

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

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

CASE NO. 22630

EXHIBIT INDEX

Compulsory Pooling Checklist

Exhibit A	Self-Affirmed Statement of Cato Clark
A-1	Application & Proposed Notice of Hearing
A-2	C-102
A-3	Plat of Tracts, Ownership Interests, Pooled Parties, Unit Recapitulation
A-4	Sample Well Proposal Letter & AFE(s)
A-5	Summary of Communications
A-6	Hearing Notice Letter and Return Receipts
A-7	Affidavit of Publication
Exhibit B	Self-Affirmed Statement of Evan Kochelek
B-1	Resume
B-2	Project Location Map
B-3	Cross Section (including wells) & Subsea Structure Map
B-4	Stratigraphic Cross Section
B-5	Gross Isopach

COMPULSORY POOLING APPLICATION CHECKLIST

ALL INFORMATION IN THE APPLICATION MUST BE SUPPORTED BY SIGNED AFFIDAVITS

Case No.: 22630	
Hearing Date:	4/7/2022
Applicant	Catena Resources Operating, LLC
Designated Operator & OGRID	328449
Applicant's Counsel	Hinkle Shanor LLP
Case Title	Application of Catena Resources Operating, LLC for Compulsory Pooling, Lea County, New Mexico
Entries of Appearance/Intervenors	N/A
Well Family	Foxtail E2 05 32 W1 State Com
Formation/Pool	
Formation Name(s) or Vertical Extent	Scharb; Wolfcamp (55640)
Primary Product (Oil or Gas)	Oil
Pooling this vertical extent	Scharb; Wolfcamp (55640)
Pool Name and Pool Code	Scharb; Wolfcamp (55640)
Well Location Setback Rules	Standard
Spacing Unit Size	640
Spacing Unit	
Type (Horizontal/Vertical)	Horizontal
Size (Acres)	640
Building Blocks	quarter
Orientation	North/South
Description: TRS/County	E2 of Section 5 Township 19 South, Range 35 East and 32, Township 18 South, Range 35 East, Lea County, NM
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	W/2 E/2 of Sections 5 and 32
Proximity Defining Well: if yes, description	Foxtail E2 05 32 W1 State Com 1H
Well(s)	
Name & API (if assigned), surface and bottom hole location, footages, completion target, orientation, completion status (standard or non-standard)	Add wells as needed
Well #1	Foxtail E2 05 32 W1 State Com 1H (API # pending) SHL: 462' FNL & 1103' FEL, Unit A, Section 8, T19S-R35E BHL: 100' FNL & 1649' FEL, Unit B, Section 32, T18S-R35E Completion Target: Wolfcamp (Approx. 10,870' TVD) Well Orientation: South to North
Horizontal Well First and Last Take Points	Exhibit A-2
Completion Target (Formation, TVD and MD)	Exhibit A-4
AFE Capex and Operating Costs	
Drilling Supervision/Month \$	\$8,500.00
Production Supervision/Month \$	\$850.00
Justification for Supervision Costs	Exhibit A
Requested Risk Charge	200%
Notice of Hearing	
Proposed Notice of Hearing	Exhibit A-1
Proof of Mailed Notice of Hearing (20 days before hearing)	Exhibit A-6
Proof of Published Notice of Hearing (10 days before hearing)	Exhibit A-7
Ownership Determination	

Land Ownership Schematic of Spacing Unit	Exhibit A-3
Tract List (including lease numbers & owners)	Exhibit A-3
Pooled Parties (including ownership type)	Exhibit A-3
Unlocatable Parties to be Pooled	Exhibit A-3
Ownership Depth Severance (including percentage above & below)	N/A
Joinder	
Sample Copy of Proposal Letter	Exhibit A-4
List of Interest Owners (ie Exhibit A of JOA)	Exhibit A-3
Chronology of Contact with Non-Joined Working Interests	Exhibit A-5
Overhead Rates In Proposal Letter	N/A
Cost Estimate to Drill and Complete	Exhibit A-4
Cost Estimate to Equip Well	Exhibit A-4
Cost Estimate for Production Facilities	Exhibit A-4
Geology	
Summary (including special considerations)	Exhibit B
Spacing Unit Schematic	Exhibit B-2
Gross Isopach	Exhibit B-5
Well Orientation (with rationale)	Exhibit B
Target Formation	Exhibit B
HSU Cross Section	Exhibit B-4
Depth Severance Discussion	N/A
Forms, Figures and Tables	
C-102	Exhibit A-2
Tracts	Exhibit A-3
Summary of Interests, Unit Recapitulation (Tracts)	Exhibit A-3
General Location Map (including basin)	Exhibit B-2
Well Bore Location Map	Exhibit B-2
Structure Contour Map - Subsea Depth	Exhibit B-3
Cross Section Location Map (including wells)	Exhibit B-3
Cross Section (including Landing Zone)	Exhibit B-4
Additional Information	
CERTIFICATION: I hereby certify that the information provided in this checklist is complete and accurate.	
Printed Name (Attorney or Party Representative):	Dana S. Hardy
Signed Name (Attorney or Party Representative):	/s/ Dana S. Hardy
Date:	4/5/2022

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

APPLICATION OF CATENA RESOURCES
OPERATING, LLC FOR COMPULSORY
POOLING, LEA COUNTY, NEW MEXICO

CASE NO. 22630

SELF-AFFIRMED STATEMENT
OF CATO CLARK

1. I am the Vice President of Land at Catena Resources Operating, LLC (“Catena”) and am over 18 years of age. I have personal knowledge of the matters addressed herein and am competent to provide this Self-Affirmed Statement. I have previously testified before the New Mexico Oil Conservation Division (“Division”) and my credentials as an expert in petroleum land matters were accepted and made a matter of record.

2. I am familiar with the land matters involved in the above-referenced case. Copies of the application and proposed hearing notice are attached hereto as **Exhibit A-1**.

3. None of the parties proposed to be pooled in this case indicated opposition to this matter proceeding by affidavit, therefore I do not expect any opposition at hearing.

4. Catena seeks an order pooling all uncommitted mineral interests in the Wolfcamp formation in a 640-acre, more or less, standard horizontal spacing unit (“Unit”) comprised of the E/2 of Section 5 Township 19 South, Range 35 East and the E/2 of Section 32, Township 18 South, Range 35 East, Lea County, New Mexico.

5. The Unit will be dedicated to the **Foxtail E2 05 32 W1 State Com 1H** well (“Well”), which will be horizontally drilled from a surface location in the NE/4 NE/4 (Unit A) of Section 8 to a bottom hole location in the NW/4 NE/4 (Unit B) of Section 32.

6. The completed interval of the Well will be within 330' of the quarter-quarter section line separating the W/2 E/2 and E/2 E/2 of Sections 5 and 32 to allow for the creation of a standard 640-acre horizontal spacing unit.

7. The completed interval of the Well will be orthodox.

8. The Well is located in the Scharb; Wolfcamp (Pool Code 55640).

9. With respect to well setback requirements, this pool is subject to the statewide horizontal well rules set out in NMAC 19.15.16.15.

10. **Exhibit A-2** contains the C-102 for the Well.

11. **Exhibit A-3** contains a plat identifying ownership by tract in the Unit. This exhibit also includes any applicable lease numbers, a unit recapitulation, and the interests Catena seeks to pool.

12. **Exhibit A-4** contains a sample well proposal letter and AFE sent to working interest owners for the Well. The estimated costs reflected on the AFE are fair and reasonable and comparable to the cost of other wells of similar depth and length drilled in the subject formation in the area.

13. Catena has conducted a diligent search of all public records in Lea County including phone directories and computer databases.

14. All interest owners Catena seeks to pool are locatable.

15. In my opinion, Catena made a good-faith effort to reach voluntary joinder of uncommitted interests in the Well as indicated by the chronology of contact described in **Exhibit A-5**.

16. Catena requests overhead and administrative rates of \$8,500 per month while the Well is being drilled and \$850 per month while the Well is producing. These rates are fair and are comparable to the rates charged by Catena and other operators in the vicinity.

17. Notice of this case and the Division hearing was timely provided to the uncommitted interests by certified mail more than 20 days prior to the hearing date. A sample of the notice letter, the associated green cards, and a chart setting out all individuals and addresses where Notice Letters were sent are attached as **Exhibit A-6**.

18. Notice of this case 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-7**.

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

20. In my opinion, the granting of Catena's application will serve the interests of conservation, the protection of correlative rights, and the prevention of waste.

21. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm that my testimony in paragraphs 1 through 20 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.



Cato Clark

3-29-22

Date

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

APPLICATION OF CATENA RESOURCES
OPERATING, LLC FOR COMPULSORY
POOLING, LEA COUNTY, NEW MEXICO

Case No. 22630

APPLICATION

Pursuant to NMSA § 70-2-17, Catena Resources Operating, LLC (“Applicant”) applies for an order pooling all uncommitted mineral interests in the Wolfcamp formation underlying a 640-acre, more or less, standard horizontal spacing unit (“Unit”) comprised of the E/2 of Section 5 Township 19 South, Range 35 East and the E/2 of Section 32, Township 18 South, Range 35 East, Lea County, New Mexico. In support of its application, Applicant states:

1. Applicant (OGRID No. 328449) is a working interest owner in the Unit and has the right to drill wells thereon.
2. The Unit will be dedicated to the **Foxtail E2 05 32 W1 State Com 1H** well (“Well”), which will be horizontally drilled from a surface location in the NE/4 NE/4 (Unit A) of Section 8 to a bottom hole location in the NW/4 NE/4 (Unit B) of Section 32.
3. The completed interval of the Well will be within 330’ of the quarter-quarter section line separating the W/2 E/2 and E/2 E/2 of Sections 5 and 32 to allow for the creation of a standard 640-acre horizontal spacing unit.
4. The completed interval of the Well will be orthodox.
5. Applicant has undertaken diligent, good-faith efforts to obtain voluntary agreements from all mineral interest owners to participate in the drilling of the Well but has been unable to obtain voluntary agreements from all of the mineral interest owners.

Catena Resources Operating, LLC
Case No. 22630
Exhibit A1

6. The pooling of uncommitted mineral interests will avoid the drilling of unnecessary wells, prevent waste, and protect correlative rights.

7. In order to allow Applicant to obtain its just and fair share of the oil and gas underlying the subject lands, all uncommitted mineral interests in the Unit should be pooled and Applicant should be designated the operator of the Well and Unit.

WHEREFORE, Applicant requests this application be set for hearing on April 7, 2022 and that, after notice and hearing, the Division enter an order:

- A. Pooling all uncommitted interests in the Unit;
- B. Approving the Well in the Unit;
- C. Designating Applicant as operator of the Unit and the Well to be drilled thereon;
- D. Authorizing Applicant to recover its costs of drilling, equipping and completing the Well;
- E. Approving the actual operating charges and costs of supervision while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- F. Imposing a 200% penalty for the risk assumed by Applicant in drilling and completing the Well against any working interest owner who does not voluntarily participate in the drilling of the Well.

Respectfully submitted,

HINKLE SHANOR LLP

/s/ Dana S. Hardy _____

Dana S. Hardy
Michael Rodriguez
Jaclyn M. McLean
P.O. Box 2068
Santa Fe, NM 87504-2068
Phone: (505) 982-4554
Facsimile: (505) 982-8623
dhardy@hinklelawfirm.com
mrodriguez@hinklelawfirm.com
jmclean@hinklelawfirm.com
Counsel for Catena Resources Operating, LLC

Application of Catena Resources Operating, LLC for Compulsory Pooling, Lea County, New Mexico. Applicant applies for an order pooling all uncommitted mineral interests in the Wolfcamp formation underlying a 640-acre, more or less, standard horizontal spacing unit ("Unit") comprised of the E/2 of Section 5, Township 19 South, Range 35 East and the E/2 of Section 32, Township 18 South, Range 35 East, Lea County, New Mexico. The Unit will be dedicated to the **Foxtail E2 05 32 W1 State Com 1H** well ("Well"), which will be horizontally drilled from a surface location in the NE/4 NE/4 (Unit A) of Section 8 to a bottom hole location in the NW/4 NE/4 (Unit B) of Section 32. The completed interval of the Well will be within 330' of the quarter-quarter section line separating the W/2 E/2 and E/2 E/2 of Sections 5 and 32 to allow for the creation of a standard 640-acre horizontal spacing unit. Also to be considered will be the cost of drilling and completing the well and the allocation of the cost, the designation of Applicant as the operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The well is located approximately 20 miles West of Hobbs, New Mexico.

DISTRICT I
 1625 N. French Dr., Hobbs, N.M. 88240
 Phone: (575) 393-6161 Fax: (575) 393-0720

DISTRICT II
 811 S. First St., Artesia, N.M. 88210
 Phone: (575) 748-1283 Fax: (575) 748-9720

DISTRICT III
 1000 Rio Brazos Rd., Aztec, N.M. 87410
 Phone: (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV
 1220 S. St. Francis Dr., Santa Fe, N.M. 87505
 Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico
 Energy, Minerals & Natural Resources Department

Form C-102

Revised August 1, 2011

OIL CONSERVATION DIVISION
 1220 South St. Francis Dr.
 Santa Fe, N.M. 87505

Submit one copy to appropriate
 District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number		² Pool Code		³ Pool Name	
⁴ Property Code		⁵ Property Name Foxtail E2 05 32 W1 State Com			⁶ Well Number 1H
⁷ OGRID No.		⁸ Operator Name Catena Resources Operating, LLC			⁹ Elevation 3848

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	8	19 S	35 E		462	North	1103	East	Lea

¹¹ 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
B	32	18 S	35 E		100	North	1649	East	Lea

¹² Dedicated Acres	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ 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>16</p>	<p>SCALE: 1"=3000'</p> <p>Legend: ● = Surface Location ○ = Bottom Hole Location △ = First Take Point (FTP)</p> <p>SURFACE LOCATION NAD 83 NME Y=612594.00 N X=805561.93 E LAT.=32.6811259° N LONG.=103.4745680° W</p> <p>FIRST TAKE POINT 100' FSL, 1649' FEL SEC. 5, T19S, R35E NAD 83 NME Y=613151.04 N X=805011.89 E LAT.=32.6826691° N LONG.=103.4763409° W</p> <p>BOTTOM HOLE LOCATION NAD 83 NME Y=623505.74 N X=804922.37 E LAT.=32.7111298° N LONG.=103.4763599° W</p> <p>CORNER COORDINATES TABLE NAD 83 NME</p> <table border="1"> <tr><td>A - Y= 611727.35 N, X= 805354.16 E</td></tr> <tr><td>B - Y= 611739.27 N, X= 806672.07 E</td></tr> <tr><td>C - Y= 613042.32 N, X= 804024.75 E</td></tr> <tr><td>D - Y= 613053.96 N, X= 805342.89 E</td></tr> <tr><td>E - Y= 623598.07 N, X= 803929.89 E</td></tr> <tr><td>F - Y= 623608.27 N, X= 805249.86 E</td></tr> </table> <p>CORNER COORDINATES TABLE NAD 83 NME</p> <table border="1"> <tr><td>A - LAT.=32.6787486° N, LONG.=103.4752660° W</td></tr> <tr><td>B - LAT.=32.6787520° N, LONG.=103.4709828° W</td></tr> <tr><td>C - LAT.=32.6823921° N, LONG.=103.4795518° W</td></tr> <tr><td>D - LAT.=32.6823949° N, LONG.=103.4752678° W</td></tr> <tr><td>E - LAT.=32.7114056° N, LONG.=103.4795840° W</td></tr> <tr><td>F - LAT.=32.7114044° N, LONG.=103.4752926° W</td></tr> </table>	A - Y= 611727.35 N, X= 805354.16 E	B - Y= 611739.27 N, X= 806672.07 E	C - Y= 613042.32 N, X= 804024.75 E	D - Y= 613053.96 N, X= 805342.89 E	E - Y= 623598.07 N, X= 803929.89 E	F - Y= 623608.27 N, X= 805249.86 E	A - LAT.=32.6787486° N, LONG.=103.4752660° W	B - LAT.=32.6787520° N, LONG.=103.4709828° W	C - LAT.=32.6823921° N, LONG.=103.4795518° W	D - LAT.=32.6823949° N, LONG.=103.4752678° W	E - LAT.=32.7114056° N, LONG.=103.4795840° W	F - LAT.=32.7114044° N, LONG.=103.4752926° W	<p>17 OPERATOR CERTIFICATION</p> <p><i>I hereby certify that the information contained 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 a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.</i></p> <p>Signature _____ Date _____</p> <p>Printed Name _____</p> <p>E-mail Address _____</p>
	A - Y= 611727.35 N, X= 805354.16 E													
B - Y= 611739.27 N, X= 806672.07 E														
C - Y= 613042.32 N, X= 804024.75 E														
D - Y= 613053.96 N, X= 805342.89 E														
E - Y= 623598.07 N, X= 803929.89 E														
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D - LAT.=32.6823949° N, LONG.=103.4752678° W														
E - LAT.=32.7114056° N, LONG.=103.4795840° W														
F - LAT.=32.7114044° N, LONG.=103.4752926° W														
	<p>18 SURVEYOR CERTIFICATION</p> <p><i>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.</i></p> <p>01/14/22</p> <p>Date of Survey _____</p> <p>Signature and Seal of Professional Surveyor: _____</p> <div style="border: 2px solid black; padding: 10px; text-align: center; font-size: 24px; font-weight: bold;">PRELIMINARY</div> <p>Certificate Number _____</p>													

Catena Resources Operating, LLC

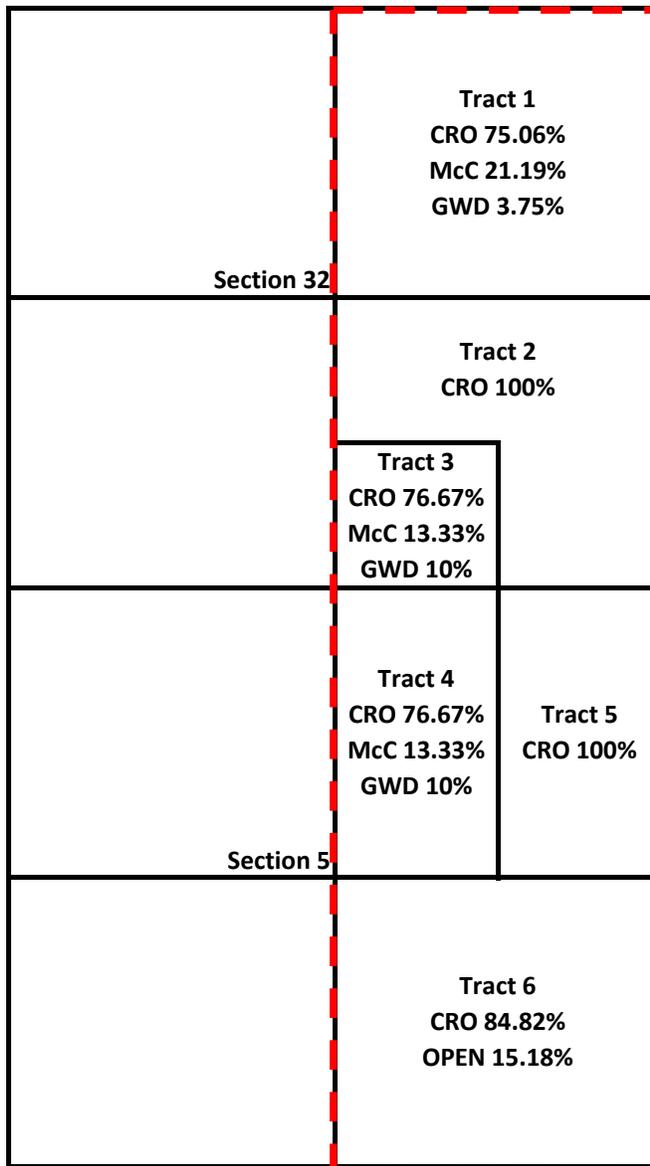
EXHIBIT A-3
Foxtail E2 05 32 W1 State Com 1H
Proposed Wolfcamp Spacing Unit
Lea County, New Mexico
E2 Sections 5-T19S-R35E & 32-T18S-R35E

Parties to be Pooled

Catena Resources Operating (CRO)	85.5296%
McCombs Exploration, LLC (McC)	7.7977%
Great Western Drilling, Ltd. (GWD)	2.8100%
Mary Louise Galbreath (Open)	0.2607%
The Brady Family Trust (Open)	0.5214%
Mary Debora Brady (Open)	0.5214%
The Avis K. Miller Trust (Open)	1.5641%
Coert Holdings 1, LLC (Open)	0.8113%
Max W. Coll, II Trust (Open)	0.1056%
Kristi Rose Minerals, LLC (Open)	0.0782%
Total	100.00%

Tracts

Tract 1	NE/4	Section 32
Tract 2	N/2 SE/4 & SE/4 SE/4	Section 32
Tract 3	SW/4 SE/4	Section 32
Tract 4	W/2 NE/4	Section 5
Tract 5	E/2 NE/4	Section 5
Tract 6	SE/4	Section 5





12/3/2021

Via Certified Mail:

{Owner}
{Owner Address}

RE: Foxtail E2 32 05 W1 State Com 1H
T19S R35E, Section 5 & T18S R35E, Section 32
Lea County, NM

Dear Working Interest Owner,

Catena Resources Operating, LLC ("Catena") as Operator hereby proposes to drill and operate the captioned horizontal well, as further described in the enclosed AFE and plat, (hereinafter, the "Well"):

Well Name	Target Formation	Proposed TVD	Proposed TMD
Foxtail E2 32 05 W1 State Com 1H	Wolfcamp A	10,870'	22,000'

The Estimated Well Costs for the Well are \$8,694,255.00.

As an alternative to your participation, Catena proposes to acquire your interest via term assignment, subject to due diligence and title verification satisfactory to Catena, should you so elect.

In any event, Catena respectfully requests you (i) indicate your election by initialing next to one of the three (3) options on the following page, (ii) execute one copy of this letter, and (iii) in the event you elect to participate in the drilling and completion of the Well, execute one copy of the enclosed AFE, and return scans of all of same to the undersigned at the email address reflected below within 30 days of your receipt hereof. In the event of your participation, Catena will furnish a proposed joint operating agreement upon request.

Should you have any questions regarding the foregoing, please feel free to contact the undersigned at any of the points indicated below.

Best regards,

Cato Clark, CPL
Vice President, Land
Catena Resources Operating, LLC
1001 Fannin Street, 22nd Floor
Houston, TX 77002
Direct: 346.200.7894
Clark@catenares.com



BY ITS INITIALS & EXECUTION IN THE SPACE PROVIDED BELOW, THE UNDERSIGNED:

____ CONSENTS TO PARTICIPATE TO THE FULL EXTENT OF ITS INTEREST IN THE PROPOSED OPERATION(S) AND BEAR ITS PROPORTIONATE SHARE OF ALL COSTS AND EXPENSES ASSOCIATED THEREWITH

OR

____ DOES NOT CONSENT TO PARTICIPATE IN THE PROPOSED OPERATION(S)

OR

____ REQUESTS CATENA DELIVER A TERM ASSIGNMENT FOR REVIEW AND EXECUTION

{Owner}

By: _____

Title: _____

Date: _____



Exhibit A-5

Catena Resources Operating, LLC – Foxtail E2 32 05 W1 State Com 1H Discussion Timeline

McCombs Exploration, LLC

Catena Resources Operating, LLC sent original well proposals on January 10, 2022. At such time, Catena and McCombs Exploration, LLC were already engaged in discussions regarding the proposed well. Catena and McCombs Exploration, LLC are in ongoing discussions on the well proposal.

Great Western Drilling, Ltd.

Catena Resources Operating, LLC sent original well proposals on January 10, 2022. At such time, Catena and Great Western Drilling, Ltd. were already engaged in discussions regarding the proposed well. Catena and Great Western Drilling, Ltd. are in ongoing discussions on the well proposal.

OPEN - Unleased Mineral Interest Owners

Catena Resources Operating, LLC sent original well proposals on January 10, 2022. After such time, Catena also sent lease offers and has made every effort to initiated communication and lease negotiation with the unleased mineral interest owners which is ongoing.

**STATE OF NEW MEXICO
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OIL CONSERVATION DIVISION**

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

Case No. 22630

PARTY	NOTICE LETTER SENT	RETURN RECEIVED
Alpha Energy Partners, LLC Attn: Land Department P.O. Box 10701 Midland, TX 79702	03/09/2022	03/21/2022
Mary Debra Brady, SSP 1804 Lake Crest Lane Plano, TX 75023	03/09/2022	03/12/2022
Coert Holding 1, LLC 910 Louisiana St., Ste. 2400 Houston, TX 77002	03/09/2022	03/18/2022
Catherine Coll, Trustee of the Testamentary 83 La Barberia Trail Santa Fe, NM 87505	03/09/2022	03/23/1997
Clarke C. Coll, SSP P.O. Box 1818 Roswell, NM 88202	03/09/2022	03/14/2022
Eric J. Coll, SSP P.O. Box 1818 Roswell, NM 88202	03/09/2022	03/14/2022
Diamond Lil Properties, LLC P.O. Box 1818 Roswell, NM 88202	03/09/2022	03/14/2022
Great Western Drilling, Ltd. Attn: Land Department P.O. Box 1659 Midland, TX 79702	03/09/2022	03/14/2022
Kristi Rose Minerals, LLC 152 B Arroyo Hondo Road Santa Fe, NM 87508	03/09/2022	03/14/2022
McCombs Exploration, LLC Attn: Land Department 750 E. Mulberry Ave, Ste 403 San Antonio, TX 78212	03/09/2022	03/18/2022

Catena Resources Operating, LLC
Case No. 22630

Exhibit A6

The Avis K. Miller Trust JPMORGAN Chase Bank P.O. Drawer #99084 Fort Worth, TX 76199-0084	03/09/2022	03/18/2022
Spirit Trail, LLC P.O. Box 1818 Roswell, NM 88202	03/09/2022	03/14/2022
The Brady Family Trust P.O. Box 8695 Springdale, AR 72766	03/09/2022	Nothing Received
Mary Louise Galbreath 37 Scarborough Rd. Manchester, CT 06040	03/09/2022	Returned to Sender

U.S. Postal Service™
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 \$ _____

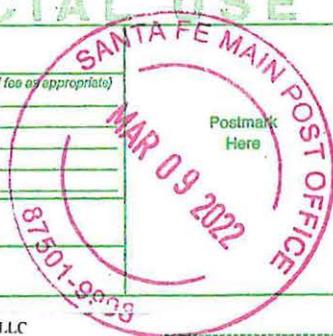
Postage
\$ _____

Total Postage and Fees
\$ _____

Sent To
Alpha Energy Partners, LLC
Attn: Land Department
P.O. Box 10701
Midland, TX 79702

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

7021 0950 0002 0367 1944



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p><input type="checkbox"/> Complete items 1, 2, and 3.</p> <p><input type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.</p> <p><input type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits.</p> <p>1. Article Addressed to:</p> <p style="margin-left: 20px;">Alpha Energy Partners, LLC Attn: Land Department P.O. Box 10701 Midland, TX 79702</p>	<p>A. Signature X <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) C. Date of Delivery <u>P. Maxwell</u> <u>3/14/22</u></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 style="text-align: center;"> 9590 9402 5760 0003 2666 16 </p> <p>2. Article Number (Transfer from service label) 7021 0950 0002 0367 1944</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>
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt

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OFFICIAL USE

SANTA FE MAIN POST OFFICE
 MAR 09 2022
 87501-9998

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 Mary Debra Brady, SSP 1804 Lake Crest Lane Plano, TX 75023	
Street and Plano, TX 75023	
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>1. Article Addressed to:</p> <p>Mary Debra Brady, SSP 1804 Lake Crest Lane Plano, TX 75023</p> <div style="text-align: center;">  9590 9402 6746 1074 2275 34 </div> <p>2. Article Number (Transfer from service label)</p> <p>7021 0950 0002 0367 2026</p>	<p>A. Signature</p> <p>X  <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <u>3/12/20</u></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> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<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"/> 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)	
<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"/> 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)																	

PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt

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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 Coert Holding 1, LLC 910 Louisiana St., Ste. 2400 Houston, TX 77002	
Street and Apt. 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>1. Article Addressed to:</p> <p style="margin-left: 20px;">Coert Holding 1, LLC 910 Louisiana St., Ste. 2400 Houston, TX 77002</p> <div style="text-align: center;">  9590 9402 5760 0003 2665 86 </div> <p>2. Article Number (Transfer from service label) 7021 0950 0002 0367 1975</p>	<p>A. Signature X <i>Cory W 19</i> <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) _____ C. Date of Delivery 3/14/22</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> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <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 <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500) </td> <td style="width: 50%; vertical-align: top;"> <input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery </td> </tr> </table>	<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 <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
<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 <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery		
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt		

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MAR 05 2022
87601-9998
SAN FEE MAIN POST OFFICE

7021 0950 0002 0367 1951

Certified Mail Fee \$ _____	Postmark Here
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 Catherine Coll, Trustee of the Testamentary Trust created u/w/o Max W. Coll, II 83 La Barberia Trail Santa Fe, NM 87505	

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. 	A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee
1. Article Addressed to: Catherine Coll, Trustee of the Testamentary Trust created u/w/o Max W. Coll, II 83 La Barberia Trail Santa Fe, NM 87505	B. Received by (Printed Name) C. Joyce-Coll
2. Article Number (Transfer from service label) 7021 0950 0002 0367 1951	C. Date of Delivery 3-12-22
3. Service Type <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 <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)	<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery
PS Form 3811, July 2015 PSN 7530-02-000-9053	Domestic Return Receipt

7021 0950 0002 0367 1968

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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 \$ _____

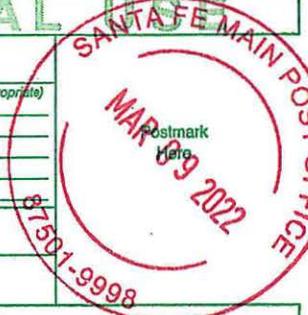
Adult Signature Restricted Delivery \$ _____

Postage
 \$ _____

Total Postage and Fees
 \$ _____

Sent To
 Clarke C. Coll, SSP
 Street and Apt. No. P.O. Box 1818
 Roswell, NM 88202
 City, State, ZIP+4® _____

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>Rachel Cora</u></p> <p>C. Date of Delivery <u>3-14-22</u></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>Clarke C. Coll, SSP P.O. Box 1818 Roswell, NM 88202</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express®</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>
<p>2. Article Number (Transfer from service label)</p> <p>7021 0950 0002 0367 1968</p>	
<p>PS Form 3811, July 2015 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

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7021 0950 0002 0367 1999

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. N. Eric J. Coll, SSP
 P.O. Box 1818
 Roswell, NM 88202

City, State, ZIP+4

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

SANTA FE MAIN POST OFFICE
 MAR 09 2022
 87501-9998

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 type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>X <i>Rachel</i></p> <p>B. Received by (Printed Name) <i>Rachel Cora</i></p> <p>C. Date of Delivery <i>3.14.22</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Eric J. Coll, SSP P.O. Box 1818 Roswell, NM 88202</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 type="checkbox"/> Signature Confirmation™</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</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>9590 9402 6746 1074 2275 27</p> <p>2 Article Number (Transfer from service label)</p> <p>7021 0950 0002 0367 1999</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>	<p>Domestic Return Receipt</p>

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OFFICIAL USE

7021 0950 0002 0367 1982

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 Diamond Lil Properties, LLC P.O. Box 1818 Roswell, NM 88202	
Street and Apt. No. City, State, ZIP+4®	

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) Rachel Corn</p> <p>C. Date of Delivery 3-14-22</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 style="text-align: center;">Diamond Lil Properties, LLC P.O. Box 1818 Roswell, NM 88202</p>	<p>3. Service Type</p> <table style="width: 100%; font-size: 0.8em;"> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Return Receipt for Merchandise</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Insured Mail</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>	<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 checked="" type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" 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)	
<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 checked="" type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" 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 style="text-align: center;">9590 9402 5760 0003 2665 79</p> <p>2. Article Number (Transfer from service label) 7021 0950 0002 0367 1982</p>	<p style="text-align: right;">Domestic Return Receipt</p>																

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

7021 0950 0002 0367 2002

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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 A Great Western Drilling, Ltd.
 Attn: Land Department
 P.O. Box 1659
 City, State, & Zip Midland, TX 79702

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

87501-9998
 MAR 09 2022
 POST OFFICE

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 type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <input type="checkbox"/> Date of Delivery</p> <p>C. <i>A Berry 3/14/22</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Great Western Drilling, Ltd. Attn: Land Department P.O. Box 1659 Midland, TX 79702</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 type="checkbox"/> Signature Confirmation™</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</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>9590 9402 6746 1074 2275 58</p> <p>7021 0950 0002 0367 2002</p>	

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

7021 0950 0002 0367 2019

CERTIFIED MAIL® RECEIPT
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OFFICIAL USE

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fees 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 Kristi Rose Minerals, LLC
152 B Arroyo Hondo Road
Santa Fe, NM 87508

City, State, ZIP+4

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

SANTA FE MAIN POST OFFICE
MAR 09 2022
87501-9998

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 <i>DLF C-19</i></p> <p>B. Received by (Printed Name) _____ C. Date of Delivery <i>3-11-22</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>Kristi Rose Minerals, LLC 152 B Arroyo Hondo Road Santa Fe, NM 87508</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 type="checkbox"/> Signature Confirmation™</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"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p>9590 9402 6746 1074 2275 41</p> <p>7021 0950 0002 0367 2019</p>	
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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 \$ _____

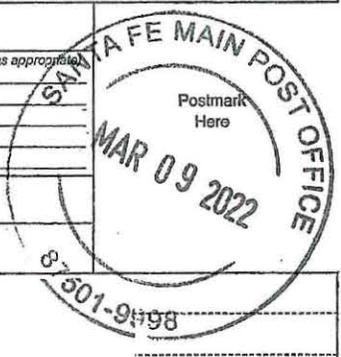
Postage \$ _____

Total Postage and Fees \$ _____

Sent To Mary Louise Galbreath
 37 Scarborough Rd.
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McCombs Exploration, LLC	
Attn: Land Department	
750 East Mulberry Ave., Ste. 403	
San Antonio, TX 78212	
City, State, ZIP	

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<p>1. Article Addressed to:</p> <p style="text-align: center;">McCombs Exploration, LLC Attn: Land Department 750 East Mulberry Ave., Ste. 403 San Antonio, TX 78212</p>	<p>3. Service Type <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"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>2. Article Number (Transfer from service label)</p> <p style="text-align: center;">7021 0950 0002 0367 2071</p>	<p style="text-align: center;">9590 9402 6746 1074 2395 06</p>

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Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

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Total Postage and Fees \$ _____

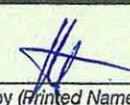
Sent To The Avis K. Miller Trust u/d/d 6/10/86

Street and c/o JPMORGAN Chase Bank, N.A.

City, State P.O. Drawer #99084
 Fort Worth, TX 76199-0084

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<p>1. Article Addressed to:</p> <p>The Avis K. Miller Trust u/d/d 6/10/86 c/o JPMORGAN Chase Bank, N.A. P.O. Drawer #99084 Fort Worth, TX 76199-0084</p> <p> 9590 9402 6746 1074 2395 20</p>	<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Priority Mail Express®</p> <p><input checked="" 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 type="checkbox"/> Signature Confirmation™</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</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
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Roswell, NM 88202
City, State, ZIP+4® _____

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<p>1. Article Addressed to:</p> <p>Spirit Trail, LLC P.O. Box 1818 Roswell, NM 88202</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 type="checkbox"/> Signature Confirmation™</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</p> <p><input type="checkbox"/> Insured Mail</p> <p><input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>
<p>9590 9402 6746 1074 2395 37</p> <p>7021 0950 0002 0367 2040</p>	
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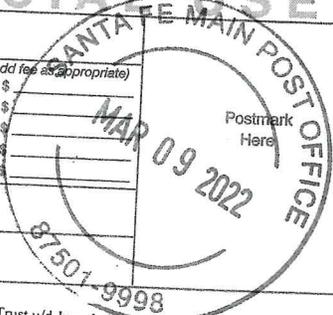
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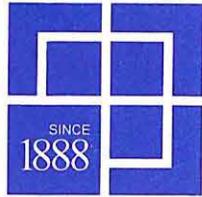
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<input type="checkbox"/> Return Receipt (electronic)	\$
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
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<input type="checkbox"/> Adult Signature Restricted Delivery	\$
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Total Postage and Fees	\$
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	P.O. Box 8695
City, State, ZIP	Springdale, AR 72766



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hinklelawfirm.com

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

March 9, 2022

VIA CERTIFIED MAIL
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TO ALL INTERESTED PARTIES SUBJECT TO NOTICE

Re: Case No. 22630 - Application of Catena Resources Operating, LLC for Compulsory Pooling, Lea County, New Mexico.

To whom it may concern:

This letter is to advise you that the enclosed application was filed with the New Mexico Oil Conservation Division. The hearing will be conducted on **April 7, 2022** 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: <https://www.emnrd.nm.gov/ocd/hearing-info/>. 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 submitted through the OCD E-Permitting system (<https://wwwapps.emnrd.state.nm.us/ocd/ocdpermitting/>) 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 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

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
March 11, 2022
and ending with the issue dated
March 11, 2022.



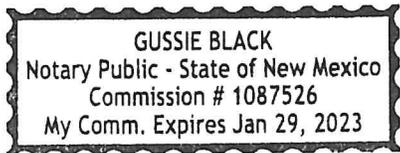
Publisher

Sworn and subscribed to before me this
11th day of March 2022.



Business Manager

My commission expires
January 29, 2023
(seal)



LEGAL NOTICE
March 11, 2022

This is to notify all interested parties, including Alpha Energy Partners, LLC; Catherine Coll; Clarke C. Coll; Coert Holding 1, LLC; Diamond Lil Properties, LLC; Eric J. Coll; Great Western Drilling, Ltd.; Kristi Rose Minerals, LLC; Mary Debra Brady; Mary Louise Galbreath; Spirit Trail, LLC; Avis K. Miller Trust; the Brady Family Trust; McCombs Exploration, LLC; and their successors and assigns, that the New Mexico Oil Conservation Division will conduct a hearing on an application submitted by Catena Resources Operating, LLC (Case No. 22630). 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 April 7, 2022, beginning at 8:15 a.m. To participate in the electronic hearing, see the instructions posted on the OCD Hearings website for that date: <http://www.emnrd.state.nm.us/OCD/hearings.html>. Applicant applies for an order pooling all uncommitted mineral interests in the Wolfcamp formation underlying a 640-acre, more or less, standard horizontal spacing unit ("Unit") comprised of the E/2 of Section 5, Township 19 South, Range 35 East and the E/2 of Section 32, Township 18 South, Range 35 East, Lea County, New Mexico. The Unit will be dedicated to the **Foxtail E2 05 32 W1 State Com 1H** well ("Well"), which will be horizontally drilled from a surface location in the NE/4 NE/4 (Unit A) of Section 8 to a bottom hole location in the NW/4 NE/4 (Unit B) of Section 32. The completed interval of the Well will be within 330' of the quarter-quarter section line separating the W/2 E/2 and E/2 E/2 of Sections 5 and 32 to allow for the creation of a standard 640-acre horizontal spacing unit. Also to be considered will be the cost of drilling and completing the well and the allocation of the cost, the designation of Applicant as the operator of the well, and a 200% charge for the risk involved in drilling and completing the well. The well is located approximately 20 miles West of Hobbs, New Mexico.
#37408

02107475

00264533

GILBERT
HINKLE, SHANOR LLP
PO BOX 2068
SANTA FE, NM 87504

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 Catena Resources Operating, LLC
Case No. 22630
Exhibit A7

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

APPLICATION OF CATENA RESOURCES
OPERATING, LLC FOR COMPULSORY
POOLING, LEA COUNTY, NEW MEXICO

CASE NO. 22630

SELF-AFFIRMED STATEMENT
OF EVAN KOICHELEK

1. I am a geologist at Catena Resources Operating, LLC (“Catena”) and am over 18 years of age. I have personal knowledge of the matters addressed herein and am competent to provide this Self-Affirmed Statement. I have not previously testified before the New Mexico Oil Conservation Division (“Division”).

2. I have a Master of Science in Geology and 11 years of experience in the petroleum industry. My experience has focused on well planning, well log analysis, resource development, resource mapping, and resource evaluation for horizontal drilling programs primarily in the Delaware, Permian, Midland, and Anadarko Basins. A copy of my resume is attached as **Exhibit B-1**.

3. I am familiar with the geological matters that pertain to the above-referenced case.

4. **Exhibit B-2** is a project location map that shows the location of the proposed horizontal well spacing unit.

5. Catena is targeting the Wolfcamp A interval of the Wolfcamp formation. **Exhibit B-3** is a subsea structure map that I prepared for this interval with 100-foot contours. The proposed horizontal well spacing unit is highlighted in red and the initial well is depicted with a green dashed line. Existing producing wells in the Wolfcamp A interval are represented by solid red lines. The structure map shows the Wolfcamp formation dipping to the South. The structure appears consistent

across the proposed spacing unit and I do not observe any faulting, pinch outs, or other geologic impediments to drilling horizontal wells in this area.

6. **Exhibit B-3** also shows a cross-section line in red running North to South reflecting three wells penetrating the Wolfcamp formation that I used to construct a stratigraphic cross-section from A to A'. These wells contain good logs and I consider them representative of the geology in the subject area.

7. **Exhibit B-4** is a stratigraphic cross-section that I prepared using the logs from the three wells noted on Exhibit B-3. Each well in the cross-section contains the gamma ray in the first track, resistivity in the second track. The initial target interval is labeled and marked. The cross-section demonstrates that the targeted interval is continuous across the proposed spacing unit.

8. **Exhibit B-5** is a Gross Isopach map of the Wolfcamp A interval. The proposed horizontal well spacing unit is highlighted in red and the initial well is depicted with a green dashed line. Existing producing wells in the Wolfcamp formation are represented by solid red lines. The anticipated gross thickness of the Wolfcamp formation interval is 500 to 650 ft. The gross isopach map demonstrates that the Wolfcamp formation is present across the proposed spacing unit. The location of the previous cross-section from A-A' in Exhibit B-4 is also shown as a brown line on this map.

9. In my opinion the stand-up orientation of the proposed well is the preferred orientation for horizontal well development in this area and is appropriate to efficiently and effectively develop the subject acreage.

10. Based on my geologic study, the Wolfcamp formation underlying the subject area is suitable for development by horizontal wells and the acreage comprising the proposed spacing unit will be productive and contribute proportionately to the production from the well.

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

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

13. I understand this Self-Affirmed Statement will be used as written testimony in this case. I affirm my testimony in paragraphs 1 through 12 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.



Evan Kochelek



Date

EVAN KOICHELEK

PROFESSIONAL EXPERIENCE

Wedge Geosciences LLC

Principal Geologist

- Generate and develop clients for contract technical project, operations, and development geology work
- Manage several clients with multiple technical projects and different timelines
- Deliver timely, on budget projects with summaries and recommendations to clients and management

Percussion Petroleum II/Catena Resources, LLC

- Wolfcamp & Bone Spring resource mapping and development planning in the Texas & New Mexico Delaware Basin

Parsley Energy Corporation, Austin, Texas

Staff Geologist, Sept '14 – Jan '21

Permian Basin

Reservoir Technology 7/19-9/20

- A multi-discipline technical team that provided reservoir development optimization recommendations to the asset teams. My work focused on integrating well log and 3D seismic interpretations for frac and earth modeling workflows.
- In this role, I worked on >2,000sqmi of 3D seismic interpreting target reservoir properties and distribution using well logs and seismic attributes. A major project was asset specific distribution of target reservoirs and interpretations of mechanical facies within and between target reservoirs that affected development in both the Midland and Delaware basins.

Asset Team 9/14-8/16; 9/20-1/21

- Responsible for resource development planning and operations in the Midland and Delaware Basins. My role was primarily interpreting 3D seismic and well logs to generate stratigraphic and structural models to plan and optimize resource development.

Business Development 4/16-6/17

- A small, integrated team of engineering, geology, and land that was tasked with generating leads for acquisitions. My role was to provide fast, accurate, and concise geologic assessments and assess comparable nearby geology & well performance. Our team collaborated to generate an economic model and formulate a recommendation to executive management.

North American Exploration

Lower-48 6/17-1/21

- Characterized and assessed plays and prospects in the Permian Basin, TX Panhandle, North Texas, and Anadarko Basin. Projects emphasized a 'fail fast' approach using critical play component mapping and detailed prospect assessments. Prospects were evaluated using probabilistic risk assessment methods and proposed as investment opportunities to senior management and executives.

Chesapeake Energy Corporation, Oklahoma City, Oklahoma

Geologist II, June '11– Aug '14

Rocky Mountain Exploration

- Responsible for exploration geology in the Powder River Basin and DJ Basin. My primary focus was upper Cretaceous sandstones. These projects integrated stratigraphy frameworks with basin burial-uplift and thermal maturation-migration models to explore and recommend oil and gas prospects.
- Evaluated, reviewed, and recommended testing 6 new target zones. Additionally I reviewed ~100k acres of marketed positions for PDP and additional potential zones.

Anadarko Basin

- Responsible for geologic exploration and resource development planning of tight sandstone reservoirs in the Anadarko Basin. In this position I worked with petrophysicists, geophysicists, and reservoir engineers to maximize value of our reservoir targets.

EDUCATION

New Mexico State University, Las Cruces, New Mexico

M.S. Geology, May 2011

Trinity University, San Antonio, Texas

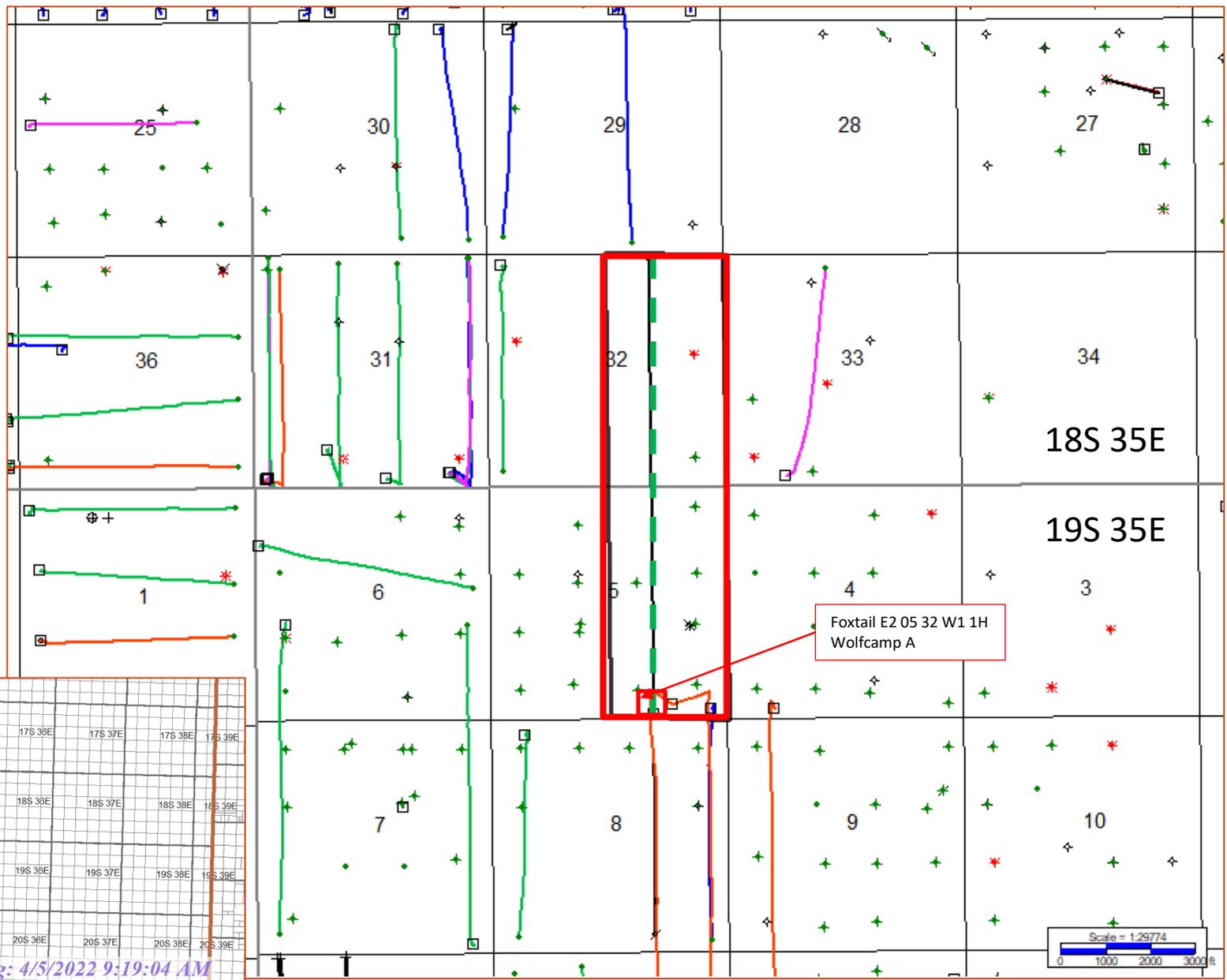
B.S. Geosciences, May 2009

Catena Resources Operating, LLC

Case No. 22630

Exhibit B1

Exhibit B-2: Locator Map



- First Bone Spring
- Second Bone Spring
- Third Bone Spring
- Wolfcamp A

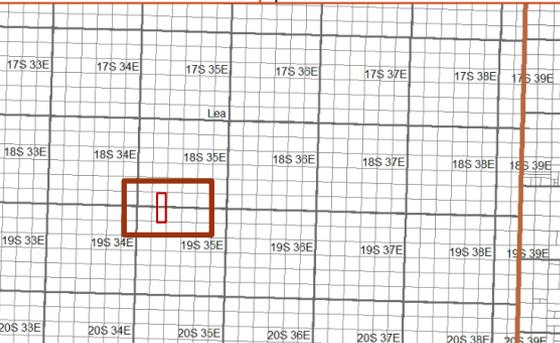


Exhibit B-3: Wolfcamp Top SSTVD

Exhibit B3

Contour Interval = 100'

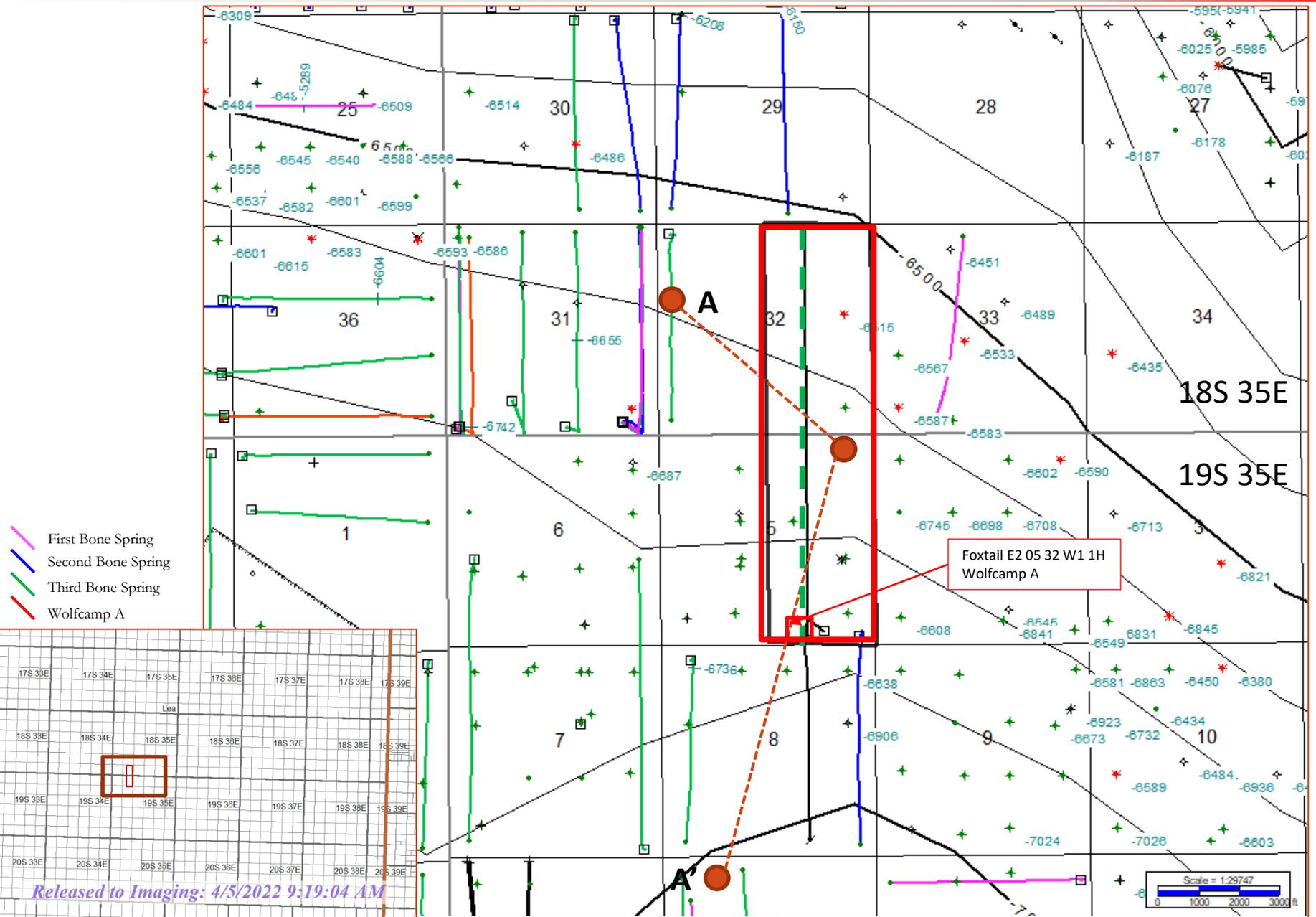
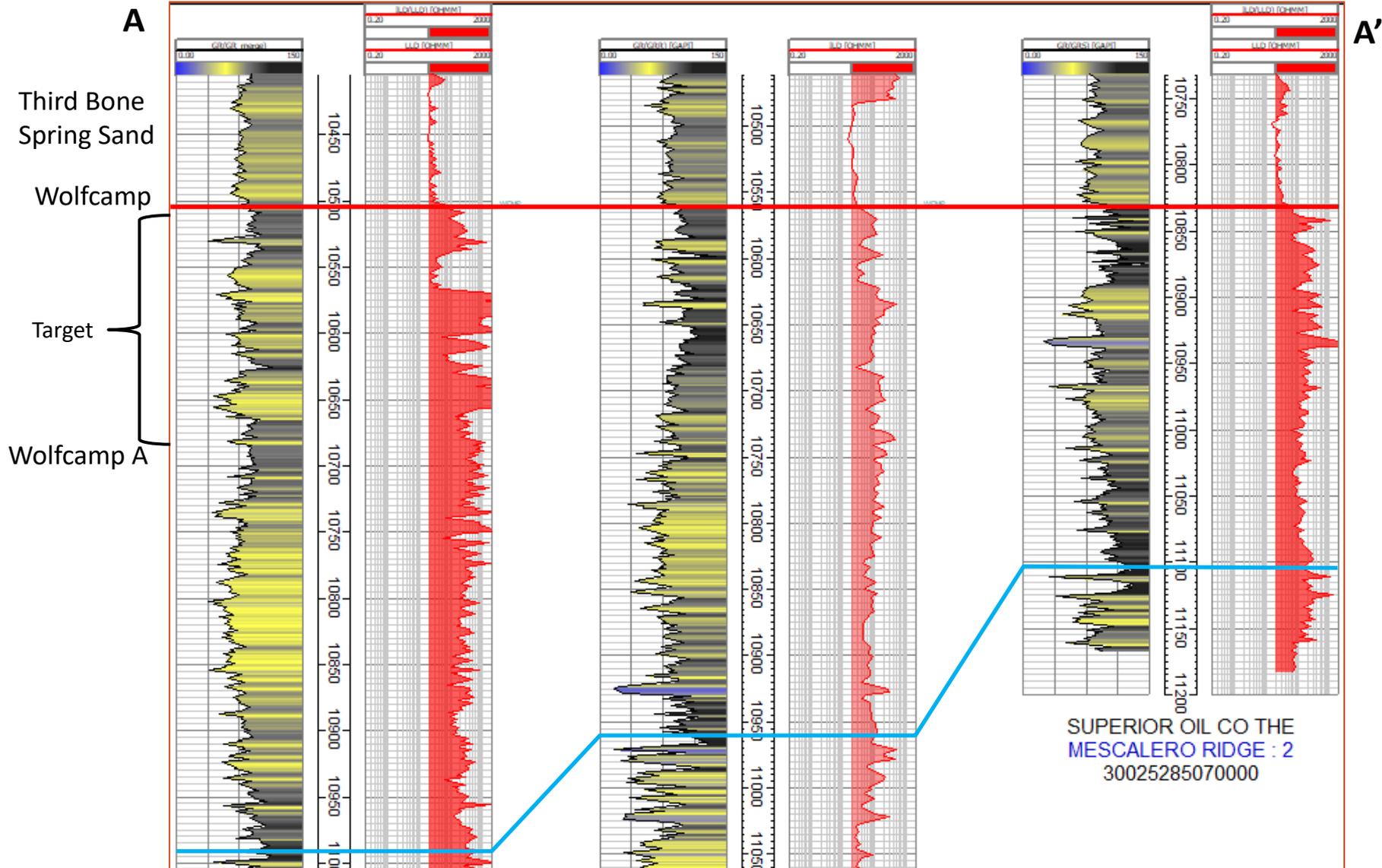


Exhibit B-4: Stratigraphic Cross section A-A' – Wolfcamp Datum

Exhibit B4

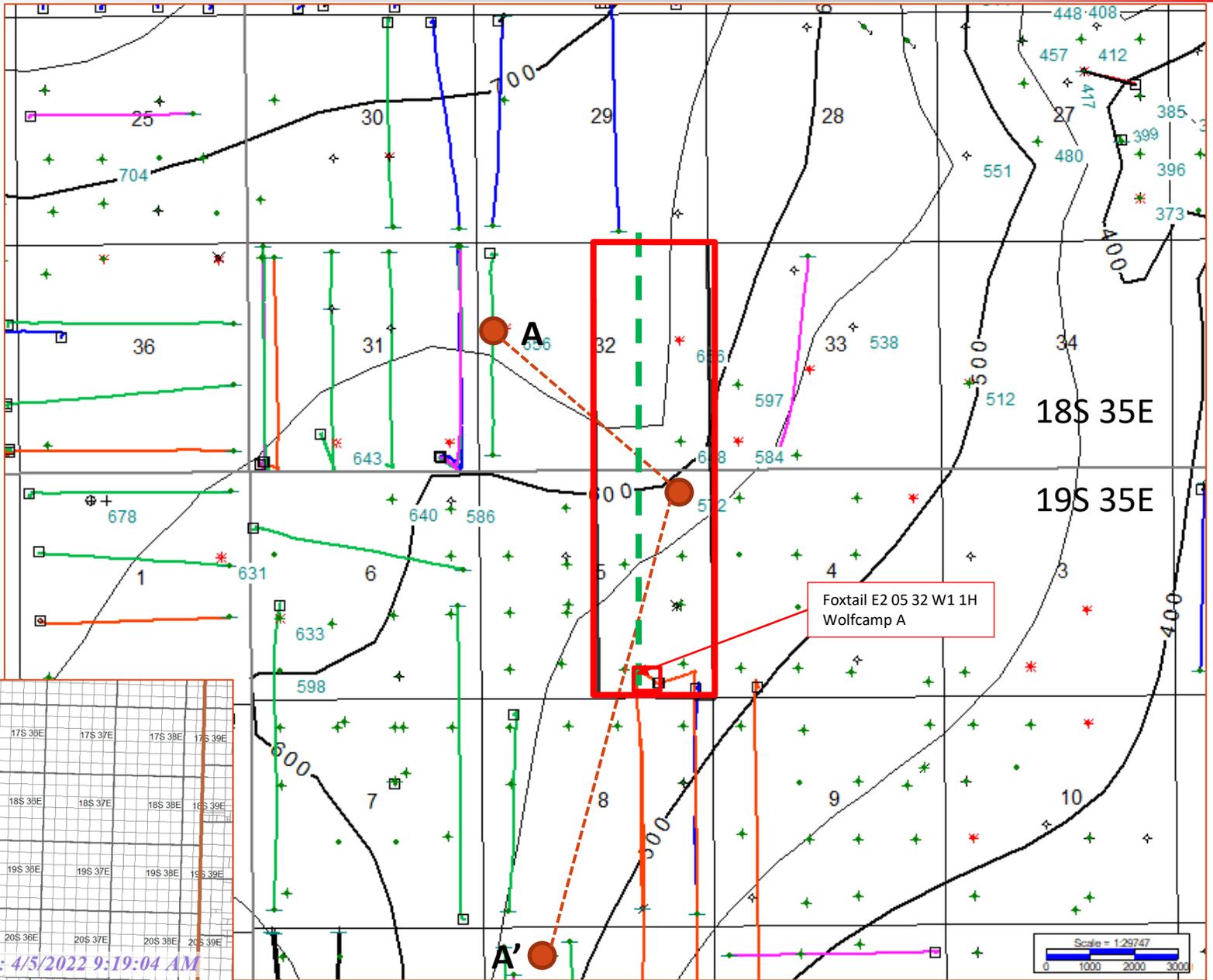


MESA PETROLEUM CO
NORTH SCHARB ST COM : 1
30025258590000

NADEL & GUSSMAN PERMIAN LLC
LEE STATE 'B' : 8
30025293600000

Exhibit B-5: Wolfcamp A Gross TVT

- First Bone Spring
- Second Bone Spring
- Third Bone Spring
- Wolfcamp A



Foxtail E2 05 32 W1 1H
Wolfcamp A

