



HOLLAND & HART <sup>LLP</sup>  
AND  
CAMPBELL & CARR  
ATTORNEYS AT LAW

DENVER • ASPEN  
BOULDER • COLORADO SPRINGS  
DENVER TECH CENTER  
BILLINGS • BOISE  
CHEYENNE • JACKSON HOLE  
SALT LAKE CITY • SANTA FE  
WASHINGTON, D.C.

SUITE 1  
110 NORTH GUADALUPE  
SANTA FE, NEW MEXICO 87501-6525  
MAILING ADDRESS  
P.O. BOX 2208  
SANTA FE, NEW MEXICO 87504-2208

TELEPHONE (505) 988-4421  
FACSIMILE (505) 983-6043  
www.hollandhart.com

June 5, 2001

**CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

TO: AFFECTED INTEREST OWNERS

*Re: Application of Yates Petroleum Corporation for pool creation and the adoption of special pool rules and regulations, Lea County, New Mexico.*

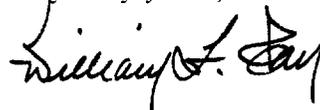
Ladies and Gentlemen:

This letter is to advise you that Yates Petroleum Corporation has filed the enclosed application with the New Mexico Oil Conservation Division seeking the creation of a new oil pool in the Atoka formation as the result of the discovery of oil and gas in its Big Bear "ATN" Well No. 2 located in Unit L of Section 29, Township 15 South, Range 35 East, NMPM, Lea County, New Mexico. Yates seeks the adoption of Special Pool Rules and Regulations for the pool including provisions for 80-acre spacing and proration units with wells located no closer than 330 feet to the quarter-quarter section line of the dedicated spacing unit, and an optional second well on each unit with no more than one well on each quarter-quarter section.

This application has been set for hearing before a Division Examiner on June 28, 2001. 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 1208.B to file a Prehearing Statement three days in advance of a scheduled 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.

Very truly yours,



William F. Carr  
ATTORNEY FOR YATES  
PETROLEUM CORPORATION

Enc.

**NOTIFICATION LIST**

**APPLICATION OF YATES PETROLEUM CORPORATION  
FOR POOL CREATION  
AND THE ADOPTION OF SPECIAL POOL RULES AND REGULATIONS  
SECTION 29, TOWNSHIP 16 SOUTH, RANGE 32 EAST, NMPM**

David H. Arrington Oil & Gas, Inc.  
Post Office Box 2071  
Midland, Texas 79702

Devon Energy Corporation (Nevada)  
20 North Broadway, Suite 1500  
Oklahoma City, Oklahoma 73102

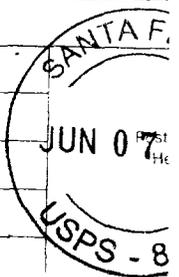
Energen Resources Corporation  
605 21st Street North  
Birmingham, Alabama 35203-2707

Hanley Petroleum, Inc.  
415 West Wall Street, Suite 1500  
Midland, Texas 79701

Blaine Hess  
3 Gaye Drive  
Roswell, New Mexico 88201

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

Postage	\$
Certified Fee	
Return Receipt Fee (endorsement Required)	
Restricted Delivery Fee (endorsement Required)	
<b>Total Postage &amp; Fees</b>	\$



Recipient's Name: **David H. Arrington Oil & Inc.**  
 Street, Apt. No.: **Post Office Box 2071**  
 City, State, ZIP+4: **Midland, Texas 79702**

Form 3800, February 1999

**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:  
**David H. Arrington Oil & Gas, Inc.**  
**Post Office Box 2071**  
**Midland, Texas 79702**

2. Article Number (Copy from service label)  
**1000 0000 0024 3124 0804**

PS Form 3811, July 1999

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) **COLINNA FULTON** B. Date of Delivery **6-12-1**  
 C. Signature **[Signature]**  Agent  Addressee  
 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

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

Postage	\$
Certified Fee	
Return Receipt Fee (endorsement Required)	
Restricted Delivery Fee (endorsement Required)	
<b>Total Postage &amp; Fees</b>	\$



Recipient's Name: **Devon Energy Corporation**  
 Street, Apt. No.: **20 North Broadway, Suite 1**  
 City, State, ZIP+4: **Oklahoma City, Oklahoma**

**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:  
**Devon Energy Corporation**  
**20 North Broadway, Suite 1500**  
**Oklahoma City, Oklahoma 73102**

2. Article Number (Copy from service label)  
**1000 0000 0024 3124 0198**

PS Form 3811, July 1999

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) **[Signature]** B. Date of Delivery **6-12-01**  
 C. Signature **[Signature]**  Agent  Addressee  
 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

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

Postage	\$
Certified Fee	
Return Receipt Fee (endorsement Required)	
Restricted Delivery Fee (endorsement Required)	
<b>Total Postage &amp; Fees</b>	\$



Recipient's Name: **Energen Resources Corporation**  
 Street, Apt. No.: **605 21st Street North**  
 City, State, ZIP+4: **Birmingham, Alabama 35217**

**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:  
**Energen Resources Corporation**  
**605 21st Street North**  
**Birmingham, Alabama 35203-2707**

2. Article Number (Copy from service label)  
**1000 0000 0024 3124 0198**

PS Form 3811, July 1999

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) **[Signature]** B. Date of Delivery **6-12-01**  
 C. Signature **[Signature]**  Agent  Addressee  
 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

Form 3800, February 1999

102595-39-M-17

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

Postage	\$
Certified Fee	
Return Receipt Fee (Postage Not Required)	
Restricted Delivery Fee (Postage Not Required)	
Total Postage & Fees	\$



Recipient's Name: **Hanley Petroleum, Inc.**  
 Street, Apt. No.: **415 West Wall Street, Suite**  
 State, ZIP: **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:  
**Hanley Petroleum, Inc.**  
**415 West Wall Street, Suite 1500**  
**Midland, Texas 79701**

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) \_\_\_\_\_ B. Date of Delivery **6-11-99**

C. Signature  Agent  
 Addressee

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

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

Postage	\$
Certified Fee	
Return Receipt Fee (Postage Not Required)	
Restricted Delivery Fee (Postage Not Required)	
Postage & Fees	\$



Recipient's Name: **Blaine Hess**  
 Street, Apt. No.: **3 Gaye Drive**  
 State, ZIP: **Roswell, New Mexico 88201**

**SENDER: COMPLETE THIS SECTION**

- 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:  
**Blaine Hess**  
**3 Gaye Drive**  
**Roswell, New Mexico 88201**

**COMPLETE THIS SECTION ON DELIVERY**

A. Received by (Please Print Clearly) \_\_\_\_\_ B. Date of Delivery **6-11-99**

C. Signature  Agent  
 Addressee

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