

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

APPLICATION OF CIMAREX ENERGY CO.  
FOR A NON-STANDARD OIL SPACING AND  
PRORATION UNIT AND COMPULSORY POOLING,  
CHAVES COUNTY, NEW MEXICO.

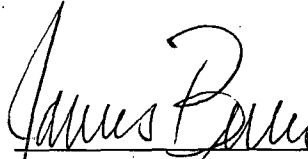
Case No. 14,730

AFFIDAVIT OF NOTICE

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

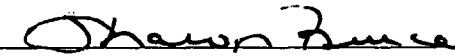
James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Cimarex Energy Co.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the offset operators or working interest owners entitled to receive notice of the applications filed herein.
4. Notice of the applications was provided to the operators or working interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rules.

  
James Bruce

SUBSCRIBED AND SWORN TO before me this 25<sup>th</sup> day of October, 2011 by James Bruce.

My Commission Expires: 3/14/13

  
Notary Public

Before the Oil Conservation Divisio  
Case 14730  
Hearing October 27, 2011  
Cimarex Energy  
Exhibit No. 9

JAMES BRUCE  
ATTORNEY AT LAW

POST OFFICE BOX 1056  
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213  
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)  
(505) 660-6612 (Cell)  
(505) 982-2151 (Fax)

[jamesbruc@aol.com](mailto:jamesbruc@aol.com)

September 8, 2011

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

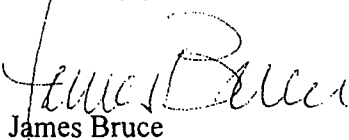
To: Persons on Exhibit A

Ladies and gentlemen:

Enclosed is a copy of an application for a non-standard unit, *etc.*, filed with the New Mexico Oil Conservation Division by Cimarex Energy Co., regarding the S½N½ of Section 3, Township 15 South, Range 31 East, N.M.P.M., Chaves County, New Mexico. This matter is scheduled for hearing at 8:15 a.m. on Thursday, September 29, 2011, at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. **The Division requires applicant to notify offset operators or working interest owners of the non-standard unit portion of the application, and you offset the above well unit.** As an offset operator, you have the right to enter an appearance and participate in the case. Failure to appear will preclude you from contesting this matter at a later date.

You are required to notify (in writing) the Division, and the undersigned, by Thursday, September 22, 2011 if you intend to participate in the hearing.

Very truly yours,

  
James Bruce

Attorney for Cimarex Energy Co.

EXHIBIT A

EXHIBIT A

Kevin O. Butler & Associates, Inc.  
P.O. Box 1171  
Midland, Texas 79702

COG Operating LLC  
Suite 100  
550 West Texas  
Midland, Texas 79701

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kevin O. Butler & Associates, Inc.  
P.O. Box 1171  
Midland, Texas 79702

2. Article Number

(Transfer from service label)

7008 1140 0003 5862 7237

PS Form 3811, February 2004

Domestic Return Receipt

CK 3-1

102595-02-M-1540

**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? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

COG Operating LLC  
Suite 100  
550 West Texas  
Midland, Texas 79701

2. Article Number

(Transfer from service label)

7008 1140 0003 5863 4839

PS Form 3811, February 2004

Domestic Return Receipt

CK 3-1

102595-02-M-1540

**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? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

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<b>OFFICIAL USE</b>	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Sent To Kevin O. Butler & Associates, Inc. Street, Apt. No., or PO Box No. P.O. Box 1171 City, State, ZIP+4 Midland, Texas 79702	
PS Form 3800, August 2006 See Reverse for Instructions	



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<b>OFFICIAL USE</b>	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$
Sent To COG Operating LLC Street, Apt. No., or PO Box No. Suite 100 City, State, ZIP+4 550 West Texas Midland, Texas 79701	
PS Form 3800, August 2006 See Reverse for Instructions	

