





August 30, 2013

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED****To: POOLED PARTIES****Re: Application of COG Operating LLC for non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico: Gunner 5 Fee Com 1H Well**

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. As an interest owner subject to this pooling application, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 a.m. on September 19, 2013. 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 1208.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.

Questions concerning this application should be directed to Michael Wallace, Landman at COG Operating LLC (432) 221-0465.

Sincerely,

Michael H. Feldewert

**EXHIBIT A  
COG OPERATING LLC  
GUNNER 5 FEE COM 1H**

**POOLED PARTIES:**

Moose Production Co.  
801 Travis St., Suite 2020  
Houston, TX 77002

Warren J. Bates Estate  
P. O. Box 1357  
Ada, OK 74821

Warren J. Bates Estate  
1436 Lakehurst Dr.  
Ada OK 74820

Personal Representative of the  
Estate of Warren J. Bates  
Duard B. Thomas  
P.O. Box 369  
Ada, OK 74821

Ross Duncan Properties, LLC  
P.O. Box 647  
Artesia, NM 88211

*Inland  
Title*

Devon Energy Production Company LP  
Devon Energy Center Tower, OKDEC30.314  
333 W. Sheridan Avenue  
Oklahoma City, OK 73102-5015  
Attn: Carri Allen

Inland Title Co.  
C/O Germaine R. Chappelle  
Gallagher & Kennedy, P.A.  
1233 Paseo de Peralta  
Santa Fe, NM 87501

Chevron U.S.A. Inc.  
Attn: NOJV Group  
P. O. Box 3200  
Houston, TX 77252

Argent Properties Services, LLC  
500 East Reynolds Dr.  
Ruston, LA 71270  
Attn: Matt P. Barham

Peder Monsen *file*  
515 Houston Ave.  
Houston, TX 77007-7706

Fay Bel Monsen *agent*  
515 Houston Ave.  
Houston, TX 77007-7706

EOG Resources, Inc.  
5509 Champions Dr.  
Midland, TX 79706  
Attn: Patrick Tower

Marc T. Wray  
4 Serpentine Court  
Savenoaka, Kent TN 113 XR  
United Kingdom

Marc T Wray Trust 2008  
520 Madison, Ave  
NY, NY 10022

Yates Brothers  
105 S. 4th St.  
Artesia, NM 88210  
Attn: Jim Ball

Andrew Wray  
3406 Shadow Springs Ct.  
Houston, TX 77082-8302

Sugarberry Oil & Gas Corp.  
5950 Cedar Springs Rd.  
Suite 230  
Dallas, TX 75235-6803  
Attn: Sue Raby

Chesapeake Exploration, LLC  
P. O. Box 18496  
Oklahoma City, OK 73154

Argent Properties Services, LLC  
500 East Reynolds Dr.  
Ruston, LA 71270  
Attn: Matt P. Barham

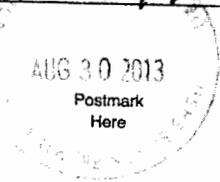
7006 0100 0005 5770 6945

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Sent To: Marc T Wray Trust 2008  
 Street, or PO: 520 Madison, Ave  
 City, St: NY, NY 10022

PS For: \_\_\_\_\_ Instructions: \_\_\_\_\_

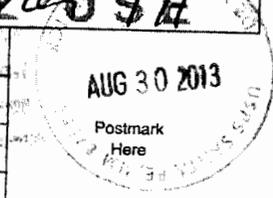
7006 0100 0005 5770 6891

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Sent To: EOG Resources, Inc.  
 Street, or PO: 5509 Champions Dr.  
 City: Midland, TX 79706  
 Attn: Patrick Tower

PS 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:

EOG Resources, Inc.  
 5509 Champions Dr.  
 Midland, TX 79706  
 Attn: Patrick Tower

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *x Robert Force*  Agent  Addressee

B. Received by (Printed Name): *R. Force* C. Date of Delivery: *9-4-13*

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

2. 7006 0100 0005 5770 6891

7006 0100 0005 5770 6938

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Postage	\$	66
Certified Fee		3.10
Return Receipt Fee (Endorsement Required)		2.55
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	6.31



Sent to: Argent Properties Services, LLC  
 Street or PO: 500 East Reynolds Dr.  
 City: Ruston, LA 71270  
 Attn: Matt P. Barham

PS 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:

Argent Properties Services, LLC  
 500 East Reynolds Dr.  
 Ruston, LA 71270  
 Attn: Matt P. Barham

2. Article Number (Transit) 7006 0100 0005 5770 6938

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]*  Agent  Addressee

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: *9/11/13*

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

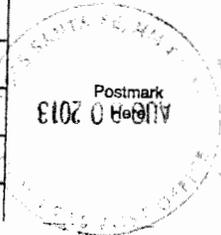
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Postage	\$	66
Certified Fee		3.10
Return Receipt Fee (Endorsement Required)		2.55
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	6.31



Sent to: Chesapeake Exploration, LLC  
 Street or PO: P. O. Box 18496  
 City: Oklahoma City, OK 73154

PS 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:

Chesapeake Exploration, LLC  
 P. O. Box 18496  
 Oklahoma City, OK 73154

2. Article Number (Transit) 7006 0100 0005 5770 6914

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: RECEIVED  Agent  Addressee

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: *SEP 03 2013*

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below: MAIL ROOM 17

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

4. Restricted Delivery? (Extra Fee)  Yes

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Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>



**Sent To** Sugarberry Oil & Gas Corp.  
 5950 Cedar Springs Rd.  
**Street, or PO B** Suite 230  
**City, State** Dallas, TX 75235-6803  
**PS Form** Attn: Sue Raby

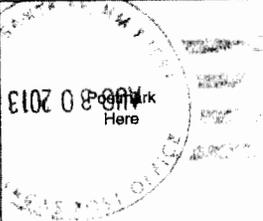
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Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>



**Sent To** Fay Bel Monsen  
 515 Houston Ave.  
**Street, or P** Houston, TX 77007-7706  
**PS F**

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>		<p>A. Signature            x Shannon Kern <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)            Shannon Kern</p> <p>C. Date of Delivery</p>	
<p>1. Article Addressed to:</p> <p>Fay Bel Monsen            515 Houston Ave.            Houston, TX 77007-7706</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No            If YES, enter delivery address below:</p>	
<p>2. Article Number            (Transfer from) 7006 0100 0005 5770 6969</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>	
		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	

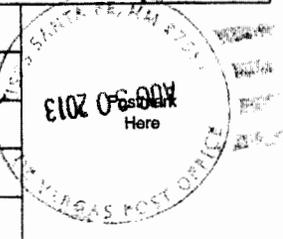
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Postage	\$ .66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31



Sent by \_\_\_\_\_  
 Street or PO \_\_\_\_\_  
 City \_\_\_\_\_  
 PS Form \_\_\_\_\_ Instructions \_\_\_\_\_

Andrew Wray  
3406 Shadow Springs Ct.  
Houston, TX 77082-8302

**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:

Andrew Wray  
3406 Shadow Springs Ct.  
Houston, TX 77082-8302

2. Article Number (Transfer from) 7006 0100 0005 5770 6952

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) Andrew Wray C. Date of Delivery 9/6/13

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

**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:

Yates Brothers  
105 S. 4th St.  
Artesia, NM 88210  
Attn: Jim Ball

2. 7006 0100 0005 5770 6907

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  
 Addressee

B. Received by (Printed Name) Andrea Argee C. Date of Delivery 9/3/13

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

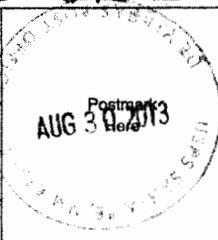
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Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31



Sent by \_\_\_\_\_  
 Street or PO \_\_\_\_\_  
 City \_\_\_\_\_  
 PS Form \_\_\_\_\_ Instructions \_\_\_\_\_

Yates Brothers  
105 S. 4th St.  
Artesia, NM 88210  
Attn: Jim Ball

7006 0100 0005 5770 6808

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Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>



Sent to: **Chevron U.S.A. Inc.**  
 Attn: NOJV Group  
 P. O. Box 3200  
 Houston, TX 77252

PS Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

**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:

**Chevron U.S.A. Inc.**  
 Attn: NOJV Group  
 P. O. Box 3200  
 Houston, TX 77252

2. Article Number: **7006 0100 0005 5770 6808**  
 (Transfer from service)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]*  Agent  Addressee

B. Received by (Printed Name): *[Signature]* C. Date of Delivery: **SEP 05 2013**

D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below: **SEP 05 2013**

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

4. Restricted Delivery? (Extra Fee)  Yes

7006 0100 0005 5770 7058

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Postage	\$ 66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>



Sent to: **Inland Title Co.**  
 C/O Germaine R. Chappelle  
 Gallagher & Kennedy, P.A.  
 1233 Paseo de Peralta  
 Santa Fe, NM 87501

PS Instructions

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

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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:

**Inland Title Co.**  
 C/O Germaine R. Chappelle  
 Gallagher & Kennedy, P.A.  
 1233 Paseo de Peralta  
 Santa Fe, NM 87501

2. Article Number: **7006 0100 0005 5770 7058**  
 (Transfer from service)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]*  Agent  Addressee

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

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 0100 0005 5770 6822

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Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31



Sent \_\_\_\_\_  
 Street or P.O. \_\_\_\_\_  
 City \_\_\_\_\_  
 PS Instructions \_\_\_\_\_

Peder Monsen  
515 Houston Ave.  
Houston, TX 77007-7706

**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Peder Monsen  
515 Houston Ave.  
Houston, TX 77007-7706

2. Article Number (Transfer from serial number) **7006 0100 0005 5770 6822**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Shannon Lerner*  Agent  Addressee

B. Received by (Printed Name) *Shannon Lerner* C. Date of Delivery \_\_\_\_\_

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

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31



Sent \_\_\_\_\_  
 Street or P.O. \_\_\_\_\_  
 City \_\_\_\_\_  
 PS Instructions \_\_\_\_\_

Argent Properties Services, LLC  
500 East Reynolds Dr.  
Ruston, LA 71270  
Attn: Matt P. Barham

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

1. Article Addressed to:

Argent Properties Services, LLC  
500 East Reynolds Dr.  
Ruston, LA 71270  
Attn: Matt P. Barham

2. Article Number (Transfer from serial number) **7006 0100 0005 5770 6815**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Sonya Sims*  Agent  Addressee

B. Received by (Printed Name) *Sonya Sims* C. Date of Delivery *9/14/13*

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.

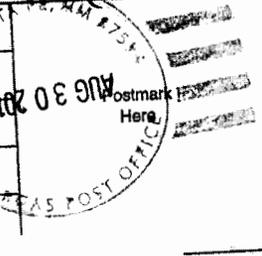
4. Restricted Delivery? (Extra Fee)  Yes

7006 0100 0005 5770 7805

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Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 6.31	

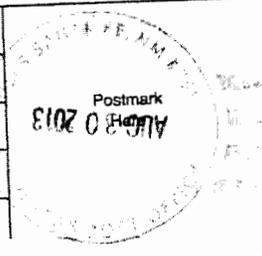
Semi Marc T. Wray  
 Street or P.O. Box 4 Serpentine Court  
 City, State, ZIP+4® Savenoaka, Kent TN 113 XR  
 PS Form Instructions

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Return Receipt Fee (Endorsement Required)	2.55	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 6.31	

Moose Production Co.  
 801 Travis St., Suite 2020  
 Houston, TX 77002  
 PS Form Instructions

**SENDER: COMPLETE THIS SECTION** | **COMPLETE 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.

Signature   Agent  Addressee

B. Receiver's Printed Name: M. McLaughlin C. Date of Delivery

1. Article Addressed to:

Moose Production Co.  
 801 Travis St., Suite 2020  
 Houston, TX 77002

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

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

4. Restricted Delivery? (Extra Fee)  Yes

2. Article 1 (Transit) 7006 0100 0005 5770 7331

7006 0100 0005 5770 7829

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**OFFICIAL USE**

Postage	\$ 66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>



Ross Duncan Properties, LLC  
 P.O. Box 647  
 Artesia, NM 88211

or 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:

Ross Duncan Properties, LLC  
 P.O. Box 647  
 Artesia, NM 88211

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee  
*Kandice Duncan*
- B. Received by (Printed Name)  Agent  Addressee  
*Kandice Duncan*
- C. Date of Delivery
- D. Is delivery address different from item 1?  Yes  No  
 If YES, enter delivery address below:

Box 647

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

4. Restricted Delivery? (Extra Fee)  Yes

2. Article (Trans)

7006 0100 0005 5770 7829

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

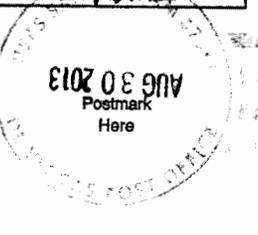
7006 0100 0005 5770 7843

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**OFFICIAL USE**

Postage	\$ 66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>



Personal Representative of the  
 Estate of Warren J. Bates  
 Duard B. Thomas  
 P.O. Box 369  
 Ada, OK 74821

or 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:

Personal Representative of the  
 Estate of Warren J. Bates  
 Duard B. Thomas  
 P.O. Box 369  
 Ada, OK 74821

**COMPLETE THIS SECTION ON DELIVERY**

- A. Signature  Agent  Addressee  
*Duard Thomas*
- B. Received by (Printed Name)  Agent  Addressee  
*Duard Thomas*
- C. Date of Delivery  
 9-5-13
- 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

2. Article (Trans)

7006 0100 0005 5770 7843

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 5770 7812

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**OFFICIAL USE**

Postage	\$ 66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 631</b>



**Sent** Devon Energy Production Company LP  
 Devon Energy Center Tower, OKDEC30.314  
 333 W. Sheridan Avenue  
 Oklahoma City, OK 73102-5015  
 Attn: Carri Allen

**PS Form Instructions**

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	<p>A. Signature  <i>X. Carri Allen</i></p> <p>B. Received by (Printed Name)  <i>Carri Allen</i></p> <p>C. Date of Delivery  <i>SEP 3 2013</i></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No        If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p>Devon Energy Production Company LP          Devon Energy Center Tower, OKDEC30.314          333 W. Sheridan Avenue          Oklahoma City, OK 73102-5015          Attn: Carri Allen</p>	<p>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.</p>
<p>2. Article Number          (Transfer fee) <b>7006 0100 0005 5770 7812</b></p>	<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>

7006 0100 0005 5770 7836

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Postage	\$ -66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 631</b>



**Sent** Warren J. Bates Estate  
 P. O. Box 1357  
 Ada, OK 74821

**PS Form Instructions**

**Returned**

7006 0100 0005 5720 6884

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Postage	\$ -66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>



Se Warren J. Bates Estate  
 St 1436 Lakehurst Dr.  
 Ci Ada OK 74820  
 PS Instructions

Returned



August 30, 2013

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED****TO: OFFSET OWNERS****Re: Application of COG Operating LLC for non-standard spacing and proration unit and compulsory pooling, Lea County, New Mexico: Gunner 5 Fee Com 1H Well**

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation. As a mineral lessee or operator in the offsetting properties, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on September 19, 2013. 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 1208.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.

Questions concerning this application should be directed to Michael Wallace, Landman at COG Operating LLC (432) 221-0465.

Sincerely,

Michael H. Feldewert

**EXHIBIT A  
COG OPERATING LLC  
GUNNER 5 FEE COM 1H**

**OFFSET PARTIES:**

Myco Industries, Inc.  
105 South 4th Street  
Artesia, New Mexico 88210

ConocoPhillips Company  
P.O. Box 7500  
Bartlesville, OK 74005

Yates Petroleum Corporation  
105 South 4th Street  
Artesia, New Mexico 88210

OXY Y-1 Company  
P.O. Box 27570  
Houston, Texas 77227

ABO Petroleum Corporation  
105 South 4th Street  
Artesia, New Mexico 88210

7006 0100 0005 5770 7065

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**OFFICIAL USE**

Postage	\$ -66	
Certified Fee	3.10	
Return Receipt Fee (Endorsement Required)	2.55	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 6.31	

**Sent To**  
 ABO Petroleum Corporation  
 105 South 4th Street  
 Artesia, New Mexico 88210

PS Form

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:

ABO Petroleum Corporation  
 105 South 4th Street  
 Artesia, New Mexico 88210

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Andrea Arge*  Agent  Addressee

B. Received by (Printed Name)  
 Andrea Arge

C. Date of Delivery  
 9/3/13

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 0100 0005 5770 7065

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 5770 6853

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**OFFICIAL USE**

Postage	\$ -66	
Certified Fee	3.10	
Return Receipt Fee (Endorsement Required)	2.55	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 6.31	

**Sent To**  
 ConocoPhillips Company  
 P.O. Box 7500  
 Bartlesville, OK 74005

PS Form

Options

**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:

ConocoPhillips Company  
 P.O. Box 7500  
 Bartlesville, OK 74005

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Phillips 66*  Agent  Addressee

B. Received by (Printed Name)  
 Phillips 66

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

2. Article N  
 (Transfer)

7006 0100 0005 5770 6853

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 5770 6860

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**OFFICIAL USE**

Postage	\$ 66
Certified Fee	31.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>

Postmark Here  
 AUG 30 2013

Sent To: Myco Industries, Inc.  
 Street, or P.O.: 105 South 4th Street  
 City, S: Artesia, New Mexico 88210

PS Form 3811, February 2004

**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:  
 Myco Industries, Inc.  
 105 South 4th Street  
 Artesia, New Mexico 88210

2. Article Number (Transfer from): 7006 0100 0005 5770 6860

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

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**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]*  Agent  Addressee

B. Received by (Printed Name): Andrea Argee C. Date of Delivery: 9/3/13

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 0100 0005 5770 6846

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For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$ 66
Certified Fee	31.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 6.31</b>

Postmark Here  
 AUG 30 2013

Sent To: OXY Y-1 Company  
 Street, or P.O.: P.O. Box 27570  
 City: Houston, Texas 77227

PS Form 3811, February 2004

**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:  
 OXY Y-1 Company  
 P.O. Box 27570  
 Houston, Texas 77227

2. Article Number (Transfer from): 7006 0100 0005 5770 6846

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

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**COMPLETE THIS SECTION ON DELIVERY**

A. Signature: *[Signature]*  Agent  Addressee

B. Received by (Printed Name): J. BOYD C. Date of Delivery: 9-9-13

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 0100 0005 5770 6839

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**OFFICIAL USE**

Postage	\$ 66	
Certified Fee	3.10	
Return Receipt Fee (Endorsement Required)	2.55	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 6.31	

Sent To: Yates Petroleum Corporation  
 Street, or PO: 105 South 4th Street  
 City, S: Artesia, New Mexico 88210

PS Form 3811, February 2004

**SENDER: COMPLETE THIS SECTION**

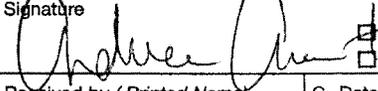
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Yates Petroleum Corporation  
 105 South 4th Street  
 Artesia, New Mexico 88210

2. Article Numl 7006 0100 0005 5770 6839  
 (transfer from)

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  Agent  Addressee  
 X   
 B. Received by (Printed Name) A. Argee C. Date of Delivery 9-3-13

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