("AFE").

COG is proposing to drill this well under the terms of the modified 1989 AAPL form of Operating Agreement, a completed executable copy is enclosed for your review and execution. Please sign and return the additional signature pages included. The Operating Agreement covers W/2 of Section 22 and the W/2 of Section 27 - T22S-R34E. It has the following general provisions:

- 100/300 Non-Consenting Penalty
- \$7,000/\$700 Drilling and Producing Rate
- COG Operating LLC named as Operator

Please indicate your participation election in the space provided on page 2, sign and return this letter, along with a signed copy of the enclosed AFE and a copy of your geologic well requirements. Also enclosed, are one (1) copy of the referenced wells Communitization Agreements for your records and four (4) additional sets of signature pages with notary blocks for said Agreements. Please execute and notarize the four (4) additional sets of signature pages for each Agreement and return them. A self-addressed, postage paid envelope is enclosed for your convenience.

If you do not wish to participate, COG proposes to acquire your interest via term assignment. It has the following general provisions:

- 3 year primary term
- Delivering a 75% NRI, proportionately reduced
- \$750 per net acre bonus consideration

The Term Assignment offer terminates October 1, 2019 and is subject to the approval of COG's management and verification of title.

If an agreement cannot be reached within 30 days of the date of this letter, COG will apply to the New Mexico Oil Conservation Division for compulsory pooling of your interest into a spacing unit for the proposed well if uncommitted at such time.

If you have any questions, please do not hesitate to contact the undersigned at (432) 685-2535 or dkidwell@concho.com.

Respectfully,



Danny Kidwell
Senior Staff Landman
Delaware Basin East – New Mexico

_____ I/We hereby elect to participate in the **Squints Federal Com 3H**.

_____ I/We hereby elect **not** to participate in the **Squints Federal Com 3H**.

_____ I/We hereby elect to participate in the **Squints Federal Com 7H**.

_____ I/We hereby elect **not** to participate in the **Squints Federal Com 7H**.

_____ I/We hereby elect to participate in the **Squints Federal Com 8H**.

_____ I/We hereby elect **not** to participate in the **Squints Federal Com 8H**.

Company: ALPHA ENERGY PARTNERS

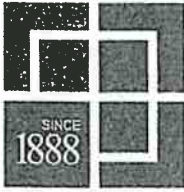
By: _____

Name: _____

Title: _____

Date: _____

Ex. D



HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE, NEW MEXICO 87504

505-982-4554 (FAX) 505-982-8623

WRITER

Gary W. Larson,
Partner

glarson@hinklelawfirm.com

October 23, 2019

VIA CERTIFIED MAIL

Larry T. Long
P.O. Box 1777
Kilgore, TX 75663

Re: COG Operating LLC NMOCD Application

Dear Mr. Long:

Enclosed is a copy of an application for compulsory pooling that COG Operating LLC ("COG") has filed with the New Mexico Oil Conservation Division ("the Division"). COG's application requests an order pooling all uncommitted mineral interests in the Bone Spring formation in a standard 640-acre horizontal spacing unit comprised of the of the W/2 of Section 22 and the W/2 of Section 27, Township 22 South, Range 34 East, NMPM, in Lea Count, New Mexico.

This matter (Division Case No. 20863) is scheduled for hearing at 8:15 a.m. on Thursday, November 14, 2019 in Porter Hall at the Division's offices located 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 COG's application, you may appear at the hearing and present testimony. If you do not appear at that time and become a party of record, you will be precluded from contesting the matter at a later date.

A party appearing in a Division case is required by the Division's Rules to file a Pre-Hearing Statement, which in this matter must be filed no later than Thursday, November 7, 2019. The Pre-Hearing Statement must be filed with the Division's Santa Fe office at the address above, and should include: the name of the party and the party's attorney; a concise statement of the case; the name(s) of the witness(es) the party will call to testify at the hearing; the approximate amount of time the party will need to present the party's case; and an identification of any procedural matters that need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to me.

Thank you for your attention to this matter.

Very truly yours,

Gary W. Larson

GWL/lk
Enclosure

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

PO BOX 1720
ARTESIA, NEW MEXICO 88210
575-622-6510
(FAX) 575-746-6316

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

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:

BTA Oil Producers, LLC
104 S. Pecos
Midland, TX 79701



9590 9402 4582 8278 5983 23

7018 3090 0001 4741 6773

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Toby - McLean

C. Date of Delivery

10/28/19

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

RECEIVED

OCT 28 2019

BTA

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

☐ Mail Restricted Delivery (09)
☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

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:

Larry T. Long
P.O. Box 1777
Kilgore, TX 75663



9590 9402 4582 8278 5983 30

2. Article Number (Transfer from service label)

7018 2290 0000 3426 9384

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

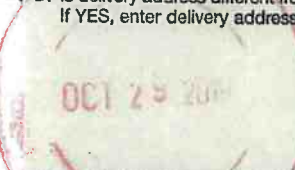
X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Toby - McLean

C. Date of Delivery

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

OCT 28 2019

9590

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Restricted Delivery
☐ 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

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:

Alpha
P.O. Box 10701
Midland, TX 9702



9590 9402 4582 8278 5983 47

2. Article Number (Transfer from service label)

7018 3090 0001 4741 8739

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Toby - McLean

C. Date of Delivery

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

10701

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☒ Certified Mail®

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Restricted Delivery
☐ 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

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:
Tara N. Pace
c/o Nury Pace, Parent/Guardian
258 Cape Jasmine Ct.
The Woodlands, TX 77381



9590 9402 4582 8278 5983 54

2. Article Number (Transfer from service label)

7018 3090 0001 4741 8746

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

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
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

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

Domestic Return Receipt

Certified Mail

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:
Aleyna N. Pace
c/o Nury Pace, Parent/Guardian
258 Cape Jasmine Ct.
The Woodlands, TX 77381



9590 9402 4582 8278 5983 61

2. Article Number (Transfer from service label)

7018 3090 0001 4741 8753

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

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
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

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

Domestic Return Receipt

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:

Hunt Oil Company
1900 N. Akard St.
Dallas, TX 75201



9590 9402 4582 8278 5983 78

2. Article Number (Transfer from service label)

7018 3090 0001 4741 8760

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
If YES, enter delivery address below: ☐ No

Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

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:

Tiffany Mahy
P.O. Box 3598
Roswell, NM 88202



9590 9402 4582 8278 5984 15

2. Article Number (Transfer from service label)

7018 3090 0001 4741 8807

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Justin Crum

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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

1 Restricted Delivery

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:

Justin T. and Tiffany L. Crum,
husband & wife
P.O. Box 3598
Roswell, NM 88202



9590 9402 4821 9032 2146 77

2. Article Number (Transfer from service label)

7018 2290 0000 3432 5004

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Justin Crum

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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

1 Restricted Delivery

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:

Madison M. Hinkle
P.O. Box 2292
Roswell, NM 88202



9590 9402 4582 8278 5983 85

2. Article Number (Transfer from service label)

7018 3090 0001 4741 8777

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

Madison Hinkle

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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

1 Restricted Delivery

006-34444

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Rolla R. Hinkle III P.O. Box 2292 Roswell, NM 88202</p>		<p>B. Received by (Printed Name) </p>	<p>C. Date of Delivery OCT 28 2019</p>
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4741 8784</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>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 <i>Squirts</i> Domestic Return Receipt</p>			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Justin T. Crum P.O. Box 3598 Roswell, NM 88202</p>		<p>B. Received by (Printed Name) Justin T. Crum</p>	<p>C. Date of Delivery OCT 28 2019</p>
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4741 8791</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>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 <i>OC6 - Squirts</i> Domestic Return Receipt</p>			

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X </p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Douglas Investments, Inc. P.O. Box 79148 Saginaw, TX 76179</p>		<p>B. Received by (Printed Name) DAVID SORIANO</p>	<p>C. Date of Delivery 10-26-19</p>
<p>2. Article Number (Transfer from service label) 7018 3090 0001 4741 6483</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>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053 <i>OC6 - Squirts</i> Domestic Return Receipt</p>			

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:

Wood W. Wall & Maria L. Wall
P.O. Box 278
Alto, NM 88312



9590 9402 4821 9032 2144 86

2. Article Number (Transfer from service label)

7018 3090 0001 4741 8814

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Maria Wall

☐ Agent
☐ Addressee

C. Date of Delivery

☐ 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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Delivery Restricted Delivery

(over \$500)

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

OC6 - Squints Domestic Return Receipt

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:

McMullen Minerals, LLC
2821 W. 7th St., Suite 515
Fort Worth, TX 76107



9590 9402 4821 9032 2144 93

2. Article Number (Transfer from service label)

7018 3090 0001 4741 8821

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

MERLEON

☐ Agent
☐ Addressee

C. Date of Delivery

10/28/19

☐ 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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

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

OC6 - Squints Domestic Return Receipt

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:

Pegasus Resources, LLC
P.O. Box 123610
Fort Worth, TX 76121



9590 9402 4821 9032 2145 09

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6438

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

B. Received by (Printed Name)

Mark Drey

☐ Agent
☐ Addressee

C. Date of Delivery

☐ 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
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

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

OC6 - Squints Domestic Return Receipt

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:

GGM Exploration, Inc.
P.O. Box 123610
Fort Worth, TX 76121



9590 9402 4821 9032 2145 16

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6445

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Matt Sny

C. Date of Delivery

D. Is delivery address different from item 1?

☐ YesIf 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☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

stricted Delivery

Ocb Sny

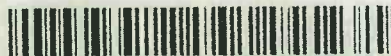
Domestic Return Receipt

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.

Sammy L. Morrison, Trustee
Sammy & Sibyl Morrison Mineral
Trust
4617 Breezeway Ct.
Midland, TX 79707



9590 9402 4821 9032 2145 23

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6452

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Sammy Morrison

C. Date of Delivery

10/5/17

D. Is delivery address different from item 1?

☐ YesIf 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☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

cted Delivery

Ocb Sny

Domestic Return Receipt

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:

Misty Morning Partnership, Ltd.
2310 Christopher Dr.
Abilene, TX 79602



9590 9402 4821 9032 2145 54

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6476

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Dennis Reynolds

C. Date of Delivery

10-26-19

D. Is delivery address different from item 1?

☐ YesIf 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☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

icted Delivery

Ocb Sny

Domestic Return Receipt

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:

Robert E. Landreth
110 W. Louisiana, Suite 404
Midland, TX 79701



9590 9402 4821 9032 2145 85

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6506

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Linda Carter

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

LINDA CARTER

C. Date of Delivery

10-25-19

- ☐ 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
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

OCB - Sgumts

Domestic Return Receipt

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:

JJR, Inc.
2406 Irving Blvd.
Dallas, TX 75207



9590 9402 4821 9032 2145 47

2. A. Article Number (Transfer from service label)

7018 3090 0001 4741 6469

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

J. J. J. J.

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

- ☐ 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
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

OCB - Sgumts

Domestic Return Receipt

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:

Scott W. Tanberg
2509 Legacy Oaks
Midland, TX 79705



9590 9402 4821 9032 2145 92

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6513

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Scott Tanberg

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

Scott Tanberg

C. Date of Delivery

10/30/19

- ☐ 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
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

OCB - Sgumts

Domestic Return Receipt

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:

Deborah Fedric
P.O. Box 1837
Roswell, NM 88202



9590 9402 4821 9032 2146 39

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6551

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

D. Date of Delivery

 delivery address different from item 1? ☐ Yes
 YES, enter delivery address below: ☐ No

 OCT 28 2019
 88201

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input 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 |

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

Domestic Return Receipt

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:

Norton, LLC
60 Beach Avenue
South Dartmouth, MA 02748



9590 9402 4821 9032 2146 08

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6520

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
 If YES, enter delivery address below: ☐ No

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input 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 |

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

Domestic Return Receipt

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:

States Royalty Limited Partnership
P.O. Box 911
Breckenridge, TX 76424



9590 9402 4821 9032 2146 46

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6568

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

 delivery address different from item 1? ☐ Yes
 YES, enter delivery address below: ☐ No

 OCT 28 2019
 USPS - 76424

3. Service Type

- | | |
|--|---|
| <input type="checkbox"/> Adult Signature | <input type="checkbox"/> Priority Mail Express® |
| <input type="checkbox"/> Adult Signature Restricted Delivery | <input type="checkbox"/> Registered Mail™ |
| <input checked="" type="checkbox"/> Certified Mail® | <input type="checkbox"/> Registered Mail Restricted Delivery |
| <input 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 |

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

Domestic Return Receipt

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:

Monty McLane
P.O. Box 9451
Midland, TX 79708



9590 9402 4821 9032 2146 22

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6544

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Dan Sothman

C. Date of Delivery

10-28-11

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

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

(over \$500)

OCB-Squint

Domestic Return Receipt

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:

George H. Hunker, III
P.O. Box 524
Lander, WY 82502



9590 9402 4821 9032 2146 60

2. Article Number (Transfer from service label)

7018 3090 0001 4741 6575

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

Paula Hunker

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

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

(over \$500)

OCB-Squint

Domestic Return Receipt

Ex. E

Affidavit of Publication

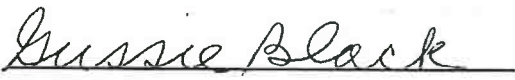
STATE OF NEW MEXICO
COUNTY OF LEA

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 1 issue(s).

Beginning with the issue dated
October 27, 2019
and ending with the issue dated
October 27, 2019.


Publisher

Sworn and subscribed to before me this
27th day of October 2019.


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 October 27, 2019

This is to notify all interested parties, including BTA Oil Producers, LLC, Larry T. Long, Alpha Energy Partners, Tara N. Pace c/o Nuray Pace, as parent & Guardian, Aleya N. Pace, c/o Nuray Pace, as parent & Guardian, Hunt Oil Company, Madison M. Hinkle, Rolla R. Hinkle III, Justin T. Crum, Tiffany Mahy, Woody Wall, Maria L. Wall, McMullen Minerals, LLC, Pegasus Resources, LLC, GOM Exploration, Inc., Sammy L. Morrison, Trustee of the Sammy & Sibyl Morrison Mineral Trust, JJR, Inc., Misty Morning Partnership, Ltd., Douglas Investments, Inc., Panther City Exploration Company, LLC, Robert E. Landreth, Scott W. Tanberg, Norton, LLC, Alan Jochimesen, Monty D. McLane, States Royalty Limited Partnership, Deborah Fedric, George H. Hunker, III, Margaret Hunker Tsui, as Trustee of the Margaret Hunker Tsui Trust, McMullen Minerals, LLC, Pegasus Resources, LLC, and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by COG Operating (Case No. 20863) at 8:15 a.m. on November 14, 2019 in Porter Hall at 1220 South St. Francis Drive, Santa Fe, New Mexico. Applicant COG Operating LLC seeks an order pooling all uncommitted mineral interests in the Bone Spring formation in a 640-acre standard horizontal spacing unit comprised of the W/2 of Section 22 and the W/2 of Section 27, Township 22 South, Range 34 East, NMPM in Lea County, New Mexico. The horizontal spacing unit will be dedicated to the following wells: (1) the Squints Federal Com #7H well, which will be horizontally drilled from a surface location in Unit N in Section 27 to a bottom hole location in Unit C in Section 22; and (2) the Squints Federal Com #8H well, which will be horizontally drilled from a surface location in Unit M in Section 27 to a bottom hole location in Unit D in Section 22. The completed intervals for the wells will be orthodox. Also to be considered will be the costs of drilling and completing the wells and the allocation of the costs, the designation of COG Operating, LLC as the operator of the wells, and a 200% charge for the risk involved in drilling and completing the wells. The wells are located approximately 20 miles southwest of Eunice, New Mexico.
#34789

02107475

00235070

HINKLE, HENSLEY, SHANOR & MARTIN, LLP
PO BOX 2068
SANTA FE, NM 87504

Ex. F

**COG OPERATING LLC
AUTHORITY FOR EXPENDITURE
DRILLING**

WELL NAME: SQUINTS FED COM 7H	PROSPECT NAME: Lea 2234 (717159)
SHL: Sec 27: 220' FSL & 2010' FWL	STATE & COUNTY: New Mexico, Lea
BHL: Sec 22: 50' FNL & 2310' FWL	OBJECTIVE: Drill and Complete
FORMATION: Bone Spring	DEPTH: 15,430
LEGAL: Sec 27 and 22 : T22S-R34E	TVD: 10,150

		Drill - Rig Release(D)	Completion(C)	Tank Btty Constraint(TB)	Prma. Equipment(PEQ)	TOTAL
INTANGIBLE COSTS						
Time/Course/Permit	201	20,000				20,000
Insurance	202	2,500				2,500
Damages/Right of Way	203	20,000		351		20,000
Survey/Stake Location	204	7,000		352		7,000
Location/Pits/Road Expense	205	135,000	10,000	353	45,000	190,000
Drilling / Completion Overhead	206	8,400	15,000			23,400
Turnkey Contract	207		1,418,000			1,418,000
Footage Contract	208		473,000			473,000
Daywork Contract	209	720,000	404,000			1,124,000
Directional Drilling Services	210	243,000	399,000			642,000
Fuel & Power	211	152,000	68,000	354	367	220,000
Water	212	105,000	945,000		368	1,050,000
Bits	213	92,000	9,000		369	101,000
Mud & Chemicals	214	95,000	48,000		370	143,000
Drill Stem Test	215		315			0
Coring & Analysis	216					0
Cement Surface	217	37,000				37,000
Cement Intermediate	218	60,000				60,000
Cement 2nd Intermediate/Production	219	130,000				130,000
Cement Squeeze & Other (Kickoff Plug)	220				371	0
Float Equipment & Centralizers	221	50,000				50,000
Casing Crews & Equipment	222	52,000				52,000
Fishing Tools & Service	223		323		372	0
Geologic/Engineering	224	7,200	324	355	373	7,200
Contract Labor	225	6,500	23,800	356	374	161,800
Company Supervision	226	50,400	15,000	357	375	65,400
Contract Supervision	227	123,000	268,000	358	376	396,000
Testing Casing/Tubing	228	30,000	5,000		377	35,000
Mud Logging Unit	229	36,000	329			36,000
Logging	230				378	0
Perforating/Wireline Services	231	4,000	538,000		379	542,000
Stimulation/Treating			12,000		380	12,000
Completion Unit			138,000		381	148,800
Swabbing Unit					382	0
Rentals-Surface	235	150,000	385,000	359	383	542,000
Rentals-Subsurface	236	135,000	90,000		384	225,000
Trucking/Forklift/Rig Mobilization	237	200,000	40,000	360	385	243,000
Welding Services	238	3,000	5,000	361	386	8,000
Water Disposal	239		60,000	362	387	445,000
Plug to Abandon	240					0
Seismic Analysis	241					0
Miscellaneous	242		5,000		389	5,000
Contingency	243	54,500	250,000	363	390	304,500
Closed Loop & Environmental	244	275,000		364	388	275,000
Dyed Diesel			484,000			484,000
Coil Tubing			750,000			750,000
Flowback Crews & Equip			48,000			48,000
Offset Directional/Frac	248		348			0
TOTAL INTANGIBLES		3,003,500	6,903,800	305,000	280,300	10,492,600
TANGIBLE COSTS						
Surface Casing	401	81,000				81,000
Intermediate Casing	402	184,000				184,000
Production Casing/Liner	403	361,000				361,000
Tubing			53,460		530	58,460
Wellhead Equipment	405	28,000	20,900		531	51,900
Pumping Unit					536	96,000
Prime Mover					507	0
Rods					508	35,000
Pumps-Sub Surface (BH)					532	5,000
Tanks				510	65,000	65,000
Flowlines				511	27,000	27,000
Heater Treater/Separator				512	140,000	140,000
Electrical System				513	135,000	150,000
Packers/Anchors/Hangers	414		65,000		533	15,000
Couplings/Fittings/Valves	415			515	105,000	105,000
Dehydration				517		0
Injection Plant/CO2 Equipment				518		0
Pumps-Surface				521	5,000	5,000
Instrumentation/SCADA/POC				522	11,000	16,000
Miscellaneous	419			523	3,000	3,000
Contingency	420			524		0
Meters/LACT				525	26,000	26,000
Flares/Combustors/Emission				526	25,000	25,000
Gas Lift/Compression			15,000	516	60,000	75,000
TOTAL TANGIBLES		854,000	154,360	599,000	171,000	1,578,360
TOTAL WELL COSTS		3,857,500	7,058,160	904,000	451,300	12,070,960

COG Operating LLC	30%	7%	4%
-------------------	-----	----	----

Date Prepared 7/11/19

COG Operating LLC

We approve _____
By: DWD OR

Company Alpha Energy Partners, LLC
By: _____

Printed Name _____
Title _____
Date _____

This AFE is only an estimate. By signing you agree to pay your share of the actual costs incurred.

**COG OPERATING LLC
AUTHORITY FOR EXPENDITURE
DRILLING**

WELL NAME: SQUINTS FED COM 8H SHL: Sec 27: 220' FSL & 690' FWL BHL: Sec 22: 50' FNL & 660' FWL FORMATION: Bone Spring LEGAL: Sec 27 and 22 : T2S-R34E	PROSPECT NAME: Lea 2234 (717159) STATE & COUNTY: New Mexico, Lea OBJECTIVE: Drill and Complete DEPTH: 15,655 TVD: 10,375
--	---

		Drlg - Rla		Completion(C)		Tank Bty		Pmpa		TOTAL	
INTANGIBLE COSTS		Release(D)				Constructn(TB)		Equipment(PEQ)			
Title/Curative/Permit	201		20,000								20,000
Insurance	202		2,500	302							2,500
Damages/Right of Way	203		20,000	303							20,000
Survey/Stake Location	204		7,000								7,000
Location/Pits/Road Expense	205		135,000	305	10,000		45,000	305			190,000
Drilling / Completion Overhead	206		6,400	306	15,000						23,400
Turnkey Contract	207			307	1,418,000						1,418,000
Footage Contract	208			308	473,000						473,000
Daywork Contract	209		720,000	309	404,000						1,124,000
Directional Drilling Services	210		243,000	310	399,000						642,000
Fuel & Power	211		152,000	311	68,000	354		357			220,000
Water	212		105,000	312	945,000			358			1,050,000
Bits	213		92,000	313	9,000			359			101,000
Mud & Chemicals	214		95,000	314	46,000			370			141,000
Drill Stem Test	215			315							0
Coring & Analysis	216										0
Cement Surface	217		37,000								37,000
Cement Intermediate	218		60,000								60,000
Cement 2nd Intermediate/Production	219		130,000								130,000
Cement Squeeze & Other (Kickoff Plug)	220										0
Float Equipment & Centralizers	221		50,000					371			50,000
Casing Crews & Equipment	222		52,000								52,000
Fishing Tools & Service	223			323							0
Geologic/Engineering	224		7,200	324		355		372			7,200
Contract Labor	225		6,500	325	23,600	356	125,000	374	6,500		161,600
Company Supervision	226		50,400	326	15,000	357		375			65,400
Contract Supervision	227		123,000	327	268,000	358		376	5,000		396,000
Testing Casing/Tubing	228		30,000	328	5,000			377			35,000
Mud Logging Unit	229		36,000	329							36,000
Logging	230							378			0
Perforating/Wireline Services	231		4,000	331	538,000			379			542,000
Stimulation/Treating				332	12,000			380			12,000
Completion Unit				333	138,000			381	8,800		146,800
Brushing Unit				334				382			0
Rentals-Surface	235		150,000	335	365,000	359		383	7,000		542,000
Rentals-Subsurface	236		135,000	336	90,000			384			225,000
Trucking/Forklift/Rig Mobilization	237		200,000	337	40,000	360		385	3,000		243,000
Welding Services	238		3,000	338	5,000	361		386			8,000
Water Disposal	239			339	60,000	362	135,000	387	250,000		445,000
Plug to Abandon	240			340							0
Seismic Analysis	241			341							0
Miscellaneous	242			342	5,000			389			5,000
Contingency	243		54,500	343	250,000	363		390			304,500
Closed Loop & Environmental	244		275,000	344		364		388			275,000
Dyed Diesel				345	484,000						484,000
Coil Tubing				346	750,000						750,000
Flowback Crews & Equip				347	48,000						48,000
Offset Directional/Frac	248			348							0
TOTAL INTANGIBLES			3,003,500		6,903,800		305,000		280,300		10,492,600
TANGIBLE COSTS											
Surface Casing	401		81,000								81,000
Intermediate Casing	402		184,000								184,000
Production Casing/Liner	403		361,000								361,000
Tubing				504	53,480			530	5,000		58,480
Wellhead Equipment	405		28,000	505	20,900			531	3,000		51,900
Pumping Unit								506	96,000		96,000
Prime Mover								507			0
Rods								508	35,000		35,000
Pumps-Sub Surface (BH)				509				532	5,000		5,000
Tanks						510	65,000				65,000
Flowlines						511	27,000				27,000
Heater Treater/Separator						512	140,000				140,000
Electrical System						513	135,000	533	15,000		150,000
Packers/Anchors/Hangers	414			514	65,000			534	2,000		67,000
Couplings/Fittings/Valves	415					515	105,000				105,000
Dehydration						517					0
Injection Plant/CO2 Equipment						518					0
Pumps-Surface						521	5,000				5,000
Instrumentation/SCADA/POC						522	11,000	529	7,000		18,000
Miscellaneous	419			519		523		535	3,000		3,000
Contingency	420			520		524		536			0
Meters/LACT						525	26,000				26,000
Flares/Combustors/Emission						526	25,000				25,000
Gas Lift/Compression				527	15,000	516	60,000	528			75,000
TOTAL TANGIBLES			654,000		154,360		589,000		171,000		1,578,360
TOTAL WELL COSTS			3,657,500		7,058,160		904,000		451,300		12,070,960

	30%	7%	4%
COG Operating LLC			

Date Prepared 7/11/19

COG Operating LLC

We approve
% Working Interest

By DWD DR

Company Alpha Energy Partners, LLC
By

Printed Name

Title

Date

This AFE is only an estimate. By signing you agree to pay your share of the actual costs incurred.

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

**APPLICATION OF COG OPERATING
LLC FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO**

Case No. 20863

**SELF-AFFIRMED STATEMENT OF
CANDICE PETTIJOHN**

1. I am over 18 years of age and am competent to provide this Self-Affirmed Statement. I have personal knowledge of the matters addressed herein.
2. I am a geologist at COG Operating, LLC ("COG"). I am familiar with the geological matters that pertain to COG's application.
3. Attached as Exhibit A is a map that shows the proposed location of the Squints Federal Com #7H and #8H wells in relation to other Bone Spring wells drilled in the vicinity. The preference is for stand-up wells (north to south or south to north), and the completed wells in the area (recent completions) apparently are commercial.
4. Attached as Exhibit B is a structure map of the Second Bone Spring Sand, which is the target zone for the proposed wells.
5. Attached as Exhibit C is a cross section map for the Squints Federal Com #7H and #8H wells.
6. Attached as Exhibit D is a north to south cross section. The well logs on the cross section provide a representative sample of the Bone Spring formation in the area. The target zone for the proposed well is continuous across the HSU.
7. Based on the information contained in Exhibits A, B, C, and D, I am able to conclude that:

Case No. 20863
COG OPERATING
Exhibit 2

- a) The HSU is justified from a geologic standpoint;
- b) There is no faulting or other geologic impediment that could adversely affect the drilling of the proposed well; and
- c) Each quarter-quarter section in the HSU will contribute more or less equally to production.

8. In my opinion, the granting of COG's application will serve the interests of conservation and the prevention of waste.

9. Exhibits A through D were either prepared by me or compiled from company records.

10. I understand that this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 9 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 handwritten next to my signature below.


Candice Pettijohn

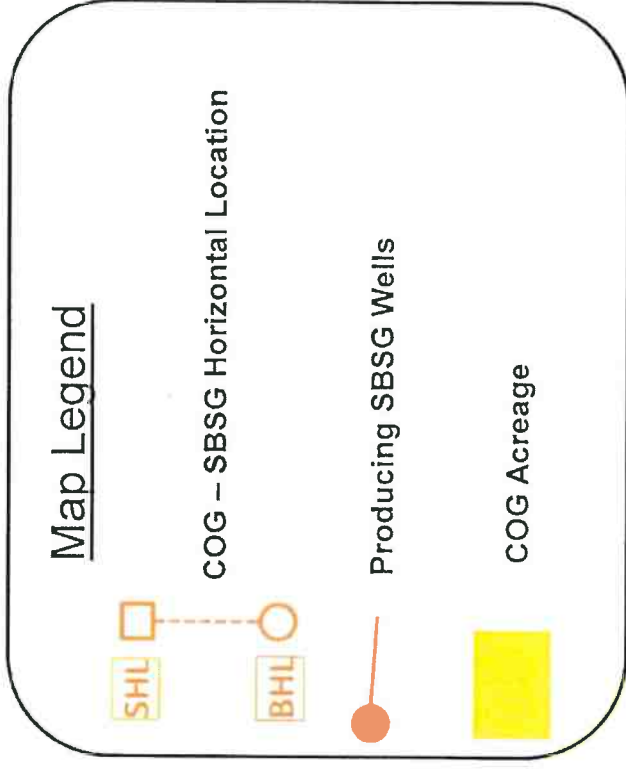
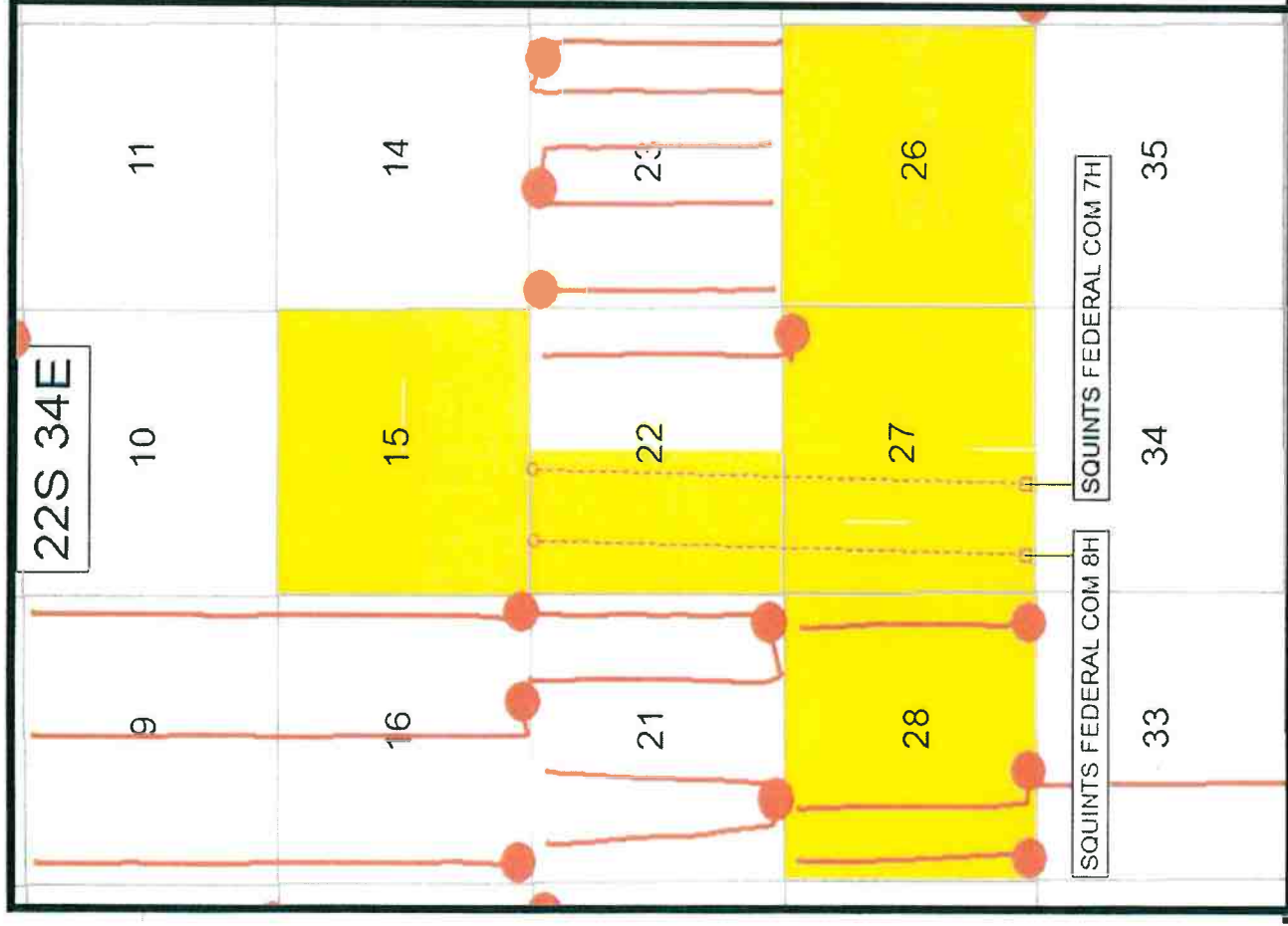
11/13/19
Date

Ex. A

SQUINTS FEDERAL COM PROJECT

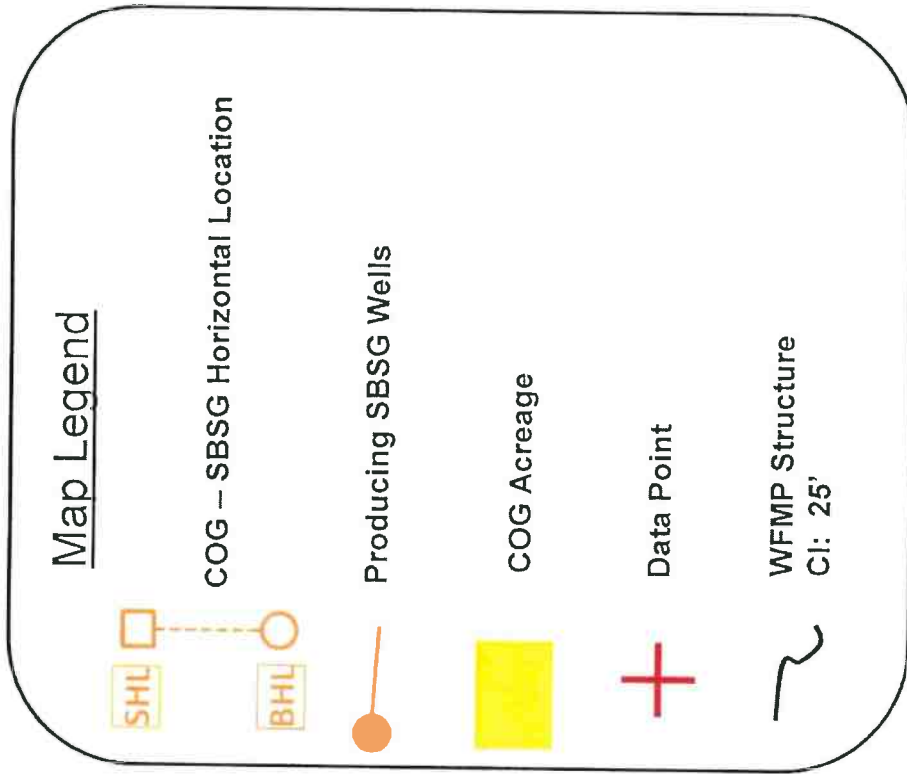
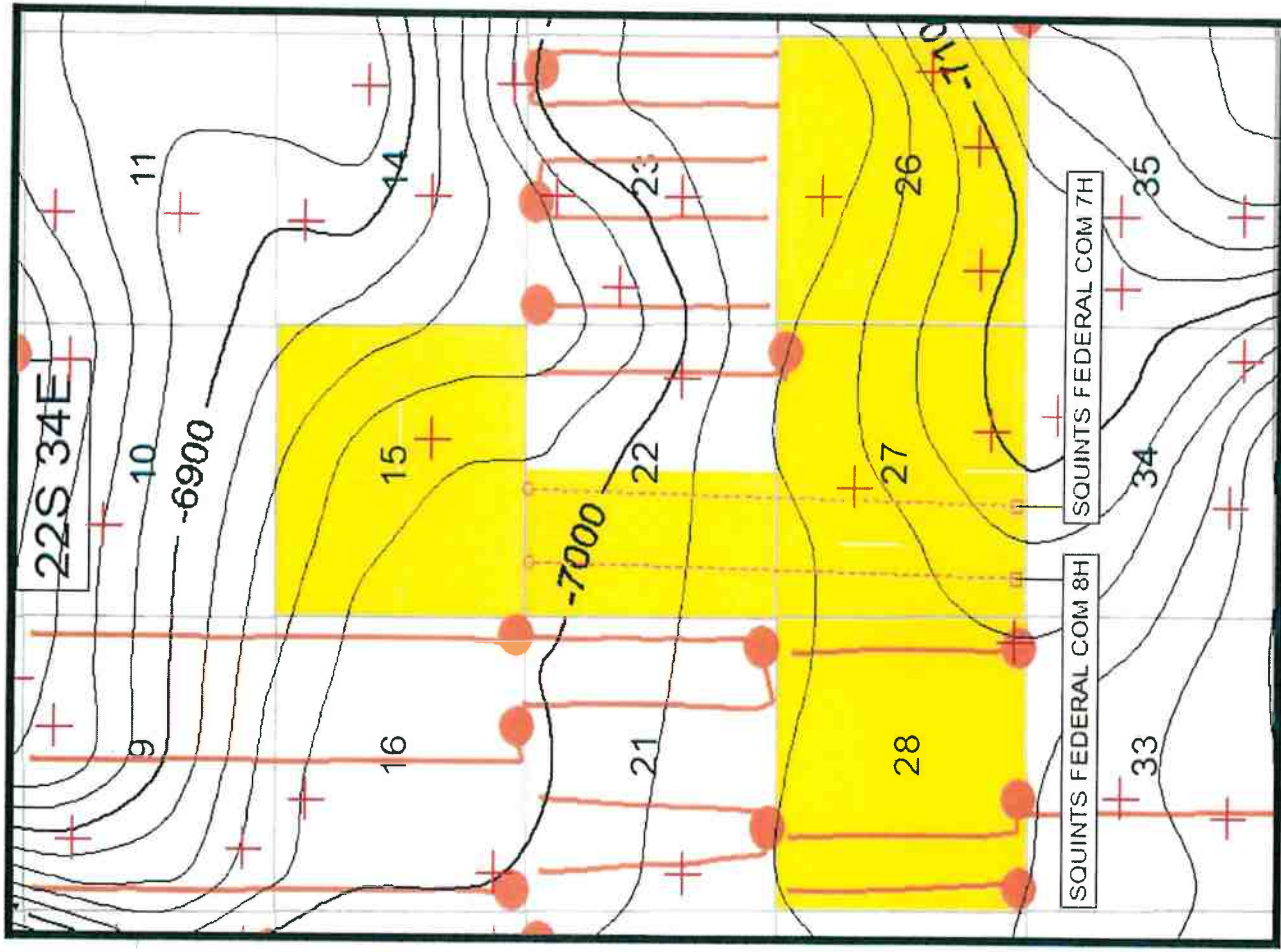
Squints Federal Com 7H & 8H

Section 27 T22S-R34E



Ex. B

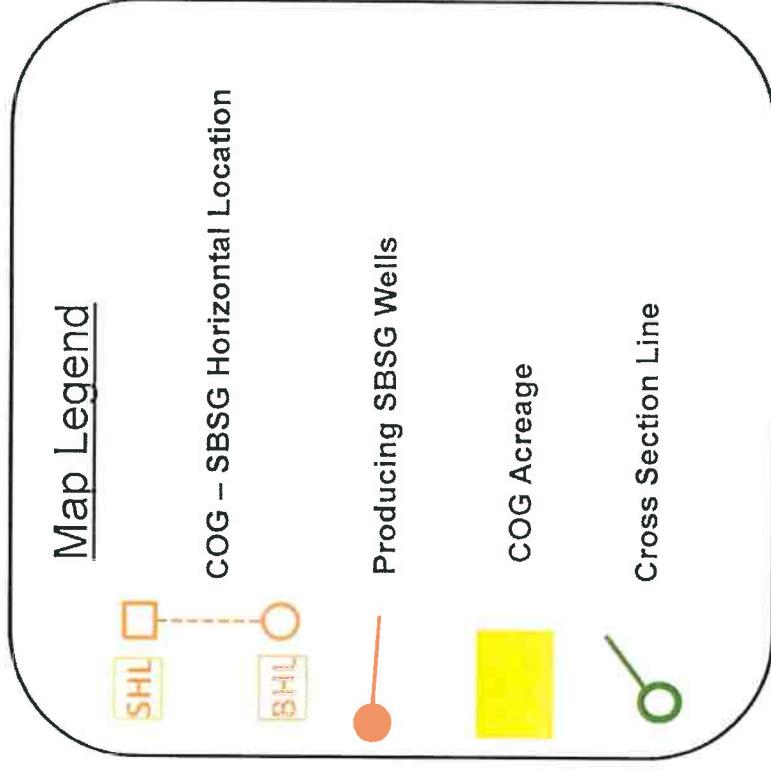
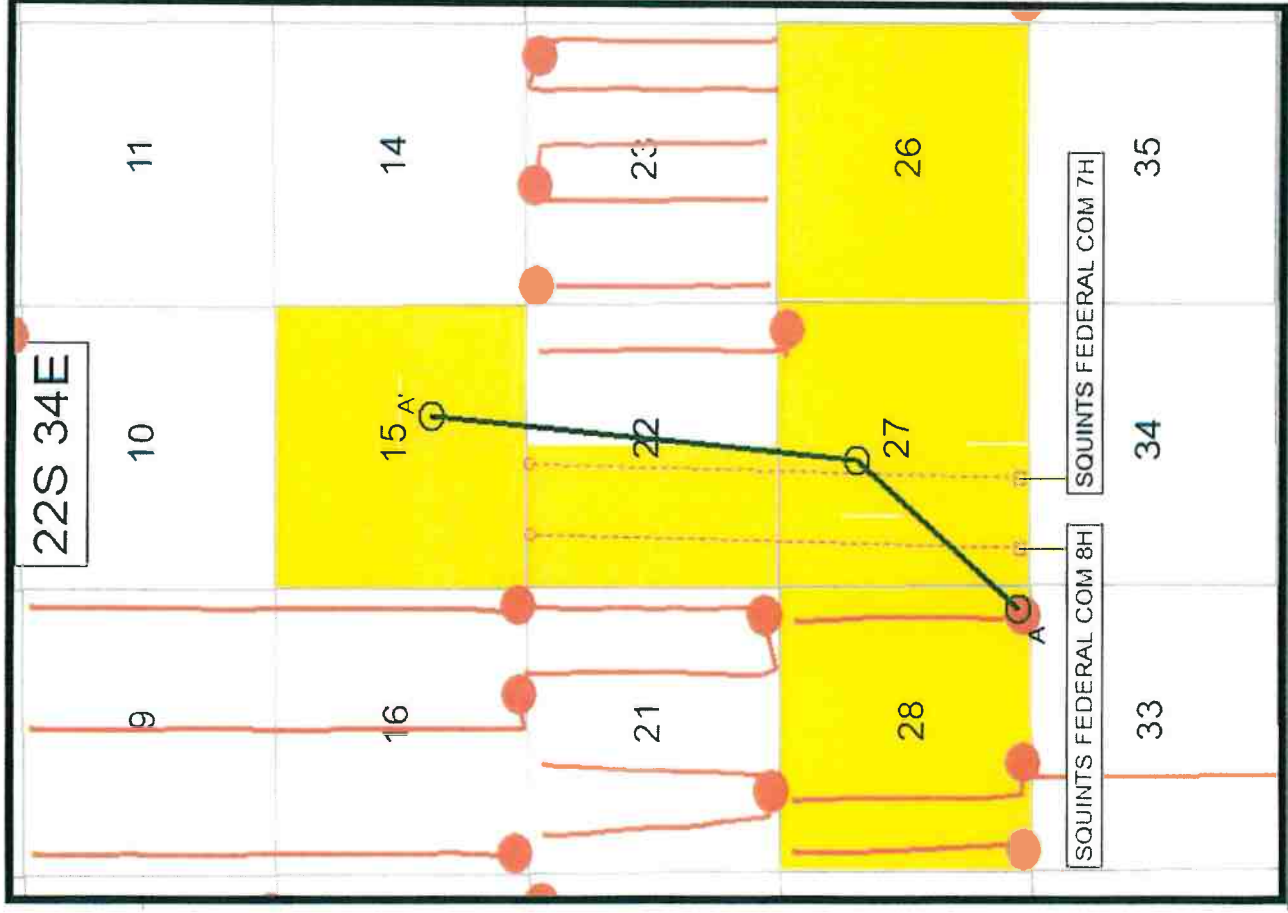
Second Bone Spring Sand Base Subsea Structure Map
 Squints Federal Com 7H & 8H
 Section 27 T22S-R34E



Ex. C

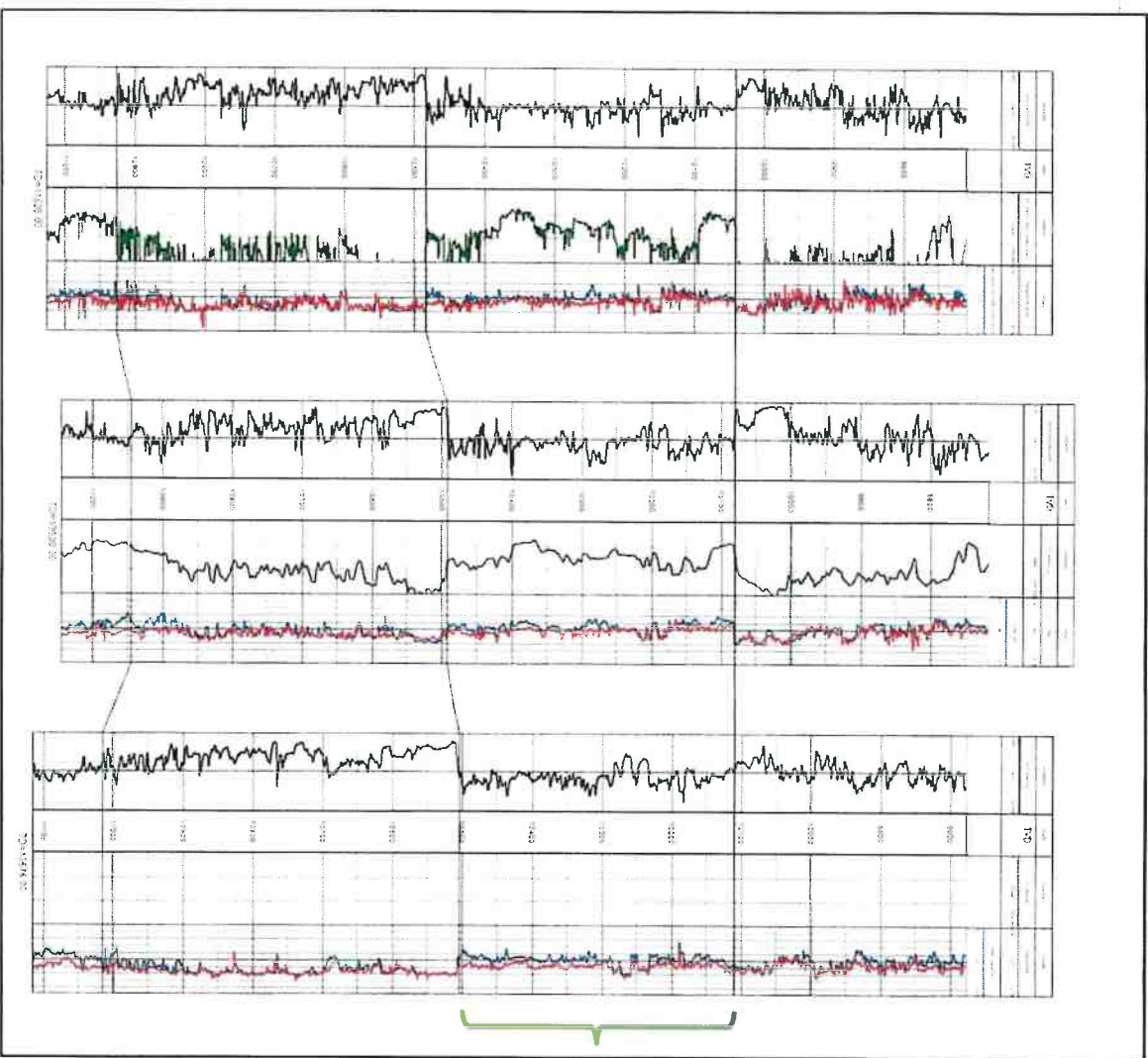
CROSS SECTION Map

Squints Federal Com 7H & 8H
Section 27 T22S-R34E



Ex. D

A 0 120' 800' 1200' **A'**
 COG OPERATING LTD. JPM ENERGY COMPANY ADECO OIL & GAS (CANADA) LTD.
 SURVEILLANCE, PARTIAL IN ADECO OIL & GAS (CANADA) LTD. ADECO OIL & GAS (CANADA) LTD.
 MAP 20.1, 20.2, 20.3, 20.4, 20.5, 20.6, 20.7 MAP 20.1, 20.2, 20.3, 20.4, 20.5, 20.6, 20.7 MAP 20.1, 20.2, 20.3, 20.4, 20.5, 20.6, 20.7



Stratigraphic Cross Section A – A'

SBSG Sand-DATUM

Lateral Target

SBSG Sand Base

TBSG Sand

CASING POINT

