

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

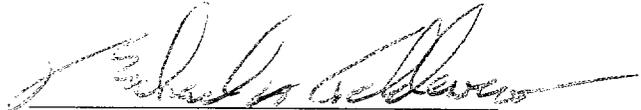
**APPLICATION OF DAVID H. ARRINGTON OIL AND
GAS, INC. FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

CASE NO. 12858

AFFIDAVIT

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

Michael H. Feldewert, attorney in fact and authorized representative of David H. Arrington Oil and Gas, Inc., the Applicant herein, being first duly sworn, upon oath, states that notice of the above-referenced Application was mailed to the addresses shown on Exhibit "A" attached hereto, and that true and correct copies of the notice letter and proof of receipt are attached hereto.



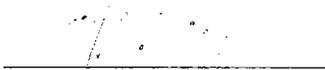
Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 1st day of May, 2002.



Notary Public

My Commission Expires:



**BEFORE THE OIL CONSERVATION
DIVISION
Santa Fe, New Mexico
Case No. 12858 Exhibit No. 1
Submitted by:
David H. Arrington Oil & Gas, Inc.
Hearing Date: May 2, 2002**

EXHIBIT A

Anson Gas Corporation
4005 NW Expressway
Suite 400E
Oklahoma City, Oklahoma 73116

Chesapeake Exploration, L.P.
Attention: Lynda Townsend
Post Office Box 18496
Oklahoma City, Oklahoma 73154

Chalfant Properties, Inc.
Post Office Box 3123
Midland, Texas 79702

Estate of Rada Jackson & Unknown
Heirs; Thelma Champion and
Mattie Pou, Assumed Heirs
c/o Thelma Champion
4932 Lyndon Drive
Fort Worth, Texas 76116

Jerry D. Billington, Assumed Heir of
Jamie Ann Medlin Billington
4911 Matador
Amarillo, Texas 79109

Robert Freck
Post Office Box 4045
Bergheim, Texas 78004

Shawn Freck
Post Office Box 4045
Bergheim, Texas 78004

Estate of Thelma Ann Turner
& Unknown Heirs
705 East Alston
Hobbs, New Mexico 88240

James E. Bailey and Wilma J. Lair/Unknown
Heirs
Post Office Box 811
Lovington, New Mexico 88260

Vera B. Selman
1713 West Avenue J
Lovington, New Mexico 88260

HOLLAND & HART LLP

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

ATTORNEYS AT LAW
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208
110 NORTH GUADALUPE, SUITE 1
SANTA FE, NEW MEXICO 87501-6525

TELEPHONE (505) 988-4421
FACSIMILE (505) 983-6043

Michael H. Feldewert

mfeldewert@hollandhart.com

April 11, 2002

CERTIFIED MAIL/RETURN RECEIPT REQUESTED

TO: AFFECTED INTEREST OWNERS

**Re: Application of David H. Arrington Oil & Gas, Inc.
For Compulsory Pooling, Lea County, New Mexico
Royal Stimulator "31" Well No. 2**

Ladies and Gentlemen:

This letter is to advise you that David H. Arrington Oil & Gas, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. This application has been set for hearing before a Division Examiner on May 2, 2002. 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 name of the party and its attorney; 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.

Sincerely,



Michael H. Feldewert

MHF/js
Enclosure

EXHIBIT A

NOTICE LIST

**DAVID H. ARRINGTON OIL & GAS, INC.
FOR COMPULSORY POOLING
W/2 OF SECTION 31, TOWNSHIP 15 SOUTH, RANGE 36 EAST, N.M.P.M.
LEA COUNTY, NEW MEXICO
ROYAL STIMULATOR "31" WELL NO. 2**

Anson Gas Corporation
4005 NW Expressway
Suite 400E
Oklahoma City, Oklahoma 73116

Estate of Thelma Ann Turner
& Unknown Heirs
705 East Alston
Hobbs, New Mexico 88240

Chesapeake Exploration, L.P.
Attention: Lynda Townsend
Post Office Box 18496
Oklahoma City, Oklahoma 73154

James E. Bailey and Wilma J.
Lair/Unknown Heirs
Post Office Box 811
Lovington, New Mexico 88260

Chalfant Properties, Inc.
Post Office Box 3123
Midland, Texas 79702

Vera B. Selman
1713 West Avenue J
Lovington, New Mexico 88260

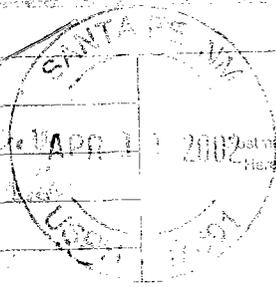
Estate of Rada Jackson & Unknown
Heirs; Thelma Champion and
Mattie Pou, Assumed Heirs
c/o Thelma Champion
4932 Lyndon Drive
Fort Worth, Texas 76116

Jerry D. Billington, Assumed Heir of
Jamie Ann Medlin Billington
4911 Matador
Amarillo, Texas 79109

Robert Freck
Post Office Box 4045
Bergheim, Texas 78004

Shawn Freck
Post Office Box 4045
Bergheim, Texas 78004

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)		
Total Postage & Fees		

Rec: **Anson Gas Corporation**
 Str: **4005 NW Expressway**
 Suite 400E
 City: **Oklahoma City, Oklahoma 73116**

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:

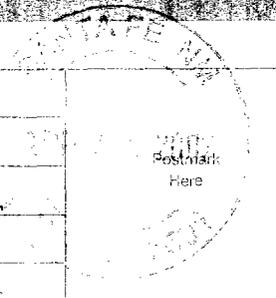
Anson Gas Corporation
4005 NW Expressway
Suite 400E
Oklahoma City, Oklahoma 73116

2. Article Number (Copy from service label)
7000 0600 0024 3128 0177

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery 4-15-02
C. Signature X [Signature]	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? If YES, enter delivery address below:	<input type="checkbox"/> Yes <input type="checkbox"/> No
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.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> 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)		
Total Postage & Fees		

Rec: **James E. Bailey and Wilma J. Lair/**
 Str: **Unknown Heirs**
 Post Office Box 811
 City: **Lovington, New Mexico 88260**

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:

Jerry D. Billington, Assumed Heir
of Jamie Ann Medlin Billington
4911 Matador
Amarillo, Texas 79109

2. Article Number (Copy from service label)
7000 0600 0024 3128 0214

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Jerry Billington	B. Date of Delivery
C. Signature X [Signature]	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? If YES, enter delivery address below:	<input type="checkbox"/> Yes <input type="checkbox"/> No
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.	
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

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

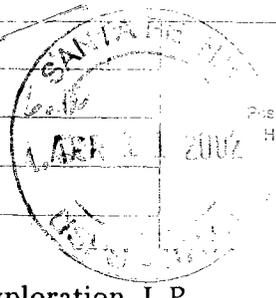
Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		

Rec: **Jerry D. Billington, Assumed Heir**
 of **Jamie Ann Medlin Billington**
 Street: **4911 Matador**
 City: **Amarillo, Texas 79109**

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)		
Total Postage & Fees		

Rec: Chesapeake Exploration, L.P.
 Str: Attention: Lynda Townsend
 City: Post Office Box 18496
 Oklahoma City, Oklahoma 73154



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:

Chesapeake Exploration, L.P.
 Attention: Lynda Townsend
 Post Office Box 18496
 Oklahoma City, Oklahoma 73154

2. Article Number (Copy from service label)

7000 0600 0024 3128 0184

PS Form 3811, July 1999

Domestic Return Receipt

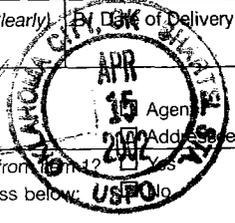
102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 BRIAN IMES

C. Signature
 X *Brian Imes*

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



3. Service Type

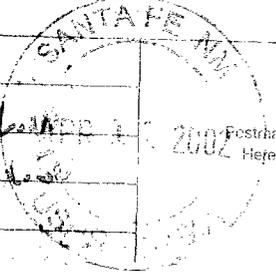
- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

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 (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		

Rec: Chalfant Properties, Inc.
 Str: Post Office Box 3123
 City: Midland, Texas 79702



- 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:

Chalfant Properties, Inc.
 Post Office Box 3123
 Midland, Texas 79702

2. Article Number (Copy from service label)

7000 0600 0024 3128 0207

PS Form 3811, July 1999

Domestic Return Receipt

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 Judith Hambrick 4/15/02

C. Signature
Judith Hambrick

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

3. Service Type

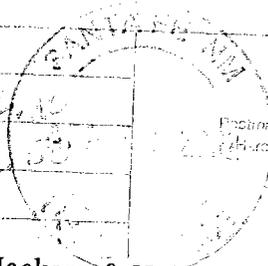
- Certified Mail Express Mail
- Registered Return Receipt for Merchandise
- Insured Mail C.O.D.

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 (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees		

Rec: Estate of Rada Jackson & Unknown Heirs; Thelma Champion & Mattie Pou, Assumed Heirs
 Str: c/o Thelma Champion
 City: 4932 Lyndon Drive



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:

Estate of Rada Jackson & Unknown Heirs; Thelma Champion & Mattie Pou, Assumed Heirs
 c/o Thelma Champion
 4932 Lyndon Drive
 Fort Worth, Texas 76116

2. Article Number (Copy from service label)

7000 0600 0024 3128 0207

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

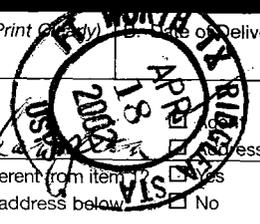
C. Signature
 X *Richard...*

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

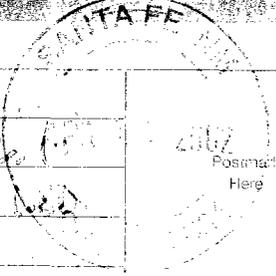
3. Service Type

- 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)

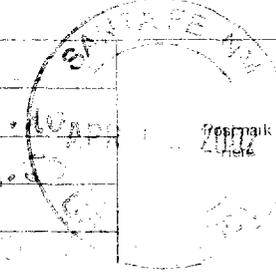


Postage \$
 Certified Fee
 Return Receipt Fee
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$

*MAIL RETURNED
 NOT DELIVERED
 01.22.02*

Recipient
**Estate of Thelma Ann Turner
 & Unknown Heirs
 705 East Alston
 Hobbs, New Mexico 88240**

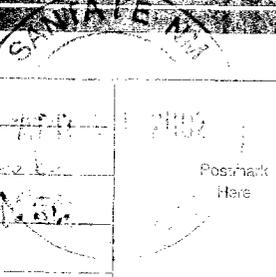
U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)



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

Recipient
**Robert Freck
 Post Office Box 4045
 Bergheim, Texas 78004**

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)
 Total Postage & Fees \$

Recipient
**Shawn Freck
 Post Office Box 4045
 Bergheim, Texas 78004**

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only. No Insurance (Over \$500) Provided)

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		

Postmark
Here

To:
 Rec: Vera B. Selman
 Street: 1713 West Avenue J
 City: Lovington, New Mexico 88260

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.
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1. Article Addressed to:

 Vera B. Selman
 1713 West Avenue J
 Lovington, New Mexico 88260

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 C. Signature
 X R Taylor
 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

5. Article Number (Copy from service label)
 7000 0600 0024 3128 0269