

HOLLAND & HART^{LLP}



Jordan L. Kessler
Associate
Phone (505) 988-4421
Fax (505) 983-6043
JKessler@hollandhart.com

May 8, 2015

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: OFFSET LESSEES AND OPERATORS IN THE ATOKA; GLORIETA YESO POOL

Re: Application of COG Operating LLC for a Non-Standard Spacing and Proration Unit, and Compulsory Pooling, Eddy County, New Mexico.
Pilum 15 Fee No. 1H Well

Dear Sir or Madam:

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application.* You are receiving notice of this application because you own an interest below 3,200' in the Yeso formation (Atoka; Glorieta Yeso pool) that is not being pooled for the proposed well. The pooled interval for the proposed well is limited to that portion of the Yeso formation above 3,200' total vertical depth.

This application has been set for hearing before a Division Examiner at 8:15 AM on May 28, 2015. 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.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR COG OPERATING LLC

Holland & Hart LLP

Phone [505] 988-4421 Fax [505] 983-6043 www.hollandhart.com

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

Aspen Boulder Carson City Colorado Springs Denver Denver Tech Center Billings Boise Cheyenne Jackson Hole Las Vegas Reno Salt Lake City Santa Fe Washington, D.C. A

**COG OPERATING LLC
PILUM 15 FEE NO. 1H WELL**

Lime Rock Resources II-A,
L.P.
1111 Bagby Street, Suite 4600
Houston, TX 77002

W.D.W. Operators, Inc.
1521 Oliver Street
Midland, TX 79701

O'Neill Properties, Ltd.
P.O. box 2840
Midland, TX 79702

Vinson Exploration, Inc.
1525 Oliver Street
Midland, TX 79701

Joshi Technologies, Inc.
5801 E. 41st, Suite 603
Tulsa, OK 74135

The De Compiegne Property
Company No. 20, Ltd.
P.O. Box 1071
Midland, TX 79702

Mizel Resources, a Trust
4350 S. Monaco Street, 5th
Floor
Denver, CO 80237

Bryan L. Vinson
1525 Oliver Street
Midland, TX 79701

Chi Energy, Inc.
212 North Main Street, Suite
200
Midland, TX 79702

McCombs Energy, Ltd.
5599 San Felipe, Suite 1200
Houston, TX 77056

7006 2760 0001 6382 1414

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

For delivery information visit **OFFIC**
MHF/COG
PILUM 1H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

Postmark Here
 USPS SANTA FE, NM 87594
 MAY 18 2015
 DE VARGIS POST OFFICE

Sent To: Lime Rock Resources II-A, L.P.
 Street, Apt or PO Box: 111 Bagby Street, Suite 4600
 City, State: Houston, TX 77002

PS Form 3811, February 2004

7006 2760 0001 6382 1401

U.S. Postal Service™
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For delivery information visit **OFFIC**
MHF/COG
PILUM 1H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage & Fees	

Postmark Here
 USPS SANTA FE, NM 87594
 MAY 18 2015
 DE VARGIS POST OFFICE

Sent To: W.D.W. Operators, Inc.
 Street, Apt or PO Box: 1521 Oliver Street
 City, State: Midland, TX 79701

PS Form 3811, February 2004

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

SEND TO: COMPLETE THIS 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.

A. Signature: *Justin Adams*
 Agent
 Addressee

B. Received by (Printed Name): Justin Adams
 C. Date of Delivery: 5/18/2015

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

1. Article Addressed to:
 Lime Rock Resources II-A, L.P.
 1111 Bagby Street, Suite 4600
 Houston, TX 77002

2. Article Number: 7006 2760 0001 6382 1414
 (Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) Yes

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

Returned

7006 2760 0001 6382 1391

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Service Provided)
 For delivery information visit **MHF/COG**
OFFICIAL MAIL PILUM 1H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total	669

Postmark Here
 SANTA FE, NM 87504
 DE VALDES, TX 79703

Sent To: O'Neill Properties, Ltd.
 Street or P.O. #: P.O. box 2840
 City: Midland, TX 79702

PS Form 3811, February 2004

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

THIS SECTION ON DELIVERY

■ 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:
 O'Neill Properties, Ltd.
 P.O. box 2840
 Midland, TX 79702

2. Article Number: 7006 2760 0001 6382 1391
 (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: Agent Addressee
 X Frank Warden

B. Received by (Printed Name): Frank Warden
 C. Date of Delivery: 5-15-15

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 6382 1384

U.S. Postal Service
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No International Service Provided)
 For delivery information visit **MHF/COG**
OFFICIAL MAIL PILUM 1H

Postage	\$ 69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	669

Postmark Here
 SANTA FE, NM 87504
 DE VALDES, TX 79703

Sent To: Vinson Exploration, Inc.
 Street or P.O. #: 1525 Oliver Street
 City: Midland, TX 79701

PS Form 3811, February 2004

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

THIS SECTION ON DELIVERY

■ 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:
 Vinson Exploration, Inc.
 1525 Oliver Street
 Midland, TX 79701

2. Article Number: 7006 2760 0001 6382 1384
 (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: Agent Addressee
 X [Signature]

B. Received by (Printed Name): [Signature]
 C. Date of Delivery: 5-14-15

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

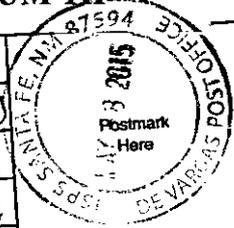
7006 2760 0001 6382 1377

U.S. Postal Service
CERTIFIED MAIL RECEIPT

For delivery information visit **OFFICIAL**

MHF/COG
PILUM IH

Postage	\$ 69
Certified Fee	230
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage	



Sent To
Joshi Technologies, Inc.
5801 E. 41st, Suite 603
Tulsa, OK 74135

PS Form 3800, August 2006

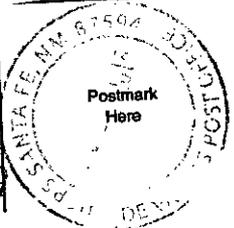
7006 2760 0001 6382 1360

U.S. Postal Service
CERTIFIED MAIL RECEIPT

For delivery information visit **OFFICIAL**

MHF/COG
PILUM IH

Postage	\$ 69
Certified Fee	230
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage	



Sent To
The De Compiegne Property
Company No. 20, Ltd.
P.O. Box 1071
Midland, TX 79702

PS Form 3800, August 2006

See Reverse for Instructions

CERTIFIED MAIL

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

THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
**Joshi Technologies, Inc.
5801 E. 41st, Suite 603
Tulsa, OK 74135**

2. Article Number (Transfer from service label) **7006 2760 0001 6382 1377**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Mary Toibat

B. Received by (Printed Name) **Mary Toibat** C. Date of Delivery **5/20/05**

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

CERTIFIED MAIL

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

THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
**De Compiegne Property
Company No. 20, Ltd.
Box 1071
Midland, TX 79702**

2. Article Number (Transfer from service label) **7006 2760 0001 6382 1360**

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature Agent Addressee
Bill Ball

B. Received by (Printed Name) **Bill Ball** C. Date of Delivery **5/20/05**

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

7006 2760 0001 6382 1352

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
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 For delivery information: **MHF/COG**
PILUM 1H
OFFFI

Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Post	

Sent To: **Mizel Resources, a Trust**
 4350 S. Monaco Street, 5th Floor
 Denver, CO 80237

Postmark Here: SANTA FE, NM 87594, MAY - 8 2015

PS Form 3811, August 2004 See reverse for instructions

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:
Mizel Resources, a Trust
4350 S. Monaco Street, 5th Floor
Denver, CO 80237

2. Article Number: **7006 2760 0001 6382 1352**
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Matt McCune*
 Agent
 Addressee

B. Received by (Printed Name): **MATT MCCUNE**

C. Date of Delivery: _____

D. Is delivery address different from item 1? Yes
 If 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

7006 2760 0001 6382 1346

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only)
 For delivery information: **MHF/COG**
PILUM 1H
OFFFI

Postage \$	69
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Post	

Sent To: **Bryan L. Vinson**
 1525 Oliver Street
 Midland, TX 79701

Postmark Here: SANTA FE, NM 87594, MAY 2015

PS Form 3811, August 2004 See reverse for instructions

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:
Bryan L. Vinson
1525 Oliver Street
Midland, TX 79701

2. Article Number: **7006 2760 0001 6382 1346**
 (Transfer from service label)

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature: *Bryan L. Vinson*
 Agent
 Addressee

B. Received by (Printed Name): _____

C. Date of Delivery: **5-14-15**

D. Is delivery address different from item 1? Yes
 If 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

7006 2760 0001 6382 1339

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PILUM 1H
OFFICE

Postage	\$ 09
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage	1669

Postmark Here

Sent To: Chi Energy, Inc.
 212 North Main Street, Suite
 Street, Apt. or PO Box: 200
 City, State: Midland, TX 79702

PS Form 3811, February 2004 See Reverse for Instructions

7006 2760 0001 6382 1322

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CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information visit **MHF/COG**
PILUM 1H
OFFICE

Postage	\$ 109
Certified Fee	330
Return Receipt Fee (Endorsement Required)	270
Restricted Delivery Fee (Endorsement Required)	669
Total Postage	1669

Postmark Here

Sent To: McCombs Energy, Ltd.
 5599 San Felipe, Suite 1200
 Street or PO Box: Houston, TX 77056
 City, State: Houston, TX 77056

PS Form 3811, February 2004 See Reverse for Instructions

CERTIFIED MAIL™
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THIS SECTION ON DELIVERY

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 ■ 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:

 McCombs Energy, Ltd.
 5599 San Felipe, Suite 1200
 Houston, TX 77056

2. Article Number (Transfer from service label) **7006 2760 0001 6382 1322**

A. Signature Agent Addressee
 X *[Signature]*

B. Received by (Printed Name) C. Date of Delivery
 5-19-18

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