

hinklelawfirm.com

HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE NEW MEXICO 87504

505 982 4554 (FAX) 505 982 8623

WRITER

Gary W. Larson
Partner

glarson@hinklelawfirm.com

April 5 2017

VIA CERTIFIED MAIL

Central National Gottesman
3 Manhattanville Road
Purchase NY 10577

Re Lime Rock Resources II L P NMOCD Application

Dear Sir or Madam

Enclosed is a copy of an application for compulsory pooling that Lime Rock Resources II A L P (Lime Rock) has filed with the New Mexico Oil Conservation Division (the Division) Lime Rock seeks to pool all uncommitted mineral interests in the Yeso formation in the NW/4 NW/4 of Section 12 Township 18 South Range 26 East N M P M Eddy County New Mexico

This matter (Case No 15678) is scheduled for hearing at 8 15 a m on Thursday, April 27, 2017 in Porter Hall at the Division s offices located at 1220 South St Francis Drive, Santa Fe New Mexico 87505 Central National Gottesman is not required to attend this hearing but as an owner of an interest that may be affected by Lime Rock's application it may appear at the hearing and present testimony If Central National Gottesman does not appear at that time and become a party of record it will be precluded from contesting the matter at a later date

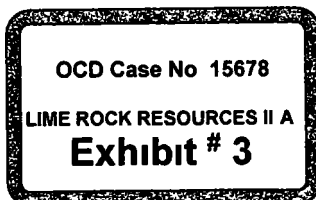
A party appearing in a Division case is required by the Division s Rules to file a Pre Hearing Statement which in this matter must be filed no later than Thursday, April 20 2017 The Pre Hearing Statement must be filed with the Division s Santa Fe office at the address above and should include the name of the party and the party s attorney a concise statement of the case the name(s) of the witness(es) the party will call to testify at the hearing the approximate amount of time the party will need to present the party s case and an identification of any procedural matters that need to be resolved prior to the hearing The Pre-Hearing Statement must also be provided to me

Thank you for your attention to this matter

Very truly yours

Gary W. Larson

GWL jl
Enclosure

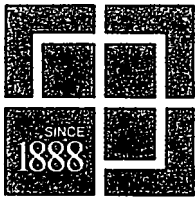


PO BOX 10
ROSWELL NEW MEXICO 88207
575 622 6510
(FAX) 575 623 9332

PO BOX 1720
ARTESIA NEW MEXICO 88211
575 622 6510
(FAX) 575 746 6316

PO BOX 2068
SANTA FE NEW MEXICO 87504
505 982 4554
(FAX) 505 982 8623

7601 JEFFERSON ST NE SUITE 180
ALBUQUERQUE NEW MEXICO 87109
505 858 8320
(FAX) 505 858 8321



HINKLE SHANOR LLP

ATTORNEYS AT LAW

PO BOX 2068

SANTA FE NEW MEXICO 87501

505 982 4554 (FAX) 505 982 8623

WRITER

Gary W Larson
Partner

glarson@hinklelawfirm.com

hinkle shanor firm.com

April 5 2017

VIA CERTIFIED MAIL

Nick Weeks
MRC Energy Company
One Lincoln Center
5400 LBJ Freeway Suite 1500
Dallas TX 75240

Re Lime Rock Resources II L P NMOCD Application

Dear Mr Weeks

Enclosed is a copy of an application for compulsory pooling that Lime Rock Resources II A L P (Lime Rock) has filed with the New Mexico Oil Conservation Division (the Division) Lime Rock seeks to pool all uncommitted mineral interests in the Yezo formation in the NW/4 NW/4 of Section 12 Township 18 South Range 26 East N M P M Eddy County New Mexico

This matter (Case No 15678) is scheduled for hearing at 8 15 a m on Thursday April 27 2017 in Porter Hall at the Division s offices located at 1220 South St Francis Drive Santa Fe New Mexico 87505 MRC Energy Company (MRC) is not required to attend this hearing but as an owner of an interest that may be affected by Lime Rock s application it may appear at the hearing and present testimony If MRC does not appear at that time and become a party of record it will be precluded from contesting the matter at a later date

A party appearing in a Division case is required by the Division s Rules to file a Pre Hearing Statement which in this matter must be filed no later than Thursday April 20 2017 The Pre Hearing Statement must be filed with the Division s Santa Fe office at the address above and should include the name of the party and the party s attorney a concise statement of the case the name(s) of the witness(es) the party will call to testify at the hearing the approximate amount of time the party will need to present the party s case and an identification of any procedural matters that need to be resolved prior to the hearing The Pre Hearing Statement must also be provided to me

I thank you for your attention to this matter

Very truly yours

Gary W Larson


GWLjl
Enclosure


PO BOX 10
ROSWELL NEW MEXICO 88202
575 622 6510
(FAX) 575 623 9332

PO BOX 1720
ARTESIA NEW MEXICO 88211
575 622 6510
(FAX) 575 746 6316

PO BOX 2068
SANTA FE NEW MEXICO 87501
505 982 4554
(FAX) 505 982 8623

7601 JEFFERSON ST NE SUITE 180
ALBUQUERQUE NEW MEXICO 87109
505 858 8320
(FAX) 505 858 8321

SENDER - COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece or on the front if space permits.		A. Signature  <div style="float: right;"> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee </div>	
B. Received by (Printed Name) J. Ando		C. Date of Delivery 6/10/12	
1. Article Addressed to Central National Gottesman 3 Manhattanville Rd Purchase, NY 10577		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7015 0640 0001 6338 9403		3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Mail Restricted Delivery	
9590 9402 2349 6225 8221 91		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2015 PSN 7530 02 000 9053		Domestic Return Receipt	

SENDER - COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<input checked="" type="checkbox"/> Complete items 1, 2, and 3. <input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you. <input checked="" type="checkbox"/> Attach this card to the back of the mailpiece or on the front if space permits.		A. Signature  <div style="float: right;"> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee </div>	
B. Received by (Printed Name) Nick Weeks		C. Date of Delivery 4/10/12	
1. Article Addressed to MRC Energy Company 5406 LBJ Fwy # 1500 Dallas TX 75240		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below <input type="checkbox"/> No	
2. Article Number (Transfer from service label) 7015 0640 0001 6338 9410		3. Service Type <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Mail Restricted Delivery	
9590 9402 2349 6225 8221 80		<input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery	
PS Form 3811, July 2015 PSN 7530 02 000 9053		Domestic Return Receipt	