

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

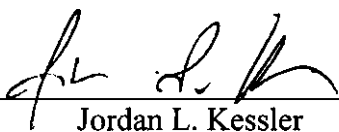
**APPLICATION OF XTO ENERGY INC.
FOR A NON-STANDARD SPACING AND
PRORATION UNIT, AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO.**

CASE NO. 15703

AFFIDAVIT

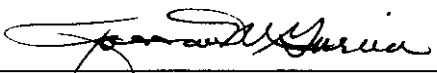
STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

Jordan L. Kessler, attorney in fact and authorized representative of XTO Energy Inc. the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter attached hereto.

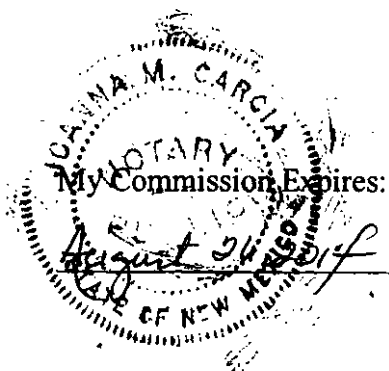


Jordan L. Kessler

SUBSCRIBED AND SWORN to before this 24th day of May 2017 by Jordan L. Kessler.



Notary Public



**BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Exhibit No. 6
Submitted by: XTO ENERGY INC.
Hearing Date: May 25, 2017**

XTO/Corral Canyon 15H
Pooling List / Case No. 15703

Stovall Energy, Ltd.
P.O. Box 10
Graham, TX 76450

COG Operating LLC
600 West Illinois Avenue
Midland, TX 79701

BAGAM Ltd.
P.O. Box 900
Graham, TX 76450

HMJ Minerals, Inc.
P.O. Box 1240
Graham, TX 76450

LRF Jr., LLC
P.O. Box 11327
Midland, TX 79702

Moon Royalty L.L.C.
P.O. Box 720070
Oklahoma City, OK 73172

Concho Oil & Gas
600 West Illinois Avenue
Midland, TX 79701

Sonic Oil & Gas, LP
505 5th Street
Graham, TX 76450

H.M. Bettis, Inc.
505 5th Street
Graham, TX 76450

Guinn Family Properties, Ltd.
P.O. Box 1298
Graham, TX 76450

The Allar Company
735 Elm Street
Graham, TX 76450

XTO/Corral Canyon 15H
Pooling List / Case No. 15703



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

May 5, 2017

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: POOLED PARTIES

Re: Application of XTO Energy Inc. for a non-standard spacing and proration unit, and compulsory pooling, Eddy County, New Mexico. Corral Canyon Federal Com No. 15H Well

Dear Sir or Madam:

This letter is to advise you that XTO Energy Inc., 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 May 25, 2017. 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 Angie Repka, at (817) 885-2746 or Angie_Repka@xtoenergy.com.

Sincerely,

A handwritten signature in dark ink, appearing to read 'JL Kessler', written over the printed name.

Jordan L. Kessler
ATTORNEY FOR XTO ENERGY INC.

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. ☐

7016 0750 0000 3576 4005

U.S. Postal Service®
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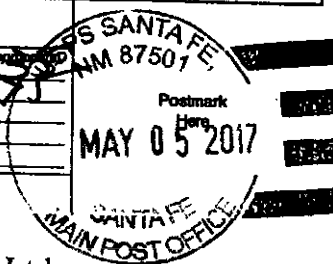
For delivery information, visit **JLK/XTO/CorralCanyon**
OFFICE 5H Pooled/Case No 15703

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee if appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total \$

Sent To: **Stovall Energy, Ltd.**
 Street: **P.O. Box 10**
 City, St: **Graham, TX 76450**

PS Form 3800, April 2013 PSN 7530-02-000-9053 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Stovall Energy, Ltd.
P.O. Box 10
Graham, TX 76450

9590 9402 1832 6104 5953 87

2. Article Number (Transfer from service label)

7016 0750 0000 3576 4005

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X **Lila Clarke**
☐ Agent
☐ Addressee

B. Received by (Printed Name)

LILA CLARKE

C. Date of Delivery

5/10/17

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

3. Service Type

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

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

Restricted Delivery

(over \$500)

Domestic Return Receipt

7016 0750 0000 3576 3992

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

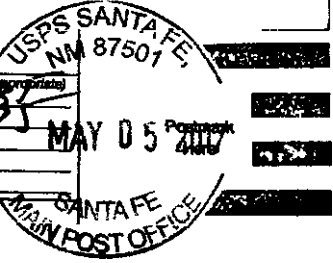
For delivery information, visit **JLK/XTO/CorralCanyon**
OFFICE 5H Pooled/Case No 15703

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee if appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total \$

Sent To: **COG Operating LLC**
 Street: **600 West Illinois Avenue**
 City, St: **Midland, TX 79701**

PS Form 3800, April 2013 PSN 7530-02-000-9053 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

COG Operating LLC
600 West Illinois Avenue
Midland, TX 79701

9590 9402 1834 6104 2746 79

2. Article Number (Transfer from service label)

7016 0750 0000 3576 3992

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X **J. Monroe**
☐ Agent
☐ Addressee

B. Received by (Printed Name)

J. MONROE

C. Date of Delivery

5-8-17

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

3. Service Type

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

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

Restricted Delivery

Domestic Return Receipt

7016 0750 0000 3576 3985

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **USPS.com**
OFFICIAL MAIL SH Pooled/Case No 15703

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee):
☐ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage \$
 Total \$

Sent To
 Street
 City, State

BAGAM Ltd.
 P.O. Box 900
 Graham, TX 76450

PS Form 3800, April 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

BAGAM Ltd.
 P.O. Box 900
 Graham, TX 76450

9590 9402 1832 6104 5952 19

2. Article Number (Transfer from service label)

7016 0750 0000 3576 3985

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
 X *[Signature]* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) *Vicki Mills* C. Date of Delivery *5/10/17*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 0750 0000 3576 3978

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **USPS.com**
OFFICIAL MAIL SH Pooled/Case No 15703

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee):
☐ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage \$
 Total For \$

Sent To
 Street
 City, State

HMJ Minerals, Inc.
 P.O. Box 1240
 Graham, TX 76450

PS Form 3800, April 2015 PSN 7530-02-000-9053

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

HMJ Minerals, Inc.
 P.O. Box 1240
 Graham, TX 76450

9590 9402 1832 6104 5952 26

2. Article Number (Transfer from service label)

7016 0750 0000 3576 3978

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

COMPLETE THIS SECTION ON DELIVERY

- A. Signature
 X *[Signature]* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) C. Date of Delivery *5/10/17*
- D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type

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

Domestic Return Receipt

7016 0750 0000 3576 3961

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

JLK/XTO/CorralCanyon
5H Pooled/Case No 15703

OFFIC

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 \$

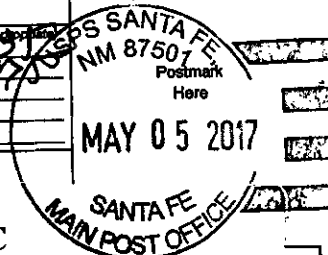
Sent To

Street and A
City, State, ZIP

LRF Jr., LLC
P.O. Box 11327
Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



7016 0750 0000 3576 3954

U.S. Postal Service™

CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit

JLK/XTO/CorralCanyon
5H Pooled/Case No 15703

OFFIC

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 \$

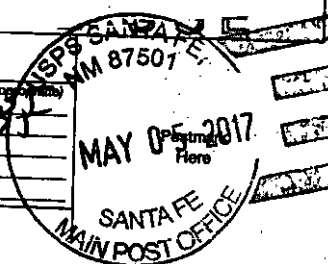
Sent To

Street and A
City, State, ZIP

Moon Royalty L.L.C.
P.O. Box 720070
Oklahoma City, OK 73172

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



SENDER: CC

■ Complete items 1, 2, and 3.

■ Print your name and address on the reverse so that we can return the card to you.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

LRF Jr., LLC
P.O. Box 11327
Midland, TX 79702

9590 9402 1832 6104 5952 33

2. Article Number (Transfer from service label)

7016 0750 0000 3576 3961

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

ON ON DELIVERY

A. Signature

X *W.C. Jr.*☐ Agent☐ Addressee

B. Received by (Printed Name)

WCJATE

C. Date of Delivery

5/19/17

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail®☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.

■ Print your name and address on the reverse so that we can return the card to you.

■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Moon Royalty L.L.C.
P.O. Box 720070
Oklahoma City, OK 73172

9590 9402 1832 6104 5952 40

2. Article Number (Transfer from service label)

7016 0750 0000 3576 3954

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

SECTION ON DELIVERY

A. Signature

X *CS Collier*☐ Agent☐ Addressee

B. Received by (Printed Name)

CS Collier

C. Date of Delivery

5/18/17

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail®☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 0750 0000 3576 3947

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information: **JLK/XTO/CorralCanyon**
OFFICIAL SH Pooled/Case No 15703

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 \$
 Sent To
 Street
 City, St

Concho Oil & Gas
 600 West Illinois Avenue
 Midland, TX 79701

USPS SANTA FE NM 87501
 Postmark Here
 MAY 05 2017
 SANTA FE MAIN POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 0750 0000 3576 3930

U.S. Postal Service[™]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information: **JLK/XTO/CorralCanyon**
OFFICIAL SH Pooled/Case No 15703

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 \$
 Sent To
 Street
 City, St

Sonic Oil & Gas, LP
 505 5th Street
 Graham, TX 76450

USPS SANTA FE NM 87501
 Postmark Here
 MAY 05 2017
 SANTA FE MAIN POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

U.S. POSTAL SERVICE[™]
CERTIFIED MAIL[®] RECEIPT
 DOMESTIC MAIL ONLY

SENDER'S COPY

1. Complete items 1, 2, and 3.
 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:
 Concho Oil & Gas
 600 West Illinois Avenue
 Midland, TX 79701
 9590 9402 1832 6104 5952 57
 7016 0750 0000 3576 3947

2. Article Number (Transfer from service label)
 7016 0750 0000 3576 3947

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

A. Signature
 X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 J. Monroe

C. Date of Delivery
 5-8-17

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

3. Service Type
☐ Adult Signature ☐ Priority Mail Express[®]
☐ Adult Signature Restricted Delivery ☐ Registered Mail[™]
☐ Certified Mail[®] ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation[™]
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

U.S. POSTAL SERVICE[™]
CERTIFIED MAIL[®] RECEIPT
 DOMESTIC MAIL ONLY

SENDER'S COPY

1. Complete items 1, 2, and 3.
 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:
 Sonic Oil & Gas, LP
 505 5th Street
 Graham, TX 76450
 9590 9402 1832 6104 5952 64
 7016 0750 0000 3576 3930

2. Article Number (Transfer from service label)
 7016 0750 0000 3576 3930

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

A. Signature
 X *[Signature]* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 John Cox

C. Date of Delivery
 5/9/17

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

3. Service Type
☐ Adult Signature ☐ Priority Mail Express[®]
☐ Adult Signature Restricted Delivery ☐ Registered Mail[™]
☐ Certified Mail[®] ☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise
☐ Collect on Delivery ☐ Signature Confirmation[™]
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

7016 0750 0000 3576 3923

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
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For delivery information, visit **JLK/XTO/CorralCanyon**
OFFICE 5H Pooled/Case No 15703

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 \$
 Sent To
 Street and
 City, State

H.M. Bettis, Inc.
 505 5th Street
 Graham, TX 76450

SPS SANTA FE NM 87501
 MAY 05 2017
 SANTA FE MAIN POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 0750 0000 3576 2988

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
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For delivery information, visit **JLK/XTO/CorralCanyon**
OFFICE 5H Pooled/Case No 15703

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 \$
 Sent To
 Street and
 City, State

Guinn Family Properties, Ltd.
 P.O. Box 1298
 Graham, TX 76450

SPS SANTA FE NM 87501
 MAY 05 2017
 SANTA FE MAIN POST OFFICE

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

U.S. POSTAL SERVICE[®]
 PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:
 H.M. Bettis, Inc.
 505 5th Street
 Graham, TX 76450

9590 9402 1832 6104 5952 71
 7016 0750 0000 3576 3923

2. Article Number (Transfer from service label)
 7016 0750 0000 3576 3923

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

A. Signature
 X *John Cox* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 John Cox

C. Date of Delivery
 5/9/17

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

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

U.S. POSTAL SERVICE[®]
 PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:
 Guinn Family Properties, Ltd.
 P.O. Box 1298
 Graham, TX 76450

9590 9402 1832 6104 5952 88
 7016 0750 0000 3576 2988

2. Article Number (Transfer from service label)
 7016 0750 0000 3576 2988

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

A. Signature
 X *John Guinn* ☐ Agent ☐ Addressee

B. Received by (Printed Name)
 John Guinn

C. Date of Delivery
 5/10/17

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

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

7016 0750 0000 3576 2971

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **usps.com**
 JLN/XTO/CorralCanyon
 5H Pooled/Case No 15703

OFFICE
 USPS SANTA FE
 NM 87507
 MAY 06 2017
 SANTA FE
 NM POST OFFICE

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 \$

Sent To
 Street and Apt
 City, State, ZIP

The Allar Company
 735 Elm Street
 Graham, TX 76450

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

RENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 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:
 The Allar Company
 735 Elm Street
 Graham, TX 76450

2. Article Number (Transfer from service label)
 9590 9402 1832 6104 5952 95
 7016 0750 0000 3576 2971

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

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

Signature
 X *Renee Linkart*
 B. Received by (Printed Name) *Renee Linkart*
 C. Date of Delivery *5/9/17*
 D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

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

XTO/Corral Canyon 15H
Offset List / Case No. 15703

ExxonMobil Corporation
810 Houston Street
Fort Worth, TX 76102

OXY USA, Inc.
5 Greenway Plaza, Suite 110
Houston, TX 77046

COG Operating LLC
600 West Illinois Avenue
Midland, TX 79701

Concho Oil & Gas
600 West Illinois Avenue
Midland, TX 79701

Nadel & Gussman Permian, LLC
4000 North Big Spring, Suite 310
Midland, TX 79705

Chevron U.S.A. Inc.
6301 Deauville Blvd.
Midland, TX 79706

Devon Energy Corporation
333 West Sheridan Avenue
Oklahoma City, OK 73102

Yates Petroleum Corporation
105 S. Fourth Street
Artesia, NM 88210

EOG Resources, Inc.
P.O. Box 2267
Midland, TX 79702

ABO Petroleum
105 S. Fourth Street
Artesia, NM 88210

Myco Industries Inc.
105 S. Fourth Street
Artesia, NM 88210

XTO/Corral Canyon 15H
Offset List / Case No. 15703

HOLLAND & HART



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

May 5, 2017

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

TO: OFFSETTING LESSEES AND OPERATORS

RE: Application of XTO Energy Inc. for a non-standard spacing and proration unit, and compulsory pooling, Eddy County, New Mexico.
Corral Canyon Federal Com No. 15H Well

This letter is to advise you that XTO Energy Inc. 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 of the request for the proposed non-standard spacing and proration unit and due to the proposed unorthodox well location.

This application has been set for hearing before a Division Examiner at 8:15 AM on May 25, 2017. 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 with the Oil Conservation Division's Santa Fe office, four days in advance of a scheduled hearing, but at least on the Thursday preceding the hearing. This statement must 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 Angie Repka, at (817) 885-2746 or Angie_Repka@xtoenergy.com.

Sincerely,

Jordan L. Kessler
ATTORNEY FOR XTO ENERGY INC.

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. ☉

7016 0750 0000 3576 3916

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit **usps.com**

OFFICIAL

PSN 87501

Postmark: MAY 05 2017

SANTA FE MAIN POST OFFICE

Extra Services & Fees (check box, add fee amount)

☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total Postage \$

Sent To: **ExxonMobil Corporation**
 Street and: **810 Houston Street**
 City, State: **Fort Worth, TX 76102**

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

7016 0750 0000 3576 3909

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit **usps.com**

OFFICIAL

PSN 87501

Postmark: MAY 05 2017

SANTA FE MAIN POST OFFICE

Extra Services & Fees (check box, add fee amount)

☒ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total Postage \$

Sent To: **OXY USA, Inc.**
 Street: **5 Greenway Plaza, Suite 110**
 City, State: **Houston, TX 77046**

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

MAIL DELIVERED

SENDER: COMPLETE THIS SECTION

☒ Complete items 1, 2, and 3.
☒ Print your name and address on the reverse so that we can return the card to you.
☒ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ExxonMobil Corporation
810 Houston Street
Fort Worth, TX 76102

9590 9402 1832 6104 5951 34

2. Article Number (Transfer from service label):
7016 0750 0000 3576 3916

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

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

B. Received by (Printed Name)
SPAIN

C. Date of Delivery
MAY 08 2017

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Delivery Restricted Delivery

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

(over \$500)

SENDER: COMPLETE THIS SECTION

☒ Complete items 1, 2, and 3.
☒ Print your name and address on the reverse so that we can return the card to you.
☒ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

OXY USA, Inc.
5 Greenway Plaza, Suite 110
Houston, TX 77046

9590 9402 1832 6104 5951 41

2. Article Number (Transfer from service label):
7016 0750 0000 3576 3909

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X

B. Received by (Printed Name)
SPAIN

C. Date of Delivery
5/9/17

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Delivery Restricted Delivery

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

(over \$500)

7016 0750 0000 3576 3893

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **JLK/XTO/Corral Canyon**
5H Offset/Case No 15703

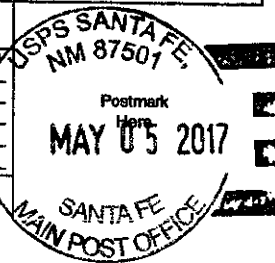
OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee if appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total P_c \$

Sent To **COG Operating LLC**
 Street a **600 West Illinois Avenue**
 City, St_e **Midland, TX 79701**

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



SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

COG Operating LLC
600 West Illinois Avenue
Midland, TX 79701

9590 9402 1832 6104 5951 58

2. Article Number (Transfer from service label)

7016 0750 0000 3576 3893

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent
☐ Addressee

B. Received by (Printed Name)

J. MONROE

C. Date of Delivery

5-8-17

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Delivery Restricted Delivery
☐ Restricted Delivery (over \$500)

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

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Concho Oil & Gas
600 West Illinois Avenue
Midland, TX 79701

9590 9402 1832 6104 5951 65

2. Article Number (Transfer from service label)

7016 0750 0000 3576 3886

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☐ Agent
☐ Addressee

B. Received by (Printed Name)

J. MONROE

C. Date of Delivery

5-8-17

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

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Delivery Restricted Delivery
☐ Restricted Delivery (over \$500)

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

Domestic Return Receipt

7016 0750 0000 3576 3886

U.S. Postal Service®
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **JLK/XTO/Corral Canyon**
5H Offset/Case No 15703

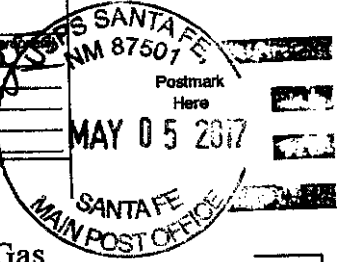
OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee if appropriate)
☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage \$
 Total P_c \$

Sent To **Concho Oil & Gas**
 Street a **600 West Illinois Avenue**
 City, St_e **Midland, TX 79701**

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



U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information: **WLK/XTO/Corral Canyon**
OFFICE 5H Offset/Case No 15703

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as indicated)
☐ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage \$
Total \$
Sent To
Street
City, State

Nadel & Gussman Permian, LLC
4000 North Big Spring, Suite 310
Midland, TX 79705

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

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information: **WLK/XTO/Corral Canyon**
OFFICE 5H Offset/Case No 15703

Certified Mail Fee \$
Extra Services & Fees (check box, add fee as indicated)
☐ Return Receipt (hardcopy)
☐ Return Receipt (electronic)
☐ Certified Mail Restricted Delivery
☐ Adult Signature Required
☐ Adult Signature Restricted Delivery

Postage \$
Total \$
Sent To
Street
City, State

Chevron U.S.A. Inc.
6301 Deauville Blvd.
Midland, TX 79706

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

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
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:
Nadel & Gussman Permian, LLC
4000 North Big Spring, Suite 310
Midland, TX 79705

2. Article Number (Transfer from service label)
9590 9402 1832 6104 5951 72

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

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

A. Signature
X [Signature]
B. Received by (Printed Name)
C. Date of Delivery
5/8/17

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

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

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
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:
Chevron U.S.A. Inc.
6301 Deauville Blvd.
Midland, TX 79706

2. Article Number (Transfer from service label)
9590 9402 1832 6104 5951 89

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery

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

A. Signature
X [Signature]
B. Received by (Printed Name)
C. Date of Delivery
5/8/17

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

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

7016 0750 0000 3576 3855

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit **JLK/XTO/Corral Canyon**
OFFICE 15H Offset/Case No 15703

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 Post \$

Sent To **Devon Energy Corporation**
 Street and **333 West Sheridan Avenue**
 City, State **Oklahoma City, OK 73102**

PS Form 3811, July 2015 PSN 7580-02-000-9063

7016 0750 0000 3576 3848

U.S. Postal Service[®]
CERTIFIED MAIL[®] RECEIPT
 Domestic Mail Only

For delivery information, visit **JLK/XTO/Corral Canyon**
OFFICE 15H Offset/Case No 15703

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 \$

Sent To **Yates Petroleum Corporation**
 Street and **105 S. Fourth Street**
 City, State **Artesia, NM 88210**

PS Form 3800, April 2015 PSN 7580-02-000-9063 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Devon Energy Corporation
333 West Sheridan Avenue
Oklahoma City, OK 73102

9590 9402 1832 6104 5951 96

2. Article Number (Transaction)

7016 0750 0000 3576 3855

PS Form 3811, July 2015 PSN 7580-02-000-9063

RECIPIENT: COMPLETE THIS SECTION ON DELIVERY

A. Signature

David Carrillo

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from the address on the mailpiece?
 If YES, enter delivery address below:

- ☐ Yes
☒ No

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail[®]
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
- ☐ Priority Mail Express[®]
☐ Registered Mail[™]
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature Confirmation[™]
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7016 0750 0000 3576 4012

U.S. Postal Service
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit **usps.com**
OFFICIAL

JLK/XTO/Corral Canyon
 15H Offset/Case No 15703

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 \$

Sent to
 Street
 City, State ZIP+4®

Myco Industries Inc.
 105 S. Fourth Street
 Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3.
 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:
 Myco Industries Inc.
 105 S. Fourth Street
 Artesia, NM 88210

2. Article Number (Transfer from service label)
 9590 9402 1832 6104 5953 01
 7016 0750 0000 3576 4012

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
☐ Agent
☐ Addressee

B. Received by (Printed Name)
 C. Date of Delivery

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

3. Service Type
☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Registered Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Return Receipt for Merchandise
☐ Signature C
☐ Signature Restricted Delivery

Domestic Return Receipt