

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

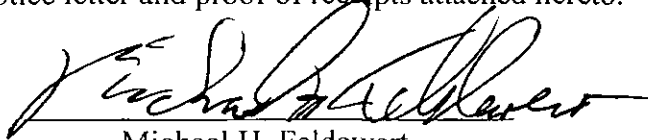
IN THE MATTER OF THE APPLICATION OF COG OPERATING LLC FOR A NON-STANDARD SPACING, AND PRORATION UNIT AND COMPULSORY POOLING, EDDY COUNTY, NEW MEXICO.

CASE NO. 15115

AFFIDAVIT

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

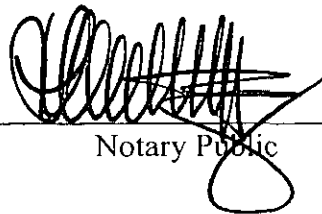
Michael H. Feldewert, attorney in fact and authorized representative of COG Operating LLC, the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application has been provided under the notice letter and proof of receipts attached hereto.


Michael H. Feldewert

SUBSCRIBED AND SWORN to before me this 30th day of April 2014 by Michael H. Feldewert.



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. 5
Submitted by: COG OPERATING LLC
Hearing Date: April 30, 2014

HOLLAND & HART



Michael H. Feldewert
Recognized Specialist in the Area of
Natural Resources - oil and gas law - New
Mexico Board of Legal Specialization
mfeldewert@hollandhart.com

March 28, 2014

VIA CERTIFIED MAIL
CERTIFIED RECEIPT REQUESTED

TO: ALL INTEREST OWNERS SUBJECT TO POOLING PROCEEDINGS

**Re: Application of COG Operating, LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Stonewall 9 Fee 2H Well**

Ladies & Gentlemen:

This letter is to advise you that COG Operating LLC, has filed the enclosed application with the New Mexico Oil Conservation Division. This application will be set for hearing before a Division Examiner at 8:15 a.m. on April 17, 2014. 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 19.15.4.13.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.

If you have any questions about this matter please contact Stuart Dirks at (432) 685-4354 or SDirks@concho.com.

Sincerely,

Michael H. Feldewert
ATTORNEY FOR COG OPERATING LLC

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

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

HOLLAND & HART LLP



Michael H. Feldewert
Recognized Specialist in the Area
of Natural Resources - oil and gas law
New Mexico Board of Legal
Specialization
mfeldewert@hollandhart.com

March 28, 2014

VIA CERTIFIED MAIL
RETURN RECEIPT REQUESTED

**TO: OFFSETTING LESSEES AND
OPERATORS**

**RE: Application of COG Operating, LLC for a non-standard spacing and
proration unit and compulsory pooling, Eddy County, New Mexico.
Stonewall 9 Fee 2H Well**

This letter is to advise you that COG Operating, LLC has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application*, but as a lessee or operator in an offsetting tract, you are entitled to notice of this application.

This application has been set for hearing before a Division Examiner at 8:15 AM on April 17, 2014. 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 19.15.4.13.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 at (432) 685-4354 or SDirks@concho.com.

Sincerely,

Michael H. Feldewert
ATTORNEY FOR COG OPERATING, LLC

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

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

7006 0100 0005 5771 7163

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Restricted Delivery Fee (Endorsement Required)	
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 MAR 28 2014

Yates Petroleum Corp., Abo Petroleum Corp.
 MYCO Industries, Inc., Yates Industries,
 LLC, Sharbro Energy LLC
 105 South 4th Street
 Artesia, NM 88210-2177

PS Form 3800, June 2002 See Reverse for Instructions

CERTIFIED MAIL

SENDER: COMPLETE THIS SECTION

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:
 Yates Petroleum Corp., Abo Petroleum Corp.
 MYCO Industries, Inc., Yates Industries,
 LLC, Sharbro Energy LLC
 105 South 4th Street
 Artesia, NM 88210-2177

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 7163

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

RECIPIENT: COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *A. Angel* ☒ Agent ☐ Addressee

B. Received by (Printed Name)
A. Angel C. Date of Delivery
 3/31/14

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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Total Postage & Fees	\$

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OXY Y-1 Company
 5 Greenway Plaza, Suite 110
 Houston, TX 77046-0521

PS Form 3800, June 2002 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

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 Company
 5 Greenway Plaza, Suite 110
 Houston, TX 77046-0521

2. Article Number
 (Transfer from service label) 7006 0100 0005 5771 7231

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

RECIPIENT: COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *[Signature]* ☒ Agent ☐ Addressee

B. Received by (Printed Name)
[Signature] 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.

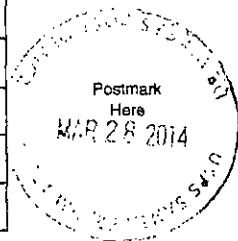
4. Restricted Delivery? (Extra Fee) ☐ Yes

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



Nuevo Seis, Limited Partnership
 PO Box 2588
 Roswell, NM 88202-2588

PS Form 3800, June 2002 See Reverse for Instructions

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- 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, Limited Partnership
 PO Box 2588
 Roswell, NM 88202-2588

2. Article Number: 7006 0100 0005 5771 7224
 (Transfer from service label)

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: *03/28/14*

D. Is delivery address different from item 1? ☒ Yes ☐ No
 If YES, enter delivery address below: *88201*

3. Service Type

<input 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.

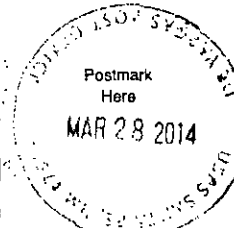
4. Restricted Delivery? (Extra Fee) ☐ Yes

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



OGX Resources, LLC
 PO Box 2064
 Midland, TX 79702

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:

OGX Resources, LLC
 PO Box 2064
 Midland, TX 79702

2. Article Number: 7006 0100 0005 5771 7217
 (Transfer from service label)

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: *06/22/14*

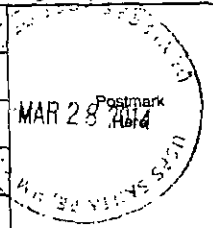
D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

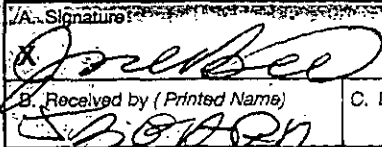
3. Service Type

<input 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.

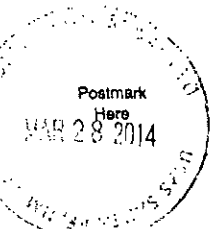
4. Restricted Delivery? (Extra Fee) ☐ Yes

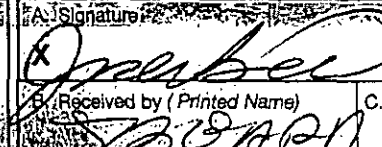
7200 5771 0005 0100 0006

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Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
OXY USA, Inc. 5 Greenway Plaza Houston, TX 77046	
PS Form 3800, June 2002 See Reverse for Instructions	

SENDER: COMPLETE THIS SECTION		ACTION 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.		A. Signature  B. Received by (Printed Name) <u>J. B. B. B.</u> C. Date of Delivery _____ D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
1. Article Addressed to: OXY USA, Inc. 5 Greenway Plaza Houston, TX 77046		3. Service Type <input 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 (Transfer from service label) <u>7200 5771 0005 0100 0006</u>		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

7200 5771 0005 0100 0006

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Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$	
OXY Y-1 Company 5 Greenway Plaza, Suite 110 Houston, TX 77046-0521	
PS Form 3800, June 2002 See Reverse for Instructions	

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1. Article Addressed to: OXY Y-1 Company 5 Greenway Plaza, Suite 110 Houston, TX 77046-0521		3. Service Type <input 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 (Transfer from service label) <u>7200 5771 0005 0100 0006</u>		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1540	

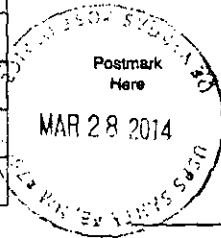
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TIG Properties, LP
 PO Box 10508
 Midland, TX 79702

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