

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

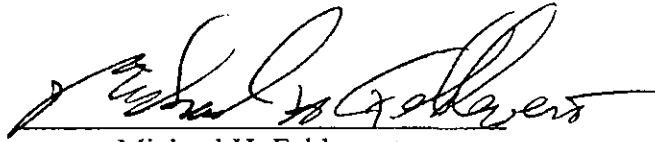
**IN THE MATTER OF THE APPLICATION OF COG OPERATING LLC, TO RE-OPEN  
CASE NO. 14861 TO POOL THE INTEREST OF ADDITIONAL MINERAL OWNERS  
UNDER THE TERMS OF COMPULSORY POOLING ORDER R-13629-A, EDDY  
COUNTY, NEW MEXICO**

**CASE NO. 14861(re-opened)**

**AFFIDAVIT**

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

Michael H. Feldewert, attorney in fact and authorized representative of COG Operating LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application has been provided under the notice letter and proof of receipts attached hereto.

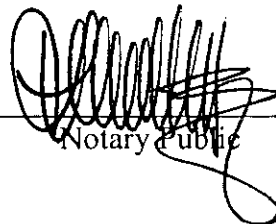


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 23rd day of July 2014 by Michael H. Feldewert.



OFFICIAL SEAL  
LISAMARIE ORTIZ  
NOTARY PUBLIC-STATE OF NEW MEXICO  
My commission expires \_\_\_\_\_

  
\_\_\_\_\_  
Notary Public

**BEFORE THE OIL CONSERVATION  
DIVISION**  
Santa Fe, New Mexico  
Exhibit No. C  
Submitted by: **COG OPERATING LLC**  
Hearing Date: July 23, 2014



**Michael H. Feldewert**  
Recognized Specialist in the Area of  
Natural Resources - oil and gas law -  
New Mexico Board of Legal  
Specialization  
mfeldewert@hollandhart.com

July 3, 2014

**VIA CERTIFIED MAIL**  
**CERTIFIED RECEIPT REQUESTED**

**TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS**

**Re: Application of COG Operating, LLC, to Re-Open Case No. 14861 to Pool the Interests of Additional Mineral Owners Under the terms of Compulsory Pooling Order R-13629-A, Eddy County, New Mexico (*Stonewall 9 Fee 4H Well*)**

Ladies & Gentlemen:

This letter is to advise you that COG Operating, LLC, has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on July 24, 2014. The hearing will be held in Porter Hall in the Oil Conservation Division's Santa Fe Offices located at 1220 South Saint 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 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.

Parties appearing in cases are required by Division Rule 19.15.4.13.B to file a Pre-hearing Statement four days in advance of a scheduled hearing. This statement must be filed at the Division's Santa Fe office at the above specified address 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.

If you have any questions about this matter please contact Stuart Dirks, at (432) 685-4354 or [SDirks@concho.com](mailto:SDirks@concho.com).

Sincerely,

A handwritten signature in black ink, appearing to read "Michael H. Feldewert".

Michael H. Feldewert

**Holland & Hart LLP**

Phone [505] 988-4421 Fax [505] 983-6043 [www.hollandhart.com](http://www.hollandhart.com)

110 North Guadalupe Suite 1 Santa Fe, NM 87501 Mailing Address P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. ☺

7006 2760 0001 6376 2809

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Stonewall 95th*

Postage	\$ 69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 669</b>

**USPS SANTA FE NM 87501**  
 JUN -3 2014  
 Postmark Here

Hannafin Family Trust  
 Mark A. Hannafin, Trustee  
 P.O. Box 218  
 Midland, Texas 79702

for Instructions

**CERTIFIED MAIL™**

**SEND** PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**SECTION ON DELIVERY**

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

1. Article Addressed to:  
 Hannafin Family Trust  
 Mark A. Hannafin, Trustee  
 P.O. Box 218  
 Midland, Texas 79702

2. Article Number: 7006 2760 0001 6376 2809  
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

A. Signature: *[Signature]* ☐ Agent ☐ Addressee  
 B. Received by (Printed Name): *Stonewall 95th*  
 C. Date of Delivery: *7-7-14*  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 2760 0001 6376 2779

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Stonewall 95th*

Postage	\$ 69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 669</b>

**USPS SANTA FE NM 87501**  
 JUN -3 2014  
 Postmark Here

P.J. Hannifin Family Trust u/t/a  
 7/18/1991 Steven P. Hannifin, Co-Trustee  
 1225 Gabriel Lane  
 Fort Worth, TX 76116-1637

for Instructions

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:  
 P.J. Hannifin Family Trust u/t/a  
 7/18/1991 Steven P. Hannifin, Co-Trustee  
 1225 Gabriel Lane  
 Fort Worth, TX 76116-1637

2. Article Number: 7006 2760 0001 6376 2779  
 (Transfer from service label)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]* ☐ Agent ☐ Addressee  
 B. Received by (Printed Name): *Stonewall 95th*  
 C. Date of Delivery: *7/5/14*  
 D. Is delivery address different from item 1? ☐ Yes ☐ No  
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

7006 2760 0001 6376 3356

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
 (Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL** *Stanwale US*

Postage	\$ .69
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	

Stamp: SANTA FE, NM 87501 OFFICE 3 2014

Nuevo Seis Limited Partnership  
 Attn.: Morris E. Schertz  
 P.O. Box 2588  
 Roswell, New Mexico 88202-2588

See Reverse for Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</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>1. Article Addressed to:</p> <p>Nuevo Seis Limited Partnership            Attn.: Morris E. Schertz            P.O. Box 2588            Roswell, New Mexico 88202-2588</p>	<p>A. Signature <i>Louise Montague</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Louise Montague</i> Date of Delivery <i>3/3/2014</i></p> <p>D. Is delivery address different from item B? <input type="checkbox"/> Yes <input type="checkbox"/> No            If YES, enter delivery address below:</p>
<p>2. Article Number            (Transfer from service label) 7006 2760 0001 6376 3356</p>	<p>3. Service Type  <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail  <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise  <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540