

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

**IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION FOR
THE PURPOSE OF CONSIDERING:**

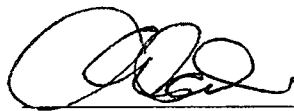
**APPLICATION OF COG OPERATING LLC
FOR A NON-STANDARD SPACING AND PRORATION
UNIT AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO**

CASE NO. 14861

AFFIDAVIT

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

Adam G. Rankin, attorney in fact and authorized representative of COG Operating LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application was provided under the notice letter and proof of receipt attached hereto.

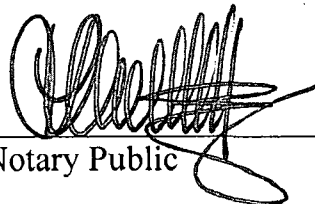


Adam G. Rankin

SUBSCRIBED AND SWORN to before me this 6th day of June 2012 by Adam G. Rankin.



**OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO**
My commission expires 01/14/15



Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 3
Submitted by:
COG OPERATING LLC
Hearing Date: June 7, 2012

EXHIBIT A
COG OPERATING LLC
STONEWALL 9 FEE 4H WELL

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

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

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

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

OGX Resources LLC
400 North Marienfeld Street
Suite 200
Midland, Texas 79701

P.J. Hannifin Family Trust
765 Santa Camela
Solana Beach, CA 92075

Wygocki Family Trust
721 Robins Road
Lansing, MI 78917

Elizabeth Ann Pitts, Trustee of the
McCormick Family Trusts, A&B
2705 Westwind Road
Las Cruces, New Mexico 88007

Nuevo Seis (96) Limited
Partnership
P.O. Box 2588
Roswell, New Mexico 88202



May 17, 2012

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED**TO: AFFECTED INTEREST OWNERS****Re: Application of COG Operating LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Stonewall 9 Fee 4H Well**

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division. This application has been set for hearing before a Division Examiner at 8:15 a.m. on June 7, 2012. 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 Sean Johnson at (432) 818-2230.

Sincerely,

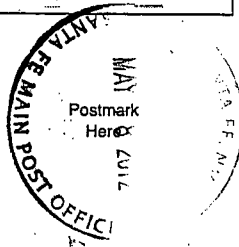
Adam G. Rankin

ATTORNEY FOR COG OPERATING LLC

7006 0100 0005 0625 9096

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information: AGR/COG
 STONEWALL 9 FEE 4H

Postage	\$ 1.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95



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

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
 105 South 4th Street
 Artesia, New Mexico 88210

2. Article Number:
 (Transfer from service label)

7006 0100 0005 0625 9096

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 0625 9096

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)
 For delivery information: AGR/COG
 STONEWALL 9 FEE 4H

Postage	\$ 1.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95



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

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:

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

2. Article Number:
 (Transfer from service label)

7006 0100 0005 0625 9089

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Chanderwal* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *Chanderwal* C. Date of Delivery *5-21-12*
 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

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Chanderwal* ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *Chanderwal* C. Date of Delivery *5-21-12*
 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 0625 9072

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **AGR/COG**
OFFICE STONEWALL 9 FEE 4H

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$5.95

Postmark Here
 MAY 18 2012
 SANTA FE, NM 87501

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

PS Form 3800, June 2002 See Reverse for Instructions.

SENDER: COMPLETE THIS SECTION **ON DELIVERY**

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 2. Print your name and address on the reverse so that we can return the card to you.
 3. 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

2. Article Number (Transfer from service label) 7006 0100 0005 0625 9072

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

A. Signature ☒ Agent ☐ Addressee
 x Clunderwood
 B. Received by (Printed Name) Clunderwood
 C. Date of Delivery 5-21-12
 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 0625 9065

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **AGR/COG**
OFFICE STONEWALL 9 FEE 4H

Postage	\$.65
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$5.95

Postmark Here
 MAY 18 2012
 SANTA FE, NM

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

for Instructions

SENDER: COMPLETE THIS SECTION **ON DELIVERY**

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

1. Article Addressed to:

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

2. Article Number (Transfer from service label) 7006 0100 0005 0625 9065

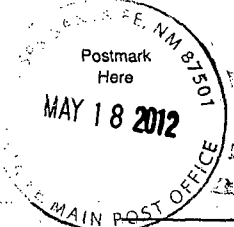
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

A. Signature ☒ Agent ☐ Addressee
 X [Signature]
 B. Received by (Printed Name) [Signature]
 C. Date of Delivery 5-21-12
 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 0625 9058

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Signature Required)	
For delivery information visit AGR/COG OFFICE STONEWALL 9 FEE 4H	
Postage \$.45
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95
	
OGX Resources LLC 400 North Marienfeld Street Suite 200 Midland, Texas 79701	
PS Form 3800, June 2002 See Reverse for Instructions	

SENDER: COMPLETE

- 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:

OGX Resources LLC
 400 North Marienfeld Street
 Suite 200
 Midland, Texas 79701

2. Article Number

(Transfer from service label)

7006 0100 0005 0625 9058

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RECEIVER: SECTION ON DELIVERY

Signature

[Signature] ☐ Agent ☐ Addressee
 B. Received by (Printed Name) *WICK* C. Date of Delivery *5-21-12*


- 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 0625 9041

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Signature Required)	
For delivery information visit AGR/COG OFFICE STONEWALL 9 FEE 4H	
Postage \$.45
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95
	
P.J. Hannifin Family Trust 765 Santa Camela Solona Beach, CA 92075	
PS Form 3800, June 2002 See Reverse for Instructions	

SENDER: COMPLETE

- 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:

P.J. Hannifin Family Trust
 765 Santa Camela
 Solona Beach, CA 92075

2. Article Number

(Transfer from service label)

7006 0100 0005 0625 9041

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RECEIVER: 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
 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 0626 5622

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **usps.com**
 AGR/COG
 STONEWALL 9 FEE 4H
OFFICE

Postage	\$ 4.5
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark
 MAY 18 2012
 SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Wygocki Family Trust
 721 Robins Road
 Lansing, MI 78917

PS Form 3800, June 2002 For Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Wygocki Family Trust
 721 Robins Road
 Lansing, MI 78917

2. Article Number (Transfer from service label)
 7006 0100 0005 0626 5622

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

RECIPIENT: COMPLETE THIS SECTION

A. Signature
 X Bill Wygocki

B. Received by (Printed Name)
 Bill Wygocki

C. Date of Delivery
 5-21-12

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

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

7006 0100 0005 0626 5615

U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT
 (Domestic Mail Only; No Insurance Coverage)
 For delivery information visit **usps.com**
 AGR/COG
 STONEWALL 9 FEE 4H
OFFICE

Postage	\$ 4.5
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95

Postmark
 MAY 18 2012
 SANTA FE, NM 87501
 SANTA FE MAIN POST OFFICE

Elizabeth Ann Pitts, Trustee of the
 McCormick Family Trusts, A&B
 2705 Westwind Road
 Las Cruces, New Mexico 88007

PS Form 3800, June 2002 For Instructions

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 Elizabeth Ann Pitts, Trustee of the
 McCormick Family Trusts, A&B
 2705 Westwind Road
 Las Cruces, New Mexico 88007

2. Article Number (Transfer from service label)
 7006 0100 0005 0626 5615

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

4. Restricted Delivery? (Extra Fee) ☐ Yes

RECIPIENT: COMPLETE THIS SECTION

A. Signature
 X Elizabeth Ann Pitts

B. Received by (Printed Name)
 Elizabeth Ann Pitts

C. Date of Delivery
 5/19/12

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

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

7006 0100 0005 0000 5000 9290 8095

**U.S. Postal Service™
CERTIFIED MAIL™ RECEIPT**

(Domestic Mail Only; No

For delivery information, visit

AGR/COG

STONEWALL 9 FEE 4H

OFFICE

Postage	\$.45
Certified Fee	2.95
Return Receipt Fee (Endorsement Required)	2.35
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 5.95



Nuevo Seis (96) Limited
Partnership
P.O. Box 2588
Roswell, New Mexico 88202

PS Form 3811, February 2004

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:

Nuevo Seis (96) Limited
Partnership
P.O. Box 2588
Roswell, New Mexico 88202

2. Article Number
(Transfer from service label)

7006 0100 0005 0626 5608

PS Form 3811, February 2004

Domestic Return Receipt

RECIPIENT: COMPLETE THIS SECTION

A. Signature

Patricia Stacy ☒ Agent ☐ Addressee

B. Received by (Printed Name)

Patricia Stacy C. Date of Delivery *5-22-12*

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