

**My Commission Expires:**

# MILLER STRATVERT

PROFESSIONAL ASSOCIATION

Ranne B. Miller  
Alice T. Lorenz  
Gregory W. Chase  
Stephen M. Williams  
Stephan M. Vidmar  
Seth V. Bingham  
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Kirk R. Allen

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Gary Risley  
M. Dylan O'Reilly  
Jennifer D. Hall  
Jennifer L. Olson  
Todd A. Schwarz  
Nell Graham Sale

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Leonard D. Sanchez  
Michelle K. Ostrye  
Kelsey D. Green  
Marcy Baysinger  
David J. Martin  
Caroline Blankenship  
Matthew S. Rappaport  
  
Counsel  
William K. Stratvert  
James B. Collins

## Reply to Santa Fe

150 Washington Ave., Suite 300  
Santa Fe, NM 87501

Mailing Address:  
P.O. Box 1986  
Santa Fe, NM 87504-1986

Telephone: (505) 989-9614  
Facsimile: (505) 989-9857

\* New Mexico Board of Specialization Recognized Specialist in Natural Resources - Oil & Gas Law  
\*\* New Mexico Board of Specialization Recognized Specialist in Real Estate Law

September 9, 2003

## CERTIFIED MAIL/RETURN RECEIPT REQUESTED

ConocoPhillips, Inc.  
10 Desta Drive, Suite 100W  
Midland, Texas 79705-4500

Re: New Mexico Oil Conservation Division Case No. \_\_\_\_\_; Application of  
Energen Resources Corporation to Expand Waterflood Project in the Langlie  
Mattix Seven Rivers Queen Grayburg Pool, Lea County, New Mexico

Dear Sir or Madam:

Please be advised that Energen Resources Corporation has filed an Application with the New Mexico Oil Conservation Division (NMOCD) seeking the issuance of an order authorizing the expansion of its Waterflood Project in the Langlie Mattix Seven Rivers Queen Grayburg Pool in Lea County, New Mexico. A copy of the Application is enclosed.

Energen Resources' Application is set for hearing before a Division Examiner at 8:15 a.m. on Thursday, October 23, 2003 at the NMOCD's offices located at 1220 South St. Francis Drive in Santa Fe, New Mexico. You have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

Very truly yours,

MILLER STRATVERT P.A.



J. Scott Hall

JSH/glb  
Enclosure

## LAW OFFICES

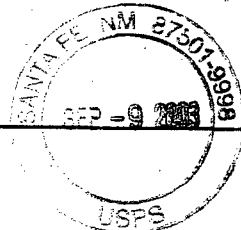
ALBUQUERQUE  
(505) 842-1950

FARMINGTON  
(505) 326-4521

LAS CRUCES  
(505) 523-2481

SANTA FE  
(505) 989-9614

7161 8863 9710 0000 1310

<b>RETURN RECEIPT SERVICE</b>	POSTAGE	\$0.60	<b>POSTMARK OR DATE</b> 
	RESTRICTED DELIVERY FEE	\$0.00	
	CERTIFIED FEE	\$2.30	
	RETURN RECEIPT FEE	\$1.75	
<b>SENT TO:</b>		<b>TOTAL POSTAGE AND FEE</b>	<b>\$4.65</b>
9/9/2003 3:54 PM		<b>Code:</b> <b>File:</b> <b>Grace Petroleum</b> <b>Post Office Drawer 2358</b> <b>Midland, Texas 79702</b>	

PS FORM 3800



**RECEIPT FOR CERTIFIED MAIL**  
 NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 (SEE OTHER SIDE)

<b>SENDER:</b> • Complete items 1, 2 and 3. • Indicate if restricted delivery is desired. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return receipt Fee will provide you the signature of the person delivered to and the date of delivery.		I also wish to receive the following service (for an extra fee): <input type="checkbox"/> <b>Restricted Delivery</b> Consult postmaster for fee.	
<b>1. Article Addressed to:</b>  <b>Grace Petroleum</b> <b>Post Office Drawer 2358</b> <b>Midland, Texas 79702</b>  9/9/2003 3:54 PM		<b>2. Article Number</b>  7161 8863 9710 0000 1310	
<b>Received By: (Print Name)</b> <i>Ch Sloan</i>		<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>CERTIFIED</b> <b>Date of Delivery</b>	
<b>Signature - (Addressee or Agent)</b> <i>Ch Sloan</i>		<b>Enter delivery address if different than item 1.</b>	

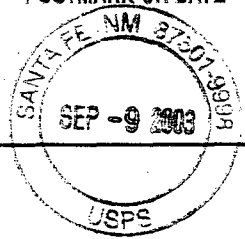
PS Form 3811

ode: File:

**DOMESTIC RETURN RECEIPT**

. . . . .

7161 8863 9710 0000 1334

<b>RETURN RECEIPT SERVICE</b>	POSTAGE	<b>\$0.60</b>	<b>POSTMARK OR DATE</b> 
	RESTRICTED DELIVERY FEE	<b>\$0.00</b>	
	CERTIFIED FEE	<b>\$2.30</b>	
	RETURN RECEIPT FEE	<b>\$1.75</b>	
<b>SENT TO:</b>		<b>TOTAL POSTAGE AND FEE</b>	<b>\$4.65</b>
9/9/2003 4:01 PM		Code: File:	
<b>Doyle Hartman</b> <b>Post Office Drawer 10426</b> <b>Midland, Texas 79701</b>			

PS FORM 3800



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**INSTRUCTIONS:**  
 • Complete items 1, 2 and 3.  
 • Indicate if restricted delivery is desired.  
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 • The Return receipt Fee will provide you the signature of the person delivered to and the date of delivery.

I also wish to receive the following service (for an extra fee):

☐ **Restricted Delivery**

Consult postmaster for fee.

1. Article Addressed to:

**Doyle Hartman**  
**Post Office Drawer 10426**  
**Midland, Texas 79701**

9/9/2003 4:01 PM

Received By: (Print Name)

*Eva Allison*

Signature - (Addressee or Agent)

*Eva Allison*

2. Article Number

7161 8863 9710 0000 1334

3. Service Type ☒ **CERTIFIED**

Date of Delivery

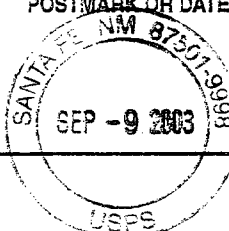
Enter delivery address if different than item 1.

PS Form 3811

**DOMESTIC RETURN RECEIPT**

Code: File:

7161 8863 9710 0000 1341

<b>RETURN RECEIPT SERVICE</b>	POSTAGE	\$0.60	<b>POSTMARK OR DATE</b> 
	RESTRICTED DELIVERY FEE	\$0.00	
	CERTIFIED FEE	\$2.30	
	RETURN RECEIPT FEE	\$1.75	
<b>SENT TO:</b>		TOTAL POSTAGE AND FEE	\$4.65
9/9/2003 4:01 PM		Code: File:	
<b>Clayton Williams Energy</b> <b>Six Desta Drive, Suite 3000</b> <b>Midland, Texas 79705</b>			

PS FORM 3800



**RECEIPT FOR CERTIFIED MAIL**  
 NO INSURANCE COVERAGE PROVIDED  
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☐ **Restricted Delivery**

Consult postmaster for fee.

1. Article Addressed to:

**Clayton Williams Energy**  
**Six Desta Drive, Suite 3000**  
**Midland, Texas 79705**

9/9/2003 4:01 PM

Received By: (Print Name)

*Linda Jacobus*

Signature - (Addressee or Agent)

*L. Jacobus*

2. Article Number

7161 8863 9710 0000 1341

3. Service Type ☒ **CERTIFIED**

Date of Delivery

9-11-03

Enter delivery address if different than item 1.

PS Form 3811

**DOMESTIC RETURN RECEIPT**

ode: File:

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7161 8863 9710 0000 1358

<b>RETURN RECEIPT SERVICE</b>	POSTAGE	<b>\$0.60</b>	POSTMARK OR DATE  SANTA FE NM 87501-9398 SEP -9 2003 USPS
	RESTRICTED DELIVERY FEE	<b>\$0.00</b>	
	CERTIFIED FEE	<b>\$2.30</b>	
	RETURN RECEIPT FEE	<b>\$1.75</b>	
<b>SENT TO:</b>		<b>TOTAL POSTAGE AND FEE</b>	<b>\$4.65</b>
9/9/2003 4:08 PM		Code: File:	
<b>Gruy Petroleum Management</b> <b>Post Office Box 14097</b> <b>Irving, Texas 75014</b>			

PS FORM 3800



**RECEIPT FOR CERTIFIED MAIL**  
 NO INSURANCE COVERAGE PROVIDED  
 NOT FOR INTERNATIONAL MAIL  
 (SEE OTHER SIDE)

**SENDER:**

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- Indicate if restricted delivery is desired.
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I also wish to receive the following service (for an extra fee):

☐ **Restricted Delivery**

Consult postmaster for fee.

**1. Article Addressed to:**

**Gruy Petroleum Management**  
**Post Office Box 14097**  
**Irving, Texas 75014**

9/9/2003 4:08 PM

Received By: (Print Name)

*RUDY MADRID*

Signature - (Addressee or Agent)

*Rudy Madrid*

PS Form 3811

ode: File:

**2. Article Number**

7161 8863 9710 0000 1358

**3. Service Type** ☒ **CERTIFIED**

Date of Delivery

9-15-03

Enter delivery address  
if different than item 1.

**DOMESTIC RETURN RECEIPT**

.. . . .

59ET 0000 0766 6988 1911

RETURN RECEIPT SERVICE	POSTAGE	\$0.60	POSTMARK OR DATE SEP -9 2003 USPS
	RESTRICTED DELIVERY FEE	\$0.00	
	CERTIFIED FEE	\$2.30	
	RETURN RECEIPT FEE	\$1.75	
SENT TO:		TOTAL POSTAGE AND FEE	\$4.65
9/9/2003 4:09 PM		Code: File:	
<b>Arco Permian</b> <b>Post Office Box 1710</b> <b>Hobbs, New Mexico 88240</b>			

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**RECEIPT FOR CERTIFIED MAIL**  
NO INSURANCE COVERAGE PROVIDED  
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**MILLER STRATVERT**

PROFESSIONAL MAIL  
 1ST CLASS PERMIT NO. 1000  
 HOUSTON, TEXAS 77201-1000

7161 8863 9710 0000 1365

RETURN RECEIPT REQUESTED

**CERTIFIED MAIL**

**Arco Permian**  
**Post Office Box 1710**  
**Hobbs, NM 88240**

9-61  
 12-10-03  
 204 7300  
 10/1/03

**NOT DELIVERABLE AS  
 ADDRESSED-UNABLE  
 TO FORWARD**

1ST NOTICE  
 2ND NOTICE  
 RETURN

SEP  
 MILLER

7161 8863 9710 0000 1402

RETURN RECEIPT SERVICE	POSTAGE	\$0.60	POSTMARK ON DATE SEP -9 2003 USPS
	RESTRICTED DELIVERY FEE	\$0.00	
	CERTIFIED FEE	\$2.30	
	RETURN RECEIPT FEE	\$1.75	
SENT TO:		TOTAL POSTAGE AND FEE	\$4.65
9/9/2003 4:11 PM		Code: File:	
Rhombus Operating 200 North Loraine, Suite 1270 Midland, Texas 79701			

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MILLER STRATVERT

PROFESSIONAL ASSOCIATION

797 09/25/03 21:35

7161 8863 9710 0000 1402

RETURN RECEIPT REQUESTED

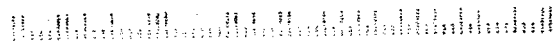
**CERTIFIED MAIL**

Rhombus Operating  
200 North Loraine, Suite 1270  
Midland, Texas 79701

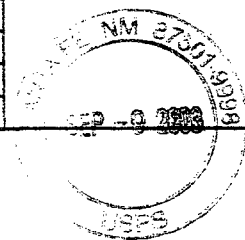
NOTICE  
NOTICE  
NOTICE

NOT DELIVERABLE  
AS ADDRESSEE  
RETURN TO FORWARD

9-11-03



7161 8863 9710 0000 1303

<b>RETURN RECEIPT SERVICE</b>	POSTAGE	\$0.60	<b>POSTMARK OR DATE</b> 
	RESTRICTED DELIVERY FEE	\$0.00	
	CERTIFIED FEE	\$2.30	
	RETURN RECEIPT FEE	\$1.75	
	TOTAL POSTAGE AND FEE	\$4.65	
<b>SENT TO:</b> 9/9/2003 3:51 PM Code: File: <b>ConocoPhillips, Inc.</b> <b>10 Desta Drive, Suite 100W</b> <b>Midland, Texas 79705-4500</b>			

PS FORM 3800



**RECEIPT FOR CERTIFIED MAIL**  
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<b>1. Article Addressed to:</b>  <b>ConocoPhillips, Inc.</b> <b>10 Desta Drive, Suite 100W</b> <b>Midland, Texas 79705-4500</b>  9/9/2003 3:51 PM		<b>2. Article Number</b> 7161 8863 9710 0000 1303	
<b>Received By: (Print Name)</b> <i>Gay Thomas</i>		<b>3. Service Type</b> <input checked="" type="checkbox"/> <b>CERTIFIED</b>	
<b>Signature - (Addressee or Agent)</b> <i>Gay Thomas</i>		<b>Date of Delivery</b> 9/15/03 97	
		<b>Enter delivery address if different than item 1.</b>	

PS Form 3811

to:

**DOMESTIC RETURN RECEIPT**

• • • • •

# MILLER STRATVEERT

PROFESSIONAL ASSOCIATION

150 WASHINGTON AVE., SUITE 300  
P.O. BOX 1986 (87504-1986)  
SANTA FE, NM 87501

7161 8863 9710 0000 1396

RETURN RECEIPT REQUESTED

**CERTIFIED MAIL**

HCW Exploration  
Post Office Box 10585  
Midland, Texas 79702

**NOT KNOWN**

DESPD TX 752 09-26-03 23-08

9-18

## RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL  
(SEE OTHER SIDE)

UNITED STATES  
POSTAL SERVICE

POSTAGE	\$0.60	POSTMARK OR DATE	SEP 9 2003
INSURANCE DELIVERY FEE	\$0.00		
CERTIFIED FEE	\$2.30		
RETURN RECEIPT FEE	\$1.75		
TOTAL POSTAGE AND FEE	\$4.65		

Code: 9/9/2003  
File: 4:11 PM

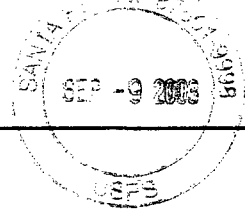
**HCW Exploration**  
**Post Office Box 10585**  
**Midland, Texas 79702**

9/9/2003 4:11 PM

DEFINITION  
RECEIPT  
SERVICE  
CERTIFIED

7161 8863 9710 0000 1396

7161 8863 9710 0000 1419

<b>RETURN RECEIPT SERVICE</b>	POSTAGE	\$0.60	<b>POSTMARK-OR DATE</b> 
	RESTRICTED DELIVERY FEE	\$0.00	
	CERTIFIED FEE	\$2.30	
	RETURN RECEIPT FEE	\$1.75	
	<b>SENT TO:</b>	TOTAL POSTAGE AND FEE	
9/9/2003 4:12 PM Code: File: <b>Roca Petroleum</b> <b>Post Office Box 10139</b> <b>Midland, Texas 79702</b>			

PS FORM 3800



**RECEIPT FOR CERTIFIED MAIL**  
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1. Article Addressed to:  <b>Roca Petroleum</b> <b>Post Office Box 10139</b> <b>Midland, Texas 79702</b>		2. Article Number 7161 8863 9710 0000 1419	
9/9/2003 4:12 PM Received By: (Print Name) <i>F. Bartol</i>		3. Service Type <input checked="" type="checkbox"/> <b>CERTIFIED</b> Date of Delivery 9-12-03	
Signature - (Addressee or Agent) <i>F. Bartol</i>		Enter delivery address if different than item 1. 10139	

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**DOMESTIC RETURN RECEIPT**

nd: File:

7161 8863 9710 0000 1327

<b>RETURN RECEIPT SERVICE</b>	POSTAGE	\$0.60	<b>POSTMARK OR DATE</b>  SANTA FE NM 87501-9900 SEP - 9 2003 USPS
	RESTRICTED DELIVERY FEE	\$0.00	
	CERTIFIED FEE	\$2.30	
	RETURN RECEIPT FEE	\$1.75	
<b>SENT TO:</b>		TOTAL POSTAGE AND FEE	\$4.65
9/9/2003 3:55 PM		Code: File:	
<b>Raptor Resources, Inc.</b> <b>Post Office Drawer 2358</b> <b>Midland, Texas 79702</b>			

PS FORM 3800

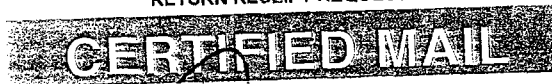


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 (SEE OTHER SIDE)



7161 8863 9710 0000 1327

RETURN RECEIPT REQUESTED



**Raptor Resources, Inc.**  
**Post Office Drawer 2358**  
**Midland, Texas 79702**

*not for box 2358*

834EPR 797 09/25/03 27

*9/2*

79702-22