

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

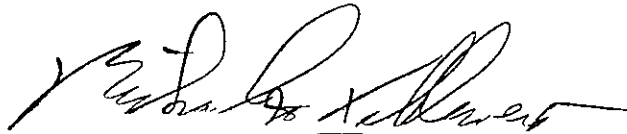
**IN THE MATTER OF THE APPLICATION
OF COG OPERATING LLC FOR A
NON-STANDARD SPACING AND PRORATION
UNIT AND COMPULSORY POOLING,
EDDY COUNTY, NEW MEXICO**

CASE NO. 15033

AFFIDAVIT

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

Michael H. Feldewert, 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.

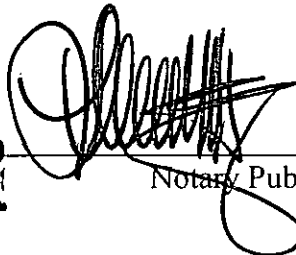


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 7th day of August 2013 by Michael H. Feldewert.



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



Notary Public

BEFORE THE OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Exhibit No. 7
Submitted by: **COG OPERATING LLC**
Hearing Date: August 8, 2013

HOLLAND & HART^{LLP}



Adam G. Rankin
Phone 505-988-4421
Fax 505-983-6043
agrarkin@hollandhart.com

July 19, 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; Eddy County, New Mexico
Lee "3" Fee 6H Well**

This letter is to advise you that COG Operating LLC has filed the enclosed application with the New Mexico Oil Conservation Division seeking an order creating a non-standard spacing unit comprised of the E/2 W/2 of Section 3, Township 19 South, Range 26 East, NMPM, Eddy County, New Mexico. 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 August 8, 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 Stuart Dirks, Senior Landman at COG Operating LLC (432) 685-4354.

Sincerely,

Adam G. Rankin

Holland & Hart LLP

Phone [505] 988-4421 Fax [505] 983-6043 www.hollandhart.com

110 North Guadalupe Suite 1 Santa Fe, NM 87501 Mailing Address P.O. Box 2208 Santa Fe, NM 87504-2208

Aspen Billings Boise Boulder Cheyenne Colorado Springs Denver Denver Tech Center Jackson Hole Salt Lake City Santa Fe Washington, D.C. ☎

7006 2760 0001 6376 1789

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
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
Bassett-Birney Oil Corp PO Box 127 Artesia, NM 88210"	
PS Form 3800, August 2006 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		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.		A. Signature X <i>Debra Zoller</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery	
1. Article Addressed to:		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
Bassett-Birney Oil Corp PO Box 127 Artesia, NM 88210"		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
(Transfer from service label)		7006 2760 0001 6376 1789	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 0625 4756

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
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
Descendents Trust created under The last Will and Testament of Peggy A. Yates, deceased 105 South Fourth Street Artesia, NM 88210-2118"	
PS Form 3811, February 2004 See Reverse for 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.		A. Signature X <i>J. Delgado</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee B. Received by (Printed Name) C. Date of Delivery <i>J. Delgado</i> 7-22-13	
1. Article Addressed to:		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
Descendents Trust created under The last Will and Testament of Peggy A. Yates, deceased 105 South Fourth Street Artesia, NM 88210-2118"		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
2. Article Number		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
(Transfer from service label)		7006 0100 0005 0625 4756	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

7006 0100 0005 0625 4763

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Postage	\$ 1.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31



Empire Energy LLC
 70 Riverside Drive
 Roswell, NM 88201"

PS Form 3800, June 2002

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X Susan M. Hinkle

B. Received by (Printed Name) Susan M. Hinkle 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

1. Article Addressed to:
 Empire Energy LLC
 70 Riverside Drive
 Roswell, NM 88201"

2. Article Number 7006 0100 0005 0625 4763
 (Transfer from service)

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

7006 0100 0005 0625 4770

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Postage	\$ 1.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31



John A. Yates
 105 South Fourth Street
 Artesia, NM 88210-2118"

PS Form 3800, June 2002

See Reverse for Instructions

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 X J. Delgado

B. Received by (Printed Name) J. Delgado C. Date of Delivery 7-22-13

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

1. Article Addressed to:
 John A. Yates
 105 South Fourth Street
 Artesia, NM 88210-2118"

2. Article Number 7006 0100 0005 0625 4770
 (Transfer from service)

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

7006 0100 0005 0625 4787

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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

Postmark: ARTESIA, NM JUL 19 2004

Los Chicos
 105 South Fourth Street
 Artesia, NM 88210"

PS Form 3800, June 2002 See Reverse for Instructions

7006 0100 0005 0625 4794

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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

Postmark: ROSWELL, NM JUL 19 2004

New State Gas LLC
 1213 West Third Street
 Roswell, NM 88201"

PS Form 3800, June 2002 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:

Los Chicos
 105 South Fourth Street
 Artesia, NM 88210"

2. Article Number

(Transfer from service label)

7006 0100 0005 0625 4787

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *J. Delgado* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) *J. Delgado* C. Date of Delivery *7-22-13*
- 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

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:

New State Gas LLC
 1213 West Third Street
 Roswell, NM 88201"

2. Article Number

(Transfer from service label)

7006 0100 0005 0625 4794

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Roman H. Lee* ☐ Agent ☐ Addressee
- B. Received by (Printed Name) *Roman H. Lee* 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 0625 4800

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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
Premier Natural Resources Inc One Summit Plaza 5727 South Lewis Ave, Suite 200 Tulsa, OK 74105	

Postmark Here
JUL 19 2013

for instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>Judy Laws</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name) C. Date of Delivery	
Premier Natural Resources Inc One Summit Plaza 5727 South Lewis Ave, Suite 200 Tulsa, OK 74105		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
2. Article Number (Transfer from service label)		3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
PS Form 3811, February 2004 Domestic Return Receipt		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7006 0100 0005 0625 4800		102595-02-M-1540	

7006 0100 0005 0625 4817

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided)	
For delivery information visit our website at www.usps.com	
OFFICIAL COPY	
Postage	\$.66
Certified Fee	3.10
Return Receipt Fee (Endorsement Required)	2.55
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 6.31
Richardson Min&Roy LLC PO Box 2423 Roswell, NM 88202-2423	

Postmark Here
JUL 19 2013

See reverse for instructions

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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. 		A. Signature X <i>Richardson Min&Roy LLC</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:		B. Received by (Printed Name) C. Date of Delivery	
Richardson Min&Roy LLC PO Box 2423 Roswell, NM 88202-2423		D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:	
2. Article Number (Transfer from service label)		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.	
PS Form 3811, February 2004 Domestic Return Receipt		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
7006 0100 0005 0625 4817		102595-02-M-1540	

7006 0100 0005 0625 4824

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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

Sacramento Partners Limited
 Partnership
 105 South Fourth Street
 Artesia, NM 88210

PS Form 3800, June 2002 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:

Sacramento Partners Limited
 Partnership
 105 South Fourth Street
 Artesia, NM 88210

2. Article Number (Transfer from service label) 7006 0100 0005 0625 4824

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature X *J. Delgado* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *J. Delgado* C. Date of Delivery *7-22-13*

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 0625 4831

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OFFICIAL LOG/SEE

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

Sharbro Oil, Ltd
 PO Box 840
 Artesia, NM 88210

PS Form 3800, June 2002 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:

Sharbro Oil, Ltd
 PO Box 840
 Artesia, NM 88210

2. Article Number (Transfer from service label) 7006 0100 0005 0625 4831

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

COMPLETE THIS SECTION ON DELIVERY

A. Signature X *Colby Hunter* ☐ Agent ☐ Addressee

B. Received by (Printed Name) *Colby Hunter* C. Date of Delivery *JUL 23 2013*

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

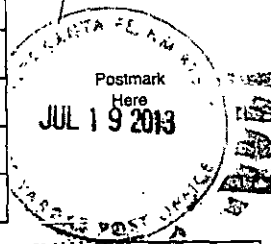
7006 0100 0005 0625 4640

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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



Trust Q created under the Last Will
 and Testament
 of Peggy A. Yates, deceased
 105 South Fourth Street
 Artesia, NM 88210-2118

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:

Trust Q created under the Last Will
 and Testament
 of Peggy A. Yates, deceased
 105 South Fourth Street
 Artesia, NM 88210-2118

2. Article Number

(Transfer from service label)

7006 0100 0005 0625 4640

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

J. Delgado

☒ Agent
☐ Addressee

B. Received by (Printed Name)

J. Delgado

C. Date of Delivery

7-22-13

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

102595-02-M-1540