

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

**APPLICATION OF CIMAREX ENERGY CO. OF
COLORADO FOR COMPULSORY POOLING, EDDY
COUNTY, NEW MEXICO.**


Case No. 14,771

AFFIDAVIT OF NOTICE

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

James Bruce, being duly sworn upon his oath, deposes and states:

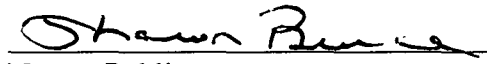
1. I am over the age of 18, and have personal knowledge of the matters stated herein.
2. I am an attorney for Cimarex Energy Co. of Colorado.
3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the application filed herein.
4. Notice of the application was provided to the interest owners, at their correct addresses, by certified mail. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.
5. Applicant has complied with the notice provisions of Division Rules NMAC 19.15.4.9 and 19.15.4.12.C.



James Bruce

SUBSCRIBED AND SWORN TO before me this 7th day of May , 2012 by James Bruce.

My Commission Expires: 3/14/13



Notary Public

Oil Conservation Division
Case No. _____
Exhibit No. 2

JAMES BRUCE
ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

369 MONTEZUMA, NO. 213
SANTA FE, NEW MEXICO 87501

(505) 982-2043 (Phone)
(505) 660-6612 (Cell)
(505) 982-2151 (Fax)

jamesbruc@aol.com

November 9, 2011

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

To: Persons on Exhibit 1

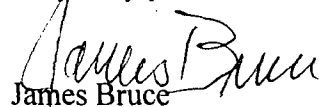
Ladies and gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed with the New Mexico Oil Conservation Division by Cimarex Energy Co., regarding two wells in the W $\frac{1}{2}$ SW $\frac{1}{4}$ of Section 1, Township 19 South, Range 25 East, N.M.P.M., Eddy County, New Mexico.

This matter is scheduled for hearing at 8:15 a.m. on Thursday, December 1, 2011, in Porter Hall at the Division's offices at 1220 South St. 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 contesting the matter at a later date.

A party appearing in a Division case is required by Division Rules to file a Pre-Hearing Statement no later than Wednesday, November 23, 2011. This statement must be filed with the Division's Santa Fe office at the above address, and should include: The names of the party and its attorney; a concise statement of the case; the names of the 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 need to be resolved prior to the hearing. The Pre-Hearing Statement must also be provided to the undersigned.

Very truly yours,


James Bruce

Attorney for Cimarex Energy Co.

EXHIBIT A

Exhibit 1

Concho Resources Inc.
Concho Oil & Gas LLC
COG Operating LLC
Suite 100
550 West Texas
Midland, Texas 79701

Yates Petroleum Corporation
Abo Petroleum Corporation
104 South Fourth Street
Artesia, New Mexico 88210

OXY Y-1 Company
Suite 110
5 Greenway Plaza
Houston, Texas 77046

Myco Industries, Inc.
P.O. Box 840
Artesia, New Mexico 88211

Marshall & Winston, Inc.
P.O. Box 50880
Midland, Texas 79710

DMD, LLC
P.O. Box 300
Artesia, New Mexico 88211

7008 1140 0003 5864 4494

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HOUSTON TX 77046

| | |
|--|-----------------|
| Postage | \$ 0.44 |
| Certified Fee | \$2.85 |
| Return Receipt Fee (Endorsement Required) | \$2.30 |
| Restricted Delivery Fee (Endorsement Required) | \$0.00 |
| Total Postage & Fees | \$ 45.59 |

OFFICIAL USE

Sent To: OXY Y-1 Company
 Suite 110
 5 Greenway Plaza
 Houston, Texas 77046

PS Form 3800, August 2006 See Reverse 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:

Mycos Industries, Inc.
 P.O. Box 840
 Artesia, New Mexico 88211

2. Article Number

(Transfer from service label)

PS Form 3811, February 2004

7008 1140 0003 5864 4494

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
☒ Addressee

B. Received by (Printed Name)
 Jennifer Miller

C. Date of Delivery
 11/10/2011

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

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:

OXY Y-1 Company
 Suite 110
 5 Greenway Plaza
 Houston, Texas 77046

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
☒ Addressee

B. Received by (Printed Name)
 Jennifer Miller

C. Date of Delivery
 11/10/2011

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 Number

(Transfer from service label)

PS Form 3811, February 2004

7008 1140 0003 5864 4487

Domestic Return Receipt

102595-02-M-1540

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For delivery information visit our website at www.usps.com**ARTESIA NM 88211**

| | |
|--|-----------------|
| Postage | \$ 0.44 |
| Certified Fee | \$2.85 |
| Return Receipt Fee (Endorsement Required) | \$2.30 |
| Restricted Delivery Fee (Endorsement Required) | \$0.00 |
| Total Postage & Fees | \$ 45.59 |

OFFICIAL USE

Sent To: Mycos Industries, Inc.
 P.O. Box 840
 Artesia, New Mexico 88211

PS Form 3800, August 2006 See Reverse for Instructions

7008 1140 0003 5864 4494

7008 1140 0003 5864 4500

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MIDLAND TX 79710

| | | |
|--|----|--------|
| Postage | \$ | \$0.44 |
| Certified Fee | | \$2.85 |
| Return Receipt Fee (Endorsement Required) | | \$2.30 |
| Restricted Delivery Fee (Endorsement Required) | | \$0.00 |
| Total Postage & Fees | \$ | \$5.59 |

Sent To: Marshall & Winston, Inc.
P.O. Box 50880
Midland, Texas 79710

PS Form 3800, August 2006 See Reverse 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:

Yates Petroleum Corporation
Abo Petroleum Corporation
104 South Fourth Street
Artesia, New Mexico 88210

2. Article Number

(Transfer from service label)

7008 1140 0003 5864 4470

PS Form 3811, February 2004

Domestic Return Receipt

CK MTC

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ 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

☒ 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:

Marshall & Winston, Inc.
P.O. Box 50880
Midland, Texas 79710

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent

☐ Addressee

B. Received by (Printed Name)

Kyndal Kidd

C. Date of Delivery

11/14/11

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 Number

(Transfer from service label)

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PS Form 3811, February 2004

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CK - MTC

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ARTESIA NM 88210

| | | |
|--|----|--------|
| Postage | \$ | \$0.44 |
| Certified Fee | | \$2.85 |
| Return Receipt Fee (Endorsement Required) | | \$2.30 |
| Restricted Delivery Fee (Endorsement Required) | | \$0.00 |
| Total Postage & Fees | \$ | \$5.59 |

Sent To: Yates Petroleum Corporation
Abo Petroleum Corporation
104 South Fourth Street
Artesia, New Mexico 88210

PS Form 3800, August 2006 See Reverse for Instructions

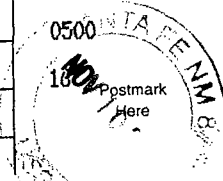
3944 4864 0000 0470 0002

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MIDLAND TX 79701

| | |
|---|---------|
| Postage | \$ 0.44 |
| Certified Fee | \$2.85 |
| Return Receipt Fee (Endorsement Required) | \$2.30 |
| Restricted Delivery Fee (Endorsement Required) | \$0.00 |



Total Postage & Fees: \$3.59
 Concho Resources Inc.
 Concho Oil & Gas LLC
 COG Operating LLC

11/10/2011

Sent To: Suite 100
 550 West Texas
 Street, Apt. No., or PO Box No. Midland, Texas 79701
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse 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:

Concho Resources Inc.
 Concho Oil & Gas LLC
 COG Operating LLC
 Suite 100
 550 West Texas
 Midland, Texas 79701

2. Article Number

(Transfer from service label)

7008 1140 0003 5864 4463

PS Form 3811, February 2004 (MT(2)) Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

ALEX MANUELA

C. Date of Delivery

11-18

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

102595-02-M-1540

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Manage Your Mail

Shop

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Track & Confirm

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STATUS OF YOUR ITEM

Delivered

DATE & TIME

November 12, 2011, 11:51 am

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ARTESIA NM 88211

| | |
|---|----------------|
| Postage | \$ 0.44 |
| Certified Fee | \$2.85 |
| Return Receipt Fee (Endorsement Required) | \$2.30 |
| Restricted Delivery Fee (Endorsement Required) | \$0.00 |
| Total Postage & Fees | \$ 5.59 |

0500
 16 Postmark Here
 NOV 10 2011

7008 1140 0003 5864 4517

Sent To DMD, LLC
 P.O. Box 300
 Street, Apt. No., or PO Box No. Artesia, New Mexico 88211
 City, State, ZIP+4

PS Form 3800, August 2006 See Reverse for Instructions