



# **Corral Canyon Federal #13H & #14H**

**Case #s: 15664 & 15663**

**March 30, 2017**

An **ExxonMobil** Subsidiary

**DISTRICT IV**  
1220 N. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3400 Fax: (505) 476-3462

**Hearing Date:** March 30, 2017

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*Carlsbad Field Office  
Operator Copy  
Class Serial No.  
CMMND 1533**SUBMIT IN TRIPLICATE - Other Instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. If Unit or CA/Agreement, Name and/or No.
2. Name of Operator XTO ENERGY INCORPORATED Contact: STEPHANIE RABADUE E-Mail: stephanie_rabadue@xtoenergy.com		8. Well Name and No. CORRAL CANYON FEDERAL COM 13H
3a. Address 500 W ILLINOIS STREET SUITE 100 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-620-6714	9. API Well No. 30-016-43493-00-X1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 6 T26S R29E SESE 190FSL 520FEL		10. Field and Pool or Exploratory Area WILLOW LAKE-BONE SPRING, SE
		11. County or Parish, State EDDY COUNTY, NM

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original APD
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

XTO Energy, Inc respectfully requests the following changes to the original approved APD:

1. Well Name to: Corral Canyon Federal Com #13H.
2. Producing Area: take points & bottom hole location.
3. Casing & Cement Design.

An updated plat, drilling program and directional drill survey is attached.

**SEE ATTACHED FOR  
CONDITIONS OF APPROVAL**

14. I hereby certify that the foregoing is true and correct. Electronic Submission #380582 verified by the BLM Well Information System For XTO ENERGY INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by MUSTAFA HAQUE on 12/13/2016 (17MH00208E)	
Name (Printed/Typed) STEPHANIE RABADUE	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 12/12/2016

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By MUSTAFA HAQUE	Title PETROLEUM ENGINEER	Date 01/09/2017
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.		
Office Carlsbad		

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

DISTRICT I  
1633 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720

DISTRICT II  
811 E. First St., Azusa, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-0720

DISTRICT III  
1000 Rio Arriba Road, Azusa, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170

DISTRICT IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

Form C-102

Revised August 1, 2011

Submit one copy to appropriate  
District Office

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

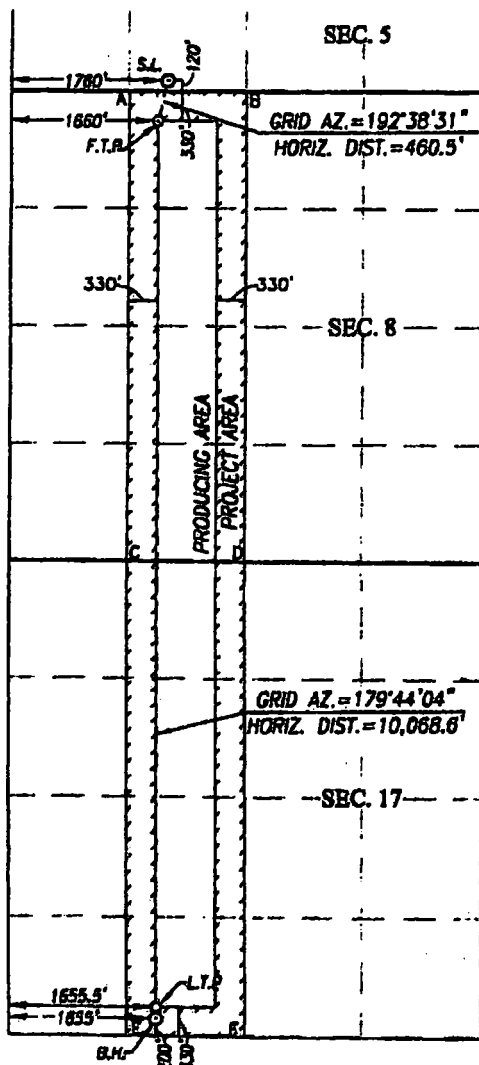
API Number <b>30-015-43474</b>	Pool Code <b>96217</b>	Pool Name <b>Willow Lake; Bone Spring, SE</b>
Property Code <b>34121</b>	Property Name <b>CORRAL CANYON FEDERAL COM</b>	Well Number <b>14H</b>
OGRID No. <b>005380</b>	Operator Name <b>XTO ENERGY</b>	Elevation <b>2942'</b>

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	5	25-S	29-E		120	SOUTH	1760	WEST	EDDY

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	17	25-S	29-E		200	SOUTH	1655	WEST	EDDY

Dedicated Acres <b>330</b>	Joint or Infill	Consolidation Code	Order No.
-------------------------------	-----------------	--------------------	-----------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



SCALE: 1"=2000'

**GEODETIC COORDINATES**  
NAD 27 NME  
SURFACE LOCATION  
Y=419245.4 N  
X=600385.1 E  
LAT.=32.152207° N  
LONG.=104.009033° W  
FIRST TAKE POINT  
NAD 27 NME  
Y=418798.2 N  
X=600284.3 E  
LAT.=32.150975° N  
LONG.=104.009383° W

**GEODETIC COORDINATES**  
NAD 83 NME  
SURFACE LOCATION  
Y=419303.8 N  
X=641549.5 E  
LAT.=32.152330° N  
LONG.=104.008521° W  
FIRST TAKE POINT  
NAD 83 NME  
Y=418854.8 N  
X=641448.7 E  
LAT.=32.151096° N  
LONG.=104.009851° W

CORNER COORDINATES TABLE

NAD 27 NME  
A - Y=419128.6 N, X=599933.8 E  
B - Y=419118.8 N, X=601282.5 E  
C - Y=413838.1 N, X=599942.2 E  
D - Y=413824.3 N, X=601289.4 E  
E - Y=408534.3 N, X=599982.3 E  
F - Y=408517.8 N, X=601307.1 E

NAD 83 NME  
A - Y=419187.0 N, X=641118.0 E  
B - Y=419177.2 N, X=642448.9 E  
C - Y=413898.4 N, X=641128.7 E  
D - Y=413882.8 N, X=642454.0 E  
E - Y=408592.4 N, X=641167.0 E  
F - Y=408576.0 N, X=642491.8 E

**LAST TAKE POINT**  
NAD 27 NME  
Y=408880.1 N  
X=600310.1 E  
LAT.=32.123858° N  
LONG.=104.009312° W  
**BOTTOM HOLE LOCATION**  
NAD 27 NME  
Y=408730.1 N  
X=600310.7 E  
LAT.=32.123301° N  
LONG.=104.009311° W

**LAST TAKE POINT**  
NAD 83 NME  
Y=408918.3 N  
X=641494.8 E  
LAT.=32.123782° N  
LONG.=104.009798° W  
**BOTTOM HOLE LOCATION**  
NAD 83 NME  
Y=408788.3 N  
X=641495.4 E  
LAT.=32.123425° N  
LONG.=104.009787° W

OPERATOR CERTIFICATION

I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this representation either owns a working interest or released mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Stephanie Rabadue 11-12-14  
Signature Date  
Stephanie Rabadue  
Printed Name  
Stephanie - rabadue@xtoenergy.com  
E-mail Address

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

MARCH 6, 2014

Date of Survey  
Signature & Seal of Professional Surveyor:

Ronald J. Eldson 3/6/2014  
Certificate Number 12641  
Surveyor's Name Ronald J. Eldson  
ACK REG. NO. 3411027 REV. 02/07 JWC W.D. 16.0.033

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 2  
Submitted by:  
**XTO ENERGY INC**  
Hearing Date: March 30, 2017

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**SUNDRY NOTICES AND REPORTS ON WELLS**  
**RECOMMITMENT** Do not use this form for proposals to drill or to re-drill an abandoned well. Use form 3160-3 (APD) for such proposals.

**Carlsbad Field Office**  
**Operator Copy**

5. Lease Serial No.  
NMNM111533

6. Landowner Name or Tribe Name

7. BLM/BLM Agreement, Name and/or No.

**SUBMIT IN TRIPPLICATE - Other Instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. CORRAL CANYON FEDERAL COM 14H
2. Name of Operator XTO ENERGY INCORPORATED Contact: STEPHANIE RABADUE E-Mail: stephanie_rabadue@xtoenergy.com		9. API Well No. 30-015-43474-00-X1
3a. Address 500 W ILLINOIS STREET SUITE 100 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-620-6714	10. Field and Pool or Exploratory Area WILLOW LAKE-BONE SPRING
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 5 T25S R28E SESW 120FSL 1760FWL		11. County or Parish, State EDDY COUNTY, NM

**12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

XTO Energy, Inc respectfully requests the following changes to the original approved APD:

- Well Name to: Corral Canyon Federal Com #14H
- Producing Area: take points & bottom hole location
- Field/Pool
- Casing & Cement Design

An updated plat, drilling program and directional drill survey is attached.

**SEE ATTACHED FOR  
CONDITIONS OF APPROVAL**

14. I hereby certify that the foregoing is true and correct. Electronic Submission #368767 verified by the BLM Well Information System For XTO ENERGY INCORPORATED, sent to the Carlsbad Committed to AFMSS for processing by MUSTAFA HAQUE on 02/14/2017 (17MH0032SE)	
Name (Printed/Typed) STEPHANIE RABADUE	Title REGULATOR
Signature (Electronic Submission)	Date 02/10/2017
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By MUSTAFA HAQUE	Title PETROLEUM ENGINEER
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	
Office Carlsbad	
Date 02/27/2017	

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

### Exhibit 3

#### Corral Canyon Federal No. 13H Well

##### Description of lands:

Township 25S, Range 29E, N.M.P.M

Section 8: W/2 W/2

Township 25S, Range 29E, N.M.P.M.

Section 17: W/2 W/2

Containing 320 Acres, more or less Eddy County, New Mexico

<u>Owner</u>	<u>Working Interest</u>
XTO Energy Inc.	25.725000%
ExxonMobil Corporation	28.437500%
Mobil Producing Texas & New Mexico Inc.	2.812500%
Stovall Energy, Ltd.	0.468750%
COG Operating LLC	29.361250%
Penroc Oil Corporation	0.140630%
BAGAM Ltd.	0.703130%
HMJ Minerals, Inc.	1.406250%
L.E. Opermann	0.156250%
LRF Jr., LLC	6.250000%
Moon Royalty L.L.C.	0.093750%
Concho Oil & Gas	1.163750%
Sonic Oil & Gas, LP	0.585940%
H.M. Bettis, Inc.	0.585940%
Guinn Family Properties, Ltd.	0.093750%
The Allar Company	2.015630%

**TOTAL**

**100%**

BEFORE THE OIL CONSERVATION DIVISION

Santa Fe, New Mexico

Exhibit No. 3

Submitted by:

**XTO ENERGY INC**

Hearing Date: March 30, 2017

#### Exhibit 4

#### Corral Canyon Federal No. 14H Well

##### Description of lands:

Township 25S, Range 29E, N.M.P.M

Section 8: E/2 W/2

Township 25S, Range 29E, N.M.P.M.

Section 17: E/2 W/2

Containing 320 Acres, more or less Eddy County, New Mexico

<u>Owner</u>	<u>Working Interest</u>
XTO Energy Inc.	25.725000%
ExxonMobil Corporation	28.437500%
Mobil Producing Texas & New Mexico Inc.	2.812500%
Stovall Energy, Ltd.	0.468750%
COG Operating LLC	29.361250%
Penroc Oil Corporation	0.140630%
BAGAM Ltd.	0.703130%
HMJ Minerals, Inc.	1.406250%
L.E. Opermann	0.156250%
LRF Jr., LLC	6.250000%
Moon Royalty L.L.C.	0.093750%
Concho Oil & Gas	1.163750%
Sonic Oil & Gas, LP	0.585940%
H.M. Bettis, Inc.	0.585940%
Guinn Family Properties, Ltd.	0.093750%
The Allar Company	2.015630%
<b>TOTAL</b>	<b>100%</b>

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 4  
Submitted by:  
**XTO ENERGY INC**  
Hearing Date: March 30, 2017

**DISTRICT I**  
1625 N. French Dr., Hobbs, NM 88240

**DISTRICT II**  
1801 W. Grand Avenue, Artesia, NM 88310

**DISTRICT III**  
1000 Rio Brazos Rd., Aztec, NM 87410

**DISTRICT IV**  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised October 15, 2009  
Submit one copy to appropriate  
District Office

**OIL CONSERVATION DIVISION**  
1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

☐ AMENDED REPORT

API Number <b>30-015-38272</b>	Pool Code <b>96217</b>	Pool Name <b>WILLOWLAKE; BONE SPRING SOUTHEAST</b>
Property Code <b>38360</b>	Property Name <b>SLIDER "8" FEDERAL</b>	Well Number <b>3H</b>
GRID No. <b>6137</b>	Operator Name <b>DEVON ENERGY PRODUCTION COMPANY, L.P.</b>	Elevation <b>2965'</b>

**Surface Location**

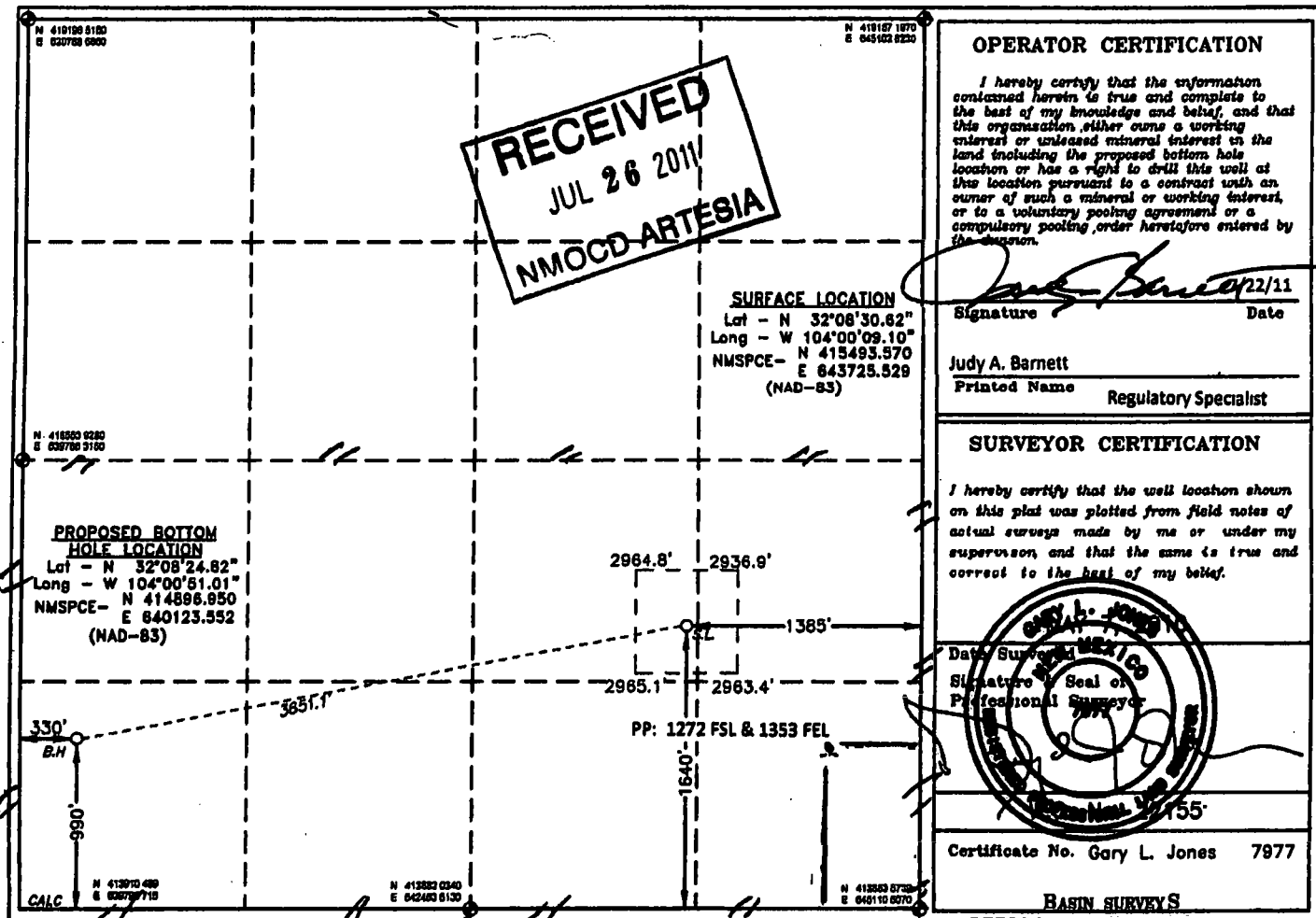
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	8	25 S	29 E		1640	SOUTH	1385	EAST	EDDY

**Bottom Hole Location If Different From Surface**

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	8	25 S	29 E		1049	SOUTH	330	WEST	EDDY

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.
320			

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



DISTRICT I  
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II  
1801 W. Grand Avenue, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Ed., Artec, NM 87410

DISTRICT IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised October 15, 2009

Submit one copy to appropriate  
District Office

OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number <b>30-019-38242</b>	Pool Code <b>96217</b>	Pool Name <b>WILLOW LAKE; BONE SPRING SOUTH</b>
Property Code <b>38360</b>	Property Name <b>SLIDER "8" FEDERAL</b>	Well Number <b>1H</b>
OGRID No. <b>6137</b>	Operator Name <b>DEVON ENERGY PRODUCTION COMPANY, L.P.</b>	Elevation <b>2965'</b>

Surface Location

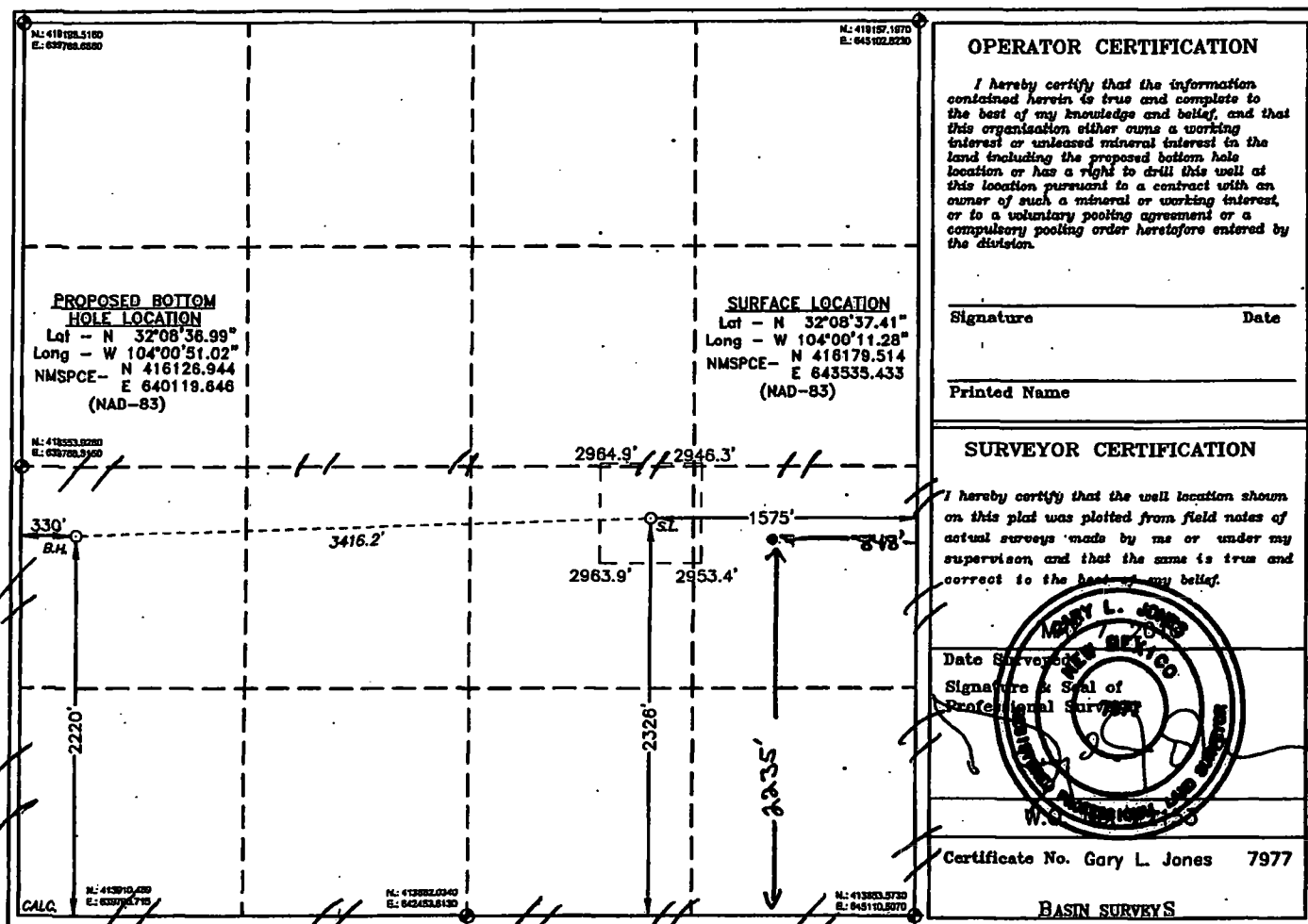
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	8	25 S	29 E		2326	SOUTH	1575	EAST	EDDY

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	8	25 S	29 E		2220	SOUTH	330	WEST	EDDY

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



## DISTRICT I

1625 N. French Dr., Hobbs, NM 88240

## DISTRICT II

1801 W. Grand Avenue, Artesia, NM 88210

## DISTRICT III

1000 Rio Brazos Rd., Artee, NM 87410

## DISTRICT IV

1820 E. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals and Natural Resources Department

## OIL CONSERVATION DIVISION

1220 South St. Francis Dr.  
Santa Fe, New Mexico 87505

Form C-102

Revised October 15, 2009

Submit one copy to appropriate  
District Office

## WELL LOCATION AND ACREAGE DEDICATION PLAT

☐ AMENDED REPORT

API Number <b>30-015-38281</b>	Pool Code <b>96217</b>	Pool Name <b>Willow Lake #5 SE</b>
Property Code <b>38360</b>	Property Name <b>SLIDER "8" FEDERAL</b>	Well Number <b>2H</b>
GRID No. <b>6137</b>	Operator Name <b>DEVON ENERGY PRODUCTION COMPANY, L.P.</b>	Elevation <b>2965'</b>

## Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
J	8	25 S	29 E		1690	SOUTH	1385	EAST	EDDY

## Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	8	25 S	29 E		1664	SOUTH	330	WEST	EDDY

Dedicated Acres	Joint or Infill	Consolidation Code	Order No.

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

**RECEIVED**  
**JUL 26 2011**  
**NMOCD ARTESIA**

**PROPOSED BOTTOM HOLE LOCATION**  
Lat - N 32°08'31.35"  
Long - W 104°00'09.12"  
NMSPC- N 415558.947  
E 640121.457  
(NAD-83)

**SURFACE LOCATION**  
Lat - N 32°08'31.26"  
Long - W 104°00'09.12"  
NMSPC- N 415558.533  
E 643723.036  
(NAD-83)

Diagram showing well location and acreage dedication plat. The diagram includes a grid with dashed lines representing section boundaries. A well location is marked with a dot and labeled 'PP: 1773 FSL & 1033 FEL'. Distances are indicated: 330' from the bottom left corner, 1650' from the bottom left corner, 2964.8' and 2936.9' from the top, and 2965.1' and 2963.4' from the bottom. A north arrow is located in the bottom left corner.

**OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Signature: *[Signature]* Date: 7/22/11

Printed Name: \_\_\_\_\_ Regulatory Specialist

**SURVEYOR CERTIFICATION**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date Surveyed: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Professional Surveyor 7977

Certificate No. Gary L. Jones 7977

**BASIN SURVEYS**

District I  
 1625 N French Dr., Hobbs, NM 88240  
 Phone (575) 393-6161 Fax (575) 393-0720  
 District II  
 811 S First St., Artesia, NM 88210  
 Phone (575) 748-1283 Fax (575) 748-9720  
 District III  
 1000 Rio Brazos Road, Aztec, NM 87410  
 Phone (505) 334-6178 Fax (505) 334-6170  
 District IV  
 1220 S St. Francis Dr., Santa Fe, NM 87505  
 Phone (505) 476-3460 Fax (505) 476-3462

State of New Mexico  
 Energy, Minerals & Natural Resources Department  
**OIL CONSERVATION DIVISION**  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

Form C-102  
 Revised August 1, 2011  
 Submit one copy to appropriate  
 District Office

☒ AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number 30-15-38243	<sup>2</sup> Pool Code 96217	<sup>3</sup> Pool Name WILLOWLAKE; BONE SPRING SOUTHEAST
<sup>4</sup> Property Code 38360	<sup>5</sup> Property Name SLIDER 6 FEDERAL	
<sup>6</sup> OGRID No. 6137	<sup>7</sup> Operator Name Devon Energy Production, Company L. P.	
		<sup>8</sup> Well Number 4H
		<sup>9</sup> Elevation 2970'

**" Surface Location**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
O	8	T25S	R29E		225	SOUTH	1868	EAST	EDDY

**" Bottom Hole Location If Different From Surface**

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	8	T25S	R29E		417	SOUTH	330	WEST	EDDY

<sup>10</sup> Dedicated Acres 160	<sup>11</sup> Joint or Infill	<sup>12</sup> Consolidation Code	<sup>13</sup> Order No.
--------------------------------------	-------------------------------	----------------------------------	-------------------------

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<div style="position: relative; height: 400px;"> </div>	<p><b>" OPERATOR CERTIFICATION</b></p> <p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or undivided mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division</i></p> <p style="text-align: right;">         Signature Date     </p> <p>       Judy A. Barnett Regulatory Specialist        Printed Name     </p> <p>       judith.barnett@dmr.com        E-mail Address     </p> <p><b>"SURVEYOR CERTIFICATION</b></p> <p><i>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</i></p> <p style="text-align: right;"> <i>on file</i>        Date of Survey     </p> <p>       Signature and Seal of Professional Surveyor     </p> <p>       Certificate Number     </p>
---	--



VIA FEDERAL EXPRESS

January 24, 2017

LRF Jr., LLC  
P.O. Box 11327  
Midland, TX 79702

RE: XTO - Corral Canyon 13H  
W/2W/2 of Section 8-25S-29E  
W/2W/2 of Section 17-25S-29E  
Eddy County, New Mexico

Dear Working Interest Owner:

XTO Energy Inc. hereby proposes the drilling of an approximate 8,495' TVD and 18,900' TMD well to test the 2nd Bone Spring formation at a surface location of 190' FSL and 520' FEL of Section 6, T25S-R29E and a bottom hole location of 200' FSL and 355' FWL of Section 17, T25S-29E, Eddy County, New Mexico. The proposed proration unit for this well is the W/2W/2 of Section 8, T25S-29E and W/2W/2 of Section 17, T25S-29E, Eddy County, Mexico.

The approximate cost to drill this test is \$1,804,176.00 with a total completion cost of \$6,462,176.00 as evidenced on the enclosed Authority for Expenditure (AFE). Should you wish to participate with your interest, please sign the enclosed AFE and return to the undersigned. A Joint Operating Agreement using a \$7,500 drilling/ \$750 producing well rate will be prepared for your execution. Should you wish to farmout your interest, please contact the undersigned.

Should you wish to discuss another option rather than participate, please contact the undersigned.

Should you have any questions regarding this matter, I can be contacted at (817) 885-2746 or via email at [angie\\_repka@xtoenergy.com](mailto:angie_repka@xtoenergy.com).

Sincerely,

  
Angie Repka, CPL  
Division Landman

Encl.

XTO Energy Inc.  
810 Houston Street  
Fort Worth, Texas 76102-6298  
(817) 870-2800  
(817) 885-1806 Fax

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 6  
Submitted by:  
**XTO ENERGY INC**  
Hearing Date: March 30, 2017

An ExxonMobil Subsidiary



**XTO ENERGY INC.**  
**AUTHORITY FOR EXPENDITURE**

AFE NO.: 1403779  
AFE DESC: D&C - HORZ IN BRUSHY CANYON  
DATE: 04/19/2014  
AFE TYPE: DEVELOPMENT DRILLING  
OPERATOR: 81 - XTO ENERGY INC.  
SECTION/TOWNSHIP/RANGE: 6/25S/29E

DISTRICT: PERMIAN BASIN  
FIELD: OPERATED  
ACCOUNTING ID: 21757  
WELL NAME: CORRAL CANYON FED 13H  
STATE/COUNTY: New Mexico / Eddy  
XTO WI DECIMAL: 0.999999000

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP / TIE-IN	SUPPLEMENT	TOTAL
FRAC FLUID/SW DISPOSAL	0.00	150,000.00	0.00	0.00	150,000.00
CMPL WATER TRANSFER SERVICE	0.00	50,000.00	0.00	0.00	50,000.00
<b>TOTAL:</b>		<b>200,000.00</b>	<b>0.00</b>		<b>200,000.00</b>
DRLG-DAYWK,FTQ,& RIG MVG	531,000.00	0.00	0.00	0.00	531,000.00
COMPLETION RIG	0.00	40,000.00	0.00	0.00	40,000.00
CASING CREWS & LAYDOWN SERVICE	7,500.00	0.00	0.00	0.00	7,500.00
DIRECTIONAL TOOLS & SERVICES	139,000.00	0.00	0.00	0.00	139,000.00
ROADS AND LOCATION	125,000.00	5,000.00	0.00	0.00	130,000.00
DRILLING & COMPL FLUIDS & CHEM	118,000.00	0.00	0.00	0.00	118,000.00
WELL LOGGING: OPEN HOLE	20,000.00	0.00	0.00	0.00	20,000.00
SURF/INT CEMENT & SERVICE	41,000.00	0.00	0.00	0.00	41,000.00
BITS, MILLS & REAMERS	45,000.00	0.00	0.00	0.00	45,000.00
COMPLETION SERVICES-SURFACE	0.00	160,000.00	0.00	0.00	160,000.00
DRLG RENTALS: SUB-SURFACE	52,000.00	0.00	0.00	0.00	52,000.00
DRLG RENTALS: SURFACE	97,000.00	0.00	0.00	0.00	97,000.00
RIG FUEL, POWER & WATER	118,000.00	0.00	0.00	0.00	118,000.00
WELL LOGGING: CASED HOLE	0.00	240,000.00	0.00	0.00	240,000.00
STIMULATION & PUMPING SERVICES	0.00	2,200,000.00	0.00	0.00	2,200,000.00
DRILLING SUPERVISION	88,000.00	0.00	0.00	0.00	88,000.00
MUD LOGGER	26,000.00	0.00	0.00	0.00	26,000.00
MISC SUPPLIES	24,000.00	0.00	0.00	0.00	24,000.00
TITLE WORK/OPINIONS	18,000.00	0.00	0.00	0.00	18,000.00
DRILLING OVERHEAD	7,000.00	0.00	0.00	0.00	7,000.00
TRUCKING & HOT SHOT	28,000.00	8,000.00	0.00	0.00	36,000.00
FLUID HAULING, SOLIDS CTRL	191,000.00	28,000.00	0.00	0.00	219,000.00
COMPLETION SERVICES	0.00	100,000.00	0.00	0.00	100,000.00
FLOWBACK	0.00	120,000.00	0.00	0.00	120,000.00
FRAC TANKS	0.00	25,000.00	0.00	0.00	25,000.00
PROD CSG CEMENT & SERVICE	0.00	75,000.00	0.00	0.00	75,000.00
DISTRICT TOOL-SUBSURFACE	0.00	20,000.00	0.00	0.00	20,000.00
PROD CSG CREW/LAYDOWN SVS	0.00	9,000.00	0.00	0.00	9,000.00
CMPL RENTALS: SUB SURFACE	0.00	30,000.00	0.00	0.00	30,000.00
CMPL RENTALS: SURFACE	0.00	120,000.00	0.00	0.00	120,000.00
CMPL ENGR/SUPERVISION	0.00	15,000.00	0.00	0.00	15,000.00
CMPL TRUCKING & HOT SHOT	0.00	20,000.00	0.00	0.00	20,000.00
CMPL FISHING/REMEDIAL SVS	0.00	26,000.00	0.00	0.00	26,000.00
CMPL CONTINGENCIES	0.00	20,000.00	0.00	0.00	20,000.00
CMPL MISC LABOR	0.00	10,000.00	0.00	0.00	10,000.00



**XTO ENERGY INC.**  
**AUTHORITY FOR EXPENDITURE**

AFE NO.: 1403779	DISTRICT: PERMIAN BASIN
AFE DESC: D&C - HORZ IN BRUSHY CANYON	FIELD: OPERATED
DATE: 04/19/2014	ACCOUNTING ID: 21757
AFE TYPE: DEVELOPMENT DRILLING	WELL NAME: CORRAL CANYON FED 13H
OPERATOR: 81 - XTO ENERGY INC.	STATE/COUNTY: New Mexico / Eddy
SECTION/TOWNSHIP/RANGE: 6/25S/29E	XTO WI DECIMAL: 0.999999000

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP / TIE-IN	SUPPLEMENT	TOTAL
MISC LABOR/WELDING	26,000.00	0.00	0.00	0.00	26,000.00
CMPL FLUID/CHEM/TRANSP	0.00	550,000.00	0.00	0.00	550,000.00
COMPLETION BITS,SCRAPERS&MILLS	0.00	50,000.00	0.00	0.00	50,000.00
FRAC PIT	0.00	50,000.00	0.00	0.00	50,000.00
<b>WIP-INTAN. DEVLPMT COST</b>	<b>1,701,500.00</b>	<b>3,921,000.00</b>	<b>0.00</b>		<b>5,622,500.00</b>
CONDUCTOR PIPE	25,000.00	0.00	0.00	0.00	25,000.00
TUBING	0.00	50,000.00	0.00	0.00	50,000.00
WELLHEAD	8,676.00	10,000.00	0.00	0.00	18,676.00
TANK BATTERIES	0.00	10,000.00	0.00	0.00	10,000.00
SWD SYSTEMS	0.00	5,000.00	0.00	0.00	5,000.00
ELECTRICAL DISTR. SYSTEMS	0.00	4,000.00	0.00	0.00	4,000.00
LEASE AND FLOW LINES	0.00	10,000.00	0.00	0.00	10,000.00
SEP,DEHY,TREATERS,HEAT EXCH,SC	0.00	10,000.00	0.00	0.00	10,000.00
PACKER & SUB-SURFACE EQUIPMENT	0.00	20,000.00	0.00	0.00	20,000.00
SUB-SURFACE PUMP, RODS & ACCES	0.00	160,000.00	0.00	0.00	160,000.00
AUTOMATION EQUIPMENT	0.00	3,000.00	0.00	0.00	3,000.00
GAS LIFTS-SINGLE WELL	0.00	10,000.00	0.00	0.00	10,000.00
SURFACE CASING	17,000.00	0.00	0.00	0.00	17,000.00
INTERMEDIATE CASING	52,000.00	0.00	0.00	0.00	52,000.00
PRODUCTION/LINER CASING	0.00	222,000.00	0.00	0.00	222,000.00
TUBING HEAD/X-MAS TREE	0.00	18,000.00	0.00	0.00	18,000.00
CMPL CONTINGENCIES	0.00	5,000.00	0.00	0.00	5,000.00
<b>WIP-Lease &amp; Well Equip. TOTA</b>	<b>102,676.00</b>	<b>537,000.00</b>	<b>0.00</b>		<b>639,676.00</b>
<b>TOTAL THIS AFE:</b>	<b>1,804,176.00</b>	<b>4,658,000.00</b>			<b>6,462,176.00</b>

\*\*\* This AFE is an estimate only. By returning one signed copy, you agree to pay your share of the actual costs incurred. \*\*\*

REMARKS: D&C A 2-MILE HORIZONTAL IN THE 2ND BONE SPRINGS. THE CORRAL CANYON FED 13H WILL BE DRILLED TO A TD OF +/- 18,900'MD/8,495'TVD WHERE 5-1/2" CASING WILL BE CEMENTED. DRILLING COSTS BASED ON 26 DAYS SPUD-RR WITH A 5 DAY RIG MOVE. FRAC: 2000 #/FT



**XTO ENERGY INC.**  
**AUTHORITY FOR EXPENDITURE**

AFE NO.: 1403779  
AFE DESC: D&C - HORZ IN BRUSHY CANYON  
DATE: 04/19/2014  
AFE TYPE: DEVELOPMENT DRILLING  
OPERATOR: 81 - XTO ENERGY INC.  
SECTION/TOWNSHIP/RANGE: 6/25S/29E

DISTRICT: PERMIAN BASIN  
FIELD: OPERATED  
ACCOUNTING ID: 21757  
WELL NAME: CORRAL CANYON FED 13H  
STATE/COUNTY: New Mexico / Eddy  
XTO WI DECIMAL: 0.999999000

**Non Operator Approval**

Prepared By: STEPHANIE RABADUE

Approved By: KENDAL DECKER

Signature: \_\_\_\_\_

DATE \_\_\_\_\_

COMPANY \_\_\_\_\_

BY \_\_\_\_\_

TITLE \_\_\_\_\_



XTO Energy Inc.  
810 Houston Street  
Fort Worth, Texas 76102-6298  
(817) 870-2800  
(817) 885-1806 Fax

**VIA FEDERAL EXPRESS**

January 24, 2017

BAGAM, Ltd.  
P.O. Box 37  
Graham, TX 76450

RE: XTO - Corral Canyon 14H  
E/2W/2 of Section 8-25S-29E  
E/2W/2 of Section 17-25S-29E  
Eddy County, New Mexico

Dear Working Interest Owner:

XTO Energy Inc. hereby proposes the drilling of an approximate 8,545' TVD and 18,750' TMD well to test the 2nd Bone Spring formation at a surface location of 120' FSL and 1,760' FWL of Section 5, T25S-R29E and a bottom hole location of 200' FSL and 1,655' FWL of Section 17, T25S-29E, Eddy County, New Mexico. The proposed proration unit for this well is the E/2W/2 of Section 8, T25S-29E and E/2W/2 of Section 17, T25S-29E, Eddy County, Mexico.

The approximate cost to drill this test is \$1,871,176.00 with a total completion cost of \$6,529,176.00 as evidenced on the enclosed Authority for Expenditure (AFE). Should you wish to participate with your interest, please sign the enclosed AFE and return to the undersigned. A Joint Operating Agreement using a \$7,500 drilling/ \$750 producing well rate will be prepared for your execution.

Should you wish to discuss another option rather than participate, please contact the undersigned.

Should you have any questions regarding this matter, I can be contacted at (817) 885-2746 or via email at [angie\\_repka@xtoenergy.com](mailto:angie_repka@xtoenergy.com).

Sincerely,

  
Angie Repka, CPL  
Division Landman

Encl.

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 7  
Submitted by:  
**XTO ENERGY INC**  
Hearing Date: March 30, 2017

An ExxonMobil Subsidiary



**XTO ENERGY INC.**  
**AUTHORITY FOR EXPENDITURE**

AFE NO.: 1402600  
AFE DESC: D&C - HORZ IN 2ND BONE SPRING  
DATE: 03/13/2014  
AFE TYPE: DEVELOPMENT DRILLING  
OPERATOR: 81 - XTO ENERGY INC.  
SECTION/TOWNSHIP/RANGE: 5/25S/29E

DISTRICT: PERMIAN BASIN  
FIELD: OPERATED  
ACCOUNTING ID: 21720  
WELL NAME: CORRAL CANYON FED 14H  
STATE/COUNTY: New Mexico / Eddy  
XTO WI DECIMAL: 0.999999000

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP / TIE-IN	SUPPLEMENT	TOTAL
FRAC FLUID/SW DISPOSAL	0.00	150,000.00	0.00	0.00	150,000.00
CMPL WATER TRANSFER SERVICE	0.00	50,000.00	0.00	0.00	50,000.00
<b>TOTAL:</b>	<b>0.00</b>	<b>200,000.00</b>	<b>0.00</b>	<b>0.00</b>	<b>200,000.00</b>
DRLG-DAYWK,FTG,& RIG MVG	546,000.00	0.00	0.00	0.00	546,000.00
COMPLETION RIG	0.00	40,000.00	0.00	0.00	40,000.00
CASING CREWS & LAYDOWN SERVICE	7,500.00	0.00	0.00	0.00	7,500.00
DIRECTIONAL TOOLS & SERVICES	144,000.00	0.00	0.00	0.00	144,000.00
ROADS AND LOCATION	150,000.00	5,000.00	0.00	0.00	155,000.00
DRILLING & COMPL FLUIDS & CHEM	118,000.00	0.00	0.00	0.00	118,000.00
WELL LOGGING: OPEN HOLE	20,000.00	0.00	0.00	0.00	20,000.00
SURF/INT CEMENT & SERVICE	41,000.00	0.00	0.00	0.00	41,000.00
BITS, MILLS & REAMERS	47,000.00	0.00	0.00	0.00	47,000.00
COMPLETION SERVICES-SURFACE	0.00	160,000.00	0.00	0.00	160,000.00
DRLG RENTALS: SUB-SURFACE	66,000.00	0.00	0.00	0.00	66,000.00
DRLG RENTALS: SURFACE	97,000.00	0.00	0.00	0.00	97,000.00
RIG FUEL, POWER & WATER	118,000.00	0.00	0.00	0.00	118,000.00
WELL LOGGING: CASED HOLE	0.00	240,000.00	0.00	0.00	240,000.00
STIMULATION & PUMPING SERVICES	0.00	2,200,000.00	0.00	0.00	2,200,000.00
DRILLING SUPERVISION	88,000.00	0.00	0.00	0.00	88,000.00
MUD LOGGER	26,000.00	0.00	0.00	0.00	26,000.00
MISC SUPPLIES	24,000.00	0.00	0.00	0.00	24,000.00
TITLE WORK/OPINIONS	18,000.00	0.00	0.00	0.00	18,000.00
DRILLING OVERHEAD	7,000.00	0.00	0.00	0.00	7,000.00
TRUCKING & HOT SHOT	28,000.00	8,000.00	0.00	0.00	36,000.00
FLUID HAULING, SOLIDS CTRL	191,000.00	28,000.00	0.00	0.00	219,000.00
COMPLETION SERVICES	0.00	100,000.00	0.00	0.00	100,000.00
FLOWBACK	0.00	120,000.00	0.00	0.00	120,000.00
FRAC TANKS	0.00	25,000.00	0.00	0.00	25,000.00
PROD CSG CEMENT & SERVICE	0.00	75,000.00	0.00	0.00	75,000.00
DISTRICT TOOL-SUBSURFACE	0.00	20,000.00	0.00	0.00	20,000.00
PROD CSG CREW/LAYDOWN SVS	0.00	9,000.00	0.00	0.00	9,000.00
CMPL RENTALS: SUB SURFACE	0.00	30,000.00	0.00	0.00	30,000.00
CMPL RENTALS: SURFACE	0.00	120,000.00	0.00	0.00	120,000.00
CMPL ENGR/SUPERVISION	0.00	15,000.00	0.00	0.00	15,000.00
CMPL TRUCKING & HOT SHOT	0.00	20,000.00	0.00	0.00	20,000.00
CMPL FISHING/REMEDIAL SVS	0.00	26,000.00	0.00	0.00	26,000.00
CMPL CONTINGENCIES	0.00	20,000.00	0.00	0.00	20,000.00
CMPL MISC LABOR	0.00	10,000.00	0.00	0.00	10,000.00



**XTO ENERGY INC.**  
**AUTHORITY FOR EXPENDITURE**

AFE NO.: 1402600	DISTRICT: PERMIAN BASIN
AFE DESC: D&C - HORZ IN 2ND BONE SPRING	FIELD: OPERATED
DATE: 03/13/2014	ACCOUNTING ID: 21720
AFE TYPE: DEVELOPMENT DRILLING	WELL NAME: CORRAL CANYON FED 14H
OPERATOR: 81 - XTO ENERGY INC.	STATE/COUNTY: New Mexico / Eddy
SECTION/TOWNSHIP/RANGE: 5/25S/29E	XTO WI DECIMAL: 0.999999000

DETAIL OF EXPENDITURES	DRYHOLE	COMPLETION	EQUIP / TIE-IN	SUPPLEMENT	TOTAL
MISC LABOR/WELDING	32,000.00	0.00	0.00	0.00	32,000.00
CMPL FLUID/CHEM/TRANSP	0.00	550,000.00	0.00	0.00	550,000.00
COMPLETION BITS,SCRAPERS&MILLS	0.00	50,000.00	0.00	0.00	50,000.00
FRAC PIT	0.00	50,000.00	0.00	0.00	50,000.00
<b>WIP-INTAN. DEVLPMT COST</b>	<b>1,768,500.00</b>	<b>3,921,000.00</b>	<b>0.00</b>		<b>5,689,500.00</b>
CONDUCTOR PIPE	25,000.00	0.00	0.00	0.00	25,000.00
TUBING	0.00	50,000.00	0.00	0.00	50,000.00
WELLHEAD	8,676.00	10,000.00	0.00	0.00	18,676.00
TANK BATTERIES	0.00	10,000.00	0.00	0.00	10,000.00
SWD SYSTEMS	0.00	5,000.00	0.00	0.00	5,000.00
ELECTRICAL DISTR. SYSTEMS	0.00	4,000.00	0.00	0.00	4,000.00
LEASE AND FLOW LINES	0.00	10,000.00	0.00	0.00	10,000.00
SEP,DEHY,TREATERS,HEAT EXCH,SC	0.00	10,000.00	0.00	0.00	10,000.00
PACKER & SUB-SURFACE EQUIPMENT	0.00	20,000.00	0.00	0.00	20,000.00
SUB-SURFACE PUMP, RODS & ACCES	0.00	160,000.00	0.00	0.00	160,000.00
AUTOMATION EQUIPMENT	0.00	3,000.00	0.00	0.00	3,000.00
GAS LIFTS-SINGLE WELL	0.00	10,000.00	0.00	0.00	10,000.00
SURFACE CASING	17,000.00	0.00	0.00	0.00	17,000.00
INTERMEDIATE CASING	52,000.00	0.00	0.00	0.00	52,000.00
PRODUCTION/LINER CASING	0.00	222,000.00	0.00	0.00	222,000.00
TUBING HEAD/X-MAS TREE	0.00	18,000.00	0.00	0.00	18,000.00
CMPL CONTINGENCIES	0.00	5,000.00	0.00	0.00	5,000.00
<b>WIP-Lease &amp; Well Equip. TOTA</b>	<b>102,676.00</b>	<b>537,000.00</b>	<b>0.00</b>		<b>639,676.00</b>
<b>TOTAL THIS AFE:</b>	<b>1,871,176.00</b>	<b>4,658,000.00</b>		<b>0.00</b>	<b>6,529,176.00</b>

\*\*\* This AFE is an estimate only. By returning one signed copy, you agree to pay your share of the actual costs incurred. \*\*\*

REMARKS: D&C A 2-MILE HORIZONTAL WELL IN THE SECOND BONE SPRING FORMATION. THE CORRAL CANYON FED 14H WILL BE DRILLED TO A TD OF +/- 18,750'MD/8545'TVD WHERE 5-1/2" PRODUCTION CASING WILL BE RUN & CEMENTED. DRILLING COSTS BASED ON 26 DAYS SPUD-RR WITH A 5 DAY RIG MOVE. WELL WILL BE FRACTURE STIMULATED.



**XTO ENERGY INC.**  
**AUTHORITY FOR EXPENDITURE**

AFE NO.: 1402600  
AFE DESC: D&C - HORZ IN 2ND BONE SPRING  
DATE: 03/13/2014  
AFE TYPE: DEVELOPMENT DRILLING  
OPERATOR: 81 - XTO ENERGY INC.  
SECTION/TOWNSHIP/RANGE: 5/25S/29E

DISTRICT: PERMIAN BASIN  
FIELD: OPERATED  
ACCOUNTING ID: 21720  
WELL NAME: CORRAL CANYON FED 14H  
STATE/COUNTY: New Mexico / Eddy  
XTO WI DECIMAL: 0.999999000

**Non Operator Approval**

Prepared By: STEPHANIE RABADUE

Approved By: KENDAL DECKER

Signature: \_\_\_\_\_

DATE \_\_\_\_\_

COMPANY \_\_\_\_\_

BY \_\_\_\_\_

TITLE \_\_\_\_\_

## Affidavit of Publication

State of New Mexico,  
County of Eddy, ss.

**Danny Fletcher**, being first duly  
sworn, on oath says:

That he is the Publisher of the  
Carlsbad Current-Argus, a  
newspaper published daily at the  
City of Carlsbad, in said county of  
Eddy, state of New Mexico and of  
general paid circulation in said  
county; that the same is a duly  
qualified newspaper under the laws  
of the State wherein legal notices  
and advertisements may be  
published; that the printed notice  
attached hereto was published in the  
regular and entire edition of said  
newspaper and not in supplement  
thereof on the date as follows, to wit:

March 14 2017

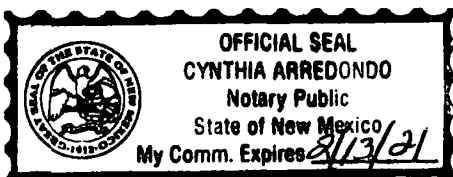
That the cost of publication is  
**\$162.18** and that payment thereof  
has been made and will be  
assessed as court costs.

Subscribed and sworn to before me  
this 14 day of March, 2017

Cynthia Arredondo

My commission Expires 2/13/21

Notary Public



March 14, 2017

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

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on March 30, 2017, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appoint for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-476-3458 or through the New Mexico Relay Network, 1-800-659-1779 by March 20, 2017. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

**STATE OF  
NEW MEXICO TO:**  
All named parties and  
persons having any  
right, title, interest or  
claim in the following  
cases and notice  
to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

To: ExxonMobil Corp.; OXY USA Inc.; Stovall Energy Ltd.; COG Operating LLC; Penroc Oil Corp.; BAGAM Ltd.; HMI Minerals Inc.; LE Opermann; LRF Jr. LLC; Moon Royalty LLC; Concho Oil & Gas; Sonic Oil & Gas LP; HM Bettis Inc.; Gulnn Family Properties Ltd.; The Allar Co.; or their successors, heirs and/or devisees.

CASE No. 15664: Application of XTO Energy Inc. for a non-standard spacing and proration unit, and compulsory pooling, Eddy County, New Mexico. Applicant in the above-styled cause seeks an order (1) creating a non-standard, 320-acre spacing and proration unit comprised of the comprised of the W/2

W/2 of Section 8 and the W/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico, and (2) pooling all mineral interests in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), underlying this acreage. Said non-standard unit is to be dedicated to applicant's proposed Corral Canyon Federal No. 13H Well, which will be horizontally drilled from a surface location in the SE/4 SE/4 of Section 6 (Unit P) to a bottom hole location in the SW/4 SW/4 (Unit M) of Section 17. The completed interval for this well will remain within the 330-foot standard offset required by the rules. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of XTO Energy Inc. as operator of the well and a 200% charge for risk involved in drilling said well. Said area is located approximately 6 miles southeast of Malaga, New Mexico.

BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 8  
Submitted by:  
**XTO ENERGY INC**  
Hearing Date: March 30, 2017

## Affidavit of Publication

State of New Mexico,  
County of Eddy, ss.

**Danny Fletcher**, being first duly  
sworn, on oath says:

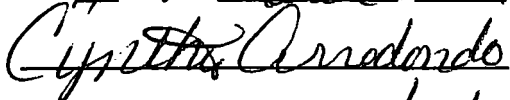
That he is the Publisher of the  
Carlsbad Current-Argus, a  
newspaper published daily at the  
City of Carlsbad, in said county of  
Eddy, state of New Mexico and of  
general paid circulation in said  
county; that the same is a duly  
qualified newspaper under the laws  
of the State wherein legal notices  
and advertisements may be  
published; that the printed notice  
attached hereto was published in the  
regular and entire edition of said  
newspaper and not in supplement  
thereof on the date as follows, to wit:

March 14 2017

That the cost of publication is  
**\$162.18** and that payment thereof  
has been made and will be  
assessed as court costs.

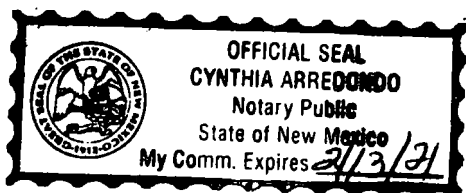


Subscribed and sworn to before me  
this 14 day of March, 2017



My commission Expires 2/13/21

Notary Public



March 14, 2017

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

The State of New Mexico through its Oil Conservation Division hereby gives notice pursuant to law and the Rules and Regulations of the Division of the following public hearing to be held at 8:15 A.M. on March 30, 2017, in the Oil Conservation Division Hearing Room at 1220 South St. Francis, Santa Fe, New Mexico, before an examiner duly appoint for the hearing. If you are an individual with a disability who is in need of a reader, amplifier, qualified sign language interpreter, or any other form of auxiliary aid or service to attend or participate in the hearing, please contact: Florene Davidson at 505-476-3458 or through the New Mexico Relay Network, 1-800-659-1779 by March 20, 2017. Public documents including the agenda and minutes, can be provided in various accessible forms. Please contact Florene Davidson if a summary or other type of accessible form is needed.

STATE OF  
NEW MEXICO TO:  
All named parties and  
persons having any  
right, title, interest or  
claim in the following  
cases and notice  
to the public.

(NOTE: All land descriptions herein refer to the New Mexico Principal Meridian whether or not so stated.)

To: ExxonMobil Corp.; OXY USA Inc.; Stovall Energy Ltd.; COG Operating LLC; Penroc Oil Corp.; BAGAM Ltd.; HMJ Minerals Inc.; LE Opermann; ERF Jr. LLC; Moon Royalty LLC; Concho Oil & Gas; Sonic Oil & Gas LP; HM Bettis Inc.; Guinn Family Properties Ltd.; The Allar Co.; or their successors, heirs and/or devisees.

CASE No. 15663: Application of XTO Energy Inc. for a non-standard spacing and proration unit, and compulsory pooling, Eddy County, New Mexico. Applicant in the above-styled cause seeks an order (1) creating a non-standard, 320-acre spacing and proration unit comprised of the E/2 W/2 of Section 8 and the E/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico, and (2) pooling all mineral interests in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), underlying this acreage. Said non-standard unit is to be dedicated to applicant's proposed Corral Canyon Federal No. 14H Well, which will be horizontally drilled from a surface location in the SE/4 SW/4 of Section 5 (Unit N) to a bottom hole location in the SE/4 SW/4 (Unit N) of Section 17. The completed interval for this well will remain within the 330-foot standard offset required by the rules. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of XTO Energy Inc. as operator of the well and a 200% charge for risk involved in drilling said well. Said area is located approximately 6 miles southeast of Malaga, New Mexico.

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

**APPLICATION OF XTO ENERGY INC.  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT, AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.**

**Case No.: 15663**


**APPLICATION OF XTO ENERGY INC.  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT, AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.**

**Case No.: 15664**


**AFFIDAVIT**

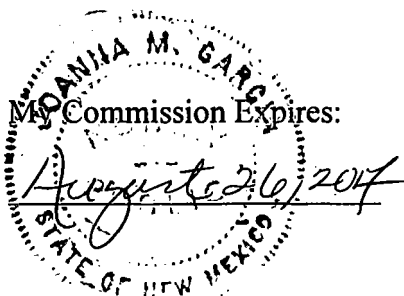
STATE OF NEW MEXICO   )  
  ) ss.  
COUNTY OF SANTA FE   )

Jordan L. Kessler, attorney in fact and authorized representative of XTO Energy Inc., the Applicant herein, being first duly sworn, upon oath, states that the above-referenced Application has been provided under the notice letters and proof of receipts attached hereto.

  
\_\_\_\_\_  
Jordan L. Kessler

SUBSCRIBED AND SWORN to before me this 29th day of March, 2017 by Jordan L. Kessler.

  
\_\_\_\_\_  
Notary Public



BEFORE THE OIL CONSERVATION DIVISION  
Santa Fe, New Mexico  
Exhibit No. 9  
Submitted by:  
**XTO ENERGY INC**  
Hearing Date: March 30, 2017

ExxonMobil Corporation  
810 Houston Street  
Fort Worth, TX 76102

OXY USA, Inc.  
5 Greenway Plaza, Suite 110  
Houston, TX 77046

Stovall Energy, Ltd.  
P.O. Box 10  
Graham, TX 76450

COG Operating LLC  
600 West Illinois Avenue  
Midland, TX 79701

Penroc Oil Corporation  
1515 W. Calle Sur Street  
Hobbs, NM 88240

BAGAM Ltd.  
P.O. Box 900  
Graham, TX 76450

HMJ Minerals, Inc.  
P.O. Box 1240  
Graham, TX 76450

L.E. Opermann  
1505 Neely  
Midland, TX 79701

LRF Jr., LLC  
P.O. Box 11327  
Midland, TX 79702

Moon Royalty L.L.C.  
P.O. Box 720070  
Oklahoma City, OK 73172

Concho Oil & Gas  
600 West Illinois Avenue  
Midland, TX 79701

Sonic Oil & Gas, LP  
505 5th Street  
Graham, TX 76450

H.M. Bettis, Inc.  
505 5th Street  
Graham, TX 76450

Guinn Family Properties, Ltd.  
P.O. Box 1298  
Graham, TX 76450

The Allar Company  
735 Elm Street  
Graham, TX 76450

**CORRAL CANYON FEDERAL NO.  
13H WELL LIST  
POOLING LIST**

HOLLAND & HART



**Jordan L. Kessler**  
**Associate**

**Phone (505) 988-4421**

**Fax (505) 983-6043**

**jlkessler@hollandhart.com**

March 10, 2017

**VIA CERTIFIED MAIL**  
**CERTIFIED RECEIPT REQUESTED**

**TO: POOLED PARTIES**

**Re: Application of XTO Energy Inc. for a non-standard spacing and  
proration unit, and compulsory pooling, Eddy County, New Mexico.  
Corral Canyon Federal No. 13H Well**

Dear Sir or Madam:

This letter is to advise you that XTO Energy Inc., 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 March 30, 2017. 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 Angie Repka, at (817) 885-2746 or [Angie\\_Repka@xtoenergy.com](mailto:Angie_Repka@xtoenergy.com).

Sincerely,

Jordan L. Kessler

**ATTORNEY FOR XTO ENERGY INC.**

**Holland & Hart LLP**

**Phone (505) 988-4421 Fax (505) 983-6043 [www.hollandhart.com](http://www.hollandhart.com)**

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

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

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

**APPLICATION OF XTO ENERGY INC.  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT, AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.**

RECEIVED  
FEB 23 1991  
OIL CONSERVATION DIVISION  
CASE NO. 15664

**APPLICATION**

XTO Energy Inc., ("XTO") through its undersigned attorneys, hereby files this application with the Oil Conservation Division pursuant to the provisions of N.M. Stat. Ann. § 70-2-17, for an order (1) creating a 320-acre spacing and proration unit comprised of the W/2 W/2 of Section 8 and the W/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico; and (2) pooling all uncommitted interests in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), underlying this acreage. In support of its application, XTO states:

1. XTO Energy Inc. (OGRID No. 5380) is a working interest owner in the subject acreage and has the right to drill thereon.
2. XTO proposes to dedicate the above-referenced spacing and proration unit as the project area for its proposed **Corral Canyon Federal No. 13H Well**, which will be horizontally drilled from a surface location in the SE/4 SE/4 of Section 6 (Unit P) to a bottom hole location in the SW/4 SW/4 (Unit M) of Section 17.
3. The Division's district office has placed this well in the Willow Lake; Bone Spring, Southeast (Pool Code 96217), which is subject to the general statewide

rules. The completed interval for this well will remain within the 330-foot standard offset required by the Statewide Rules set forth in 19.15.15 NMAC.

4. XTO has sought and been unable to obtain voluntary agreement for the development of these lands from all of the working interest owners in the subject spacing unit.

5. The pooling of interests will avoid the drilling of unnecessary wells, will prevent waste and will protect correlative rights.

6. In order to permit XTO to obtain it's just and fair share of the oil and gas underlying the subject lands, all mineral interests in this non-standard spacing unit should be pooled and XTO Energy Inc. should be designated the operator of this proposed horizontal well and spacing unit.

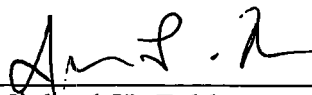
WHEREFORE, XTO requests that this application be set for hearing before an Examiner of the Oil Conservation Division on March 30, 2017, and, after notice and hearing as required by law, the Division enter an order:

- A. Creating a 320-acre non-standard spacing and proration unit in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), comprised of the W/2 W/2 of Section 8 and the W/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico;
- B. Pooling all uncommitted interests in the non-standard spacing and proration unit;
- C. Designating XTO Energy Inc. operator of this non-standard spacing unit and the horizontal well to be drilled thereon;

- D. Authorizing XTO to recover its costs of drilling, equipping and completing the well;
- E. Approving the actual operating charges and costs of supervision while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- F. Imposing a 200% penalty for the risk assumed by XTO in drilling and completing the well against any working interest owner who does not voluntarily participate in the drilling of the well.

Respectfully submitted,

HOLLAND & HART, LLP

By:   
Michael H. Feldewert  
Jordan L. Kessler  
Post Office Box 2208  
Santa Fe, New Mexico 87504-2208  
(505) 988-4421  
(505) 983-6043 Facsimile  
mfeldewert@hollandhart.com  
jlkessler@hollandhart.com

**ATTORNEYS FOR XTO ENERGY INC.**

7015 0640 0003 5400 8502

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**13H well/JLK**

**OFFICIAL**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fees as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total \$

Sent To: **The Allar Company**  
**735 Elm Street**  
**Graham, TX 76450**

City, State: **SANTA FE, NM 87501**

Postmark: **MAR 10 2017**

PS Form 3811, July 2015 PSN 7530-02-000-9053 See reverse for instructions

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
**The Allar Company**  
**735 Elm Street**  
**Graham, TX 76450**

2. Article Number (Transfer from service label)  
**7015 0640 0003 5400 8502**

**3. Service Type**  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery

**4. Is delivery address different from item 1? Yes**  
 If YES, enter delivery address below:

**5. Signature**  
☒ Sheila Burt  
☐ Agent  
☐ Addressee

**6. Received by (Printed Name)**  
**Sheila Burt**

**7. Date of Delivery**  
**3/13/17**

**8. Is delivery address different from item 1? Yes**  
 If YES, enter delivery address below:

**9. Restricted Delivery**  
☐ Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 0640 0003 5400 8496

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**13H well/JLK**

**OFFICIAL**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fees as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total \$

Sent To: **Guinn Family Properties, Ltd.**  
**P.O. Box 1298**  
**Graham, TX 76450**

City, State: **SANTA FE, NM 87501**

Postmark: **MAR 10 2017**

PS Form 3811, July 2015 PSN 7530-02-000-9053 See reverse for instructions

**SENDER: COMPLETE THIS SECTION**

1. Article Addressed to:  
**Guinn Family Properties, Ltd.**  
**P.O. Box 1298**  
**Graham, TX 76450**

2. Article Number (Transfer from service label)  
**7015 0640 0003 5400 8496**

**3. Service Type**  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery

**4. Is delivery address different from item 1? Yes**  
 If YES, enter delivery address below:

**5. Signature**  
☒ Kay Guinn  
☐ Agent  
☐ Addressee

**6. Received by (Printed Name)**  
**Kay Guinn**

**7. Date of Delivery**  
**MAR 14 2017**

**8. Is delivery address different from item 1? Yes**  
 If YES, enter delivery address below:

**9. Restricted Delivery**  
☐ Restricted Delivery (over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7015 0640 0003 5400 9370

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only **XTO/Corral Canyon**  
 For delivery information, visit **13H well/JLK**  
**OFFICE**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee each):  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total \$  
 Sent To \$  
 Street \$  
 City, State \$

H.M. Bettis, Inc.  
 505 5th Street  
 Graham, TX 76450

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 0640 0003 5400 9363

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only **XTO/Corral Canyon**  
 For delivery information, visit **13H well/JLK**  
**OFFICE**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee each):  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total \$  
 Sent To \$  
 Street \$  
 City, State \$

Sonic Oil & Gas, LP  
 505 5th Street  
 Graham, TX 76450

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

SENDER: COMP

IN DELIVERY

- Complete items 1, 2, and 3.
- 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:

H.M. Bettis, Inc.  
 505 5th Street  
 Graham, TX 76450

9590 9402 2002 6123 0739 76

2. Article Number (Transfer from service label)

7015 0640 0003 5400 9370

PS Form 3811, July 2015 PSN 7530-02-000-9053

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3/13/17

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Priority Mail Express®☐ Adult Signature Restricted Delivery☐ Registered Mail™☒ Certified Mail®☐ Registered Mail Restricted Delivery☐ Certified Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Collect on Delivery☐ Signature Confirmation™☐ Collect on Delivery Restricted Delivery☐ Signature Confirmation Restricted Delivery

Restricted Delivery

Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

SENDER: COMPLETE 1

VERY

- Complete items 1, 2, and 3.
- 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:

Sonic Oil & Gas, LP  
 505 5th Street  
 Graham, TX 76450

9590 9403 0670 5183 6871 30

2. Article Number (Transfer from service label)

7015 0640 0003 5400 9363

PS Form 3811, April 2015 PSN 7530-02-000-9053

A. Signature

X

☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3/13/17

D. Is delivery address different from item 1?

☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature☐ Priority Mail Express®☐ Adult Signature Restricted Delivery☐ Registered Mail™☒ Certified Mail®☐ Registered Mail Restricted Delivery☐ Certified Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Collect on Delivery☐ Signature Confirmation™☐ Collect on Delivery Restricted Delivery☐ Signature Confirmation Restricted Delivery

Restricted Delivery

Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7015 0640 0003 5400 9356

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **13H** **XTO/Corral Canyon**

**OFFICE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

Total

\$

Sent

Concho Oil & Gas

Street

600 West Illinois Avenue

City

Midland, TX 79701

PS Form

Instructions

MAR 10 2017

Postmark

Here

SANTA FE

POST OFFICE

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **13H** **XTO/Corral Canyon**

**OFFICE**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage

\$

Total

\$

Sent

Moon Royalty L.L.C.

Street

P.O. Box 720070

City

Oklahoma City, OK 73172

PS Form 3811, April 2015 PSN 7530-02-000-9053

See Reverse for Instructions

MAR 10 2017

Postmark

SANTA FE

POST OFFICE

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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 Oil & Gas  
 600 West Illinois Avenue  
 Midland, TX 79701

9590 9403 0670 5183 6871 23

2. Article Number

7015 0640 0003 5400 9356

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

*[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

3/13/17

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

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☒ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation™  
☐ Insured Mail Restricted Delivery (over \$500) ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Moon Royalty L.L.C.  
 P.O. Box 720070  
 Oklahoma City, OK 73172

9590 9403 0670 5183 6871 18

2. Article Number

7015 0640 0003 5400 9349

PS Form 3811, April 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

*[Signature]*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

*[Signature]*

C. Date of Delivery

3/13/17

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

3. Service Type

- ☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☒ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation™  
☐ Insured Mail Restricted Delivery (over \$500) ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7015 0640 0003 5400 9332

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **XT0/Corral Canyon**  
**OFFIC** 13H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total \$

**SANTAFE**  
**MAIN POST OFFICE**  
**MAR 10 2017**

**LRF Jr., LLC**  
**P.O. Box 11327**  
**Midland, TX 79702**

Instructions

7015 0640 0003 5400 9325

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **XT0/Corral Canyon**  
**OFFIC** 13H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total \$

**SANTAFE**  
**MAIN POST OFFICE**  
**MAR 10 2017**

**L.E. Opermann**  
**1505 Neely**  
**Midland, TX 79701**

Instructions

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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:  
**L.E. Opermann**  
**1505 Neely**  
**Midland, TX 79701**

2. Article Number (Transfer from service label)  
**9590 9403 0670 5183 6870 93**  
**7015 0640 0003 5400 9325**

**RECEIVED BY: COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
**L.E. Opermann** ☐ Agent ☒ Addressee

B. Received By (Printed Name)  
**L.E. OPERMANN**

C. Date of Delivery  
**3-13-17**

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

3. Service Type  
☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☒ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation™  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

7015 0640 0003 5400 9318

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, **XTO/Corral Canyon**  
**13H well/JLK**

**OFFICIAL**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fees as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total \$

Sent **HMJ Minerals, Inc.**  
 P.O. Box 1240  
 Graham, TX 76450

City, State, ZIP+4®  
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

7015 0640 0003 5400 9301

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, **XTO/Corral Canyon**  
**13H well/JLK**

**OFFICIAL**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fees as appropriate)  
☐ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total \$

Sent **BAGAM Ltd.**  
 P.O. Box 900  
 Graham, TX 76450

City, State, ZIP+4®  
 City, State, ZIP+4®

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

**HMJ Minerals, Inc.**  
**P.O. Box 1240**  
**Graham, TX 76450**

9590 9403 0670 5183 6854 95

## 2. Article Number (Transfer from outside label)

7015 0640 0003 5400 9318

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

*Car Leodu*

☒ Agent☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

3/14/17

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

## 3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

INVERTED MAIL

## SENDER: CC

- Complete items 1, 2, and 3.
- 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:

**BAGAM Ltd.**  
**P.O. Box 900**  
**Graham, TX 76450**

9590 9403 0670 5183 6854 88

## 2. Article Number (Transfer from outside label)

7015 0640 0003 5400 9301

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

*Car Leodu*

☐ Agent☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

5/17/17

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

## 3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

7016 1370 0000 0804 1589

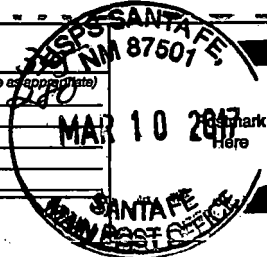
**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, **XTO/Corral Canyon**  
**OFFICE** 13H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Paid \$

Sent To Penroc Oil Corporation  
 Street at 1515 W. Calle Sur Street  
 City, State Hobbs, NM 88240

PS Form 3811, April 2015 PSN 7530-02-000-9053



**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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:  
 Penroc Oil Corporation  
 1515 W. Calle Sur Street  
 Hobbs, NM 88240

2. Article Number (Transfer from service label)  
 7016 1370 0000 0804 1589

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

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

B. Received by (Printed Name) *Joy A Buhaltz*  
 C. Date of Delivery *3-14-17*

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

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 1370 0000 0804 1572

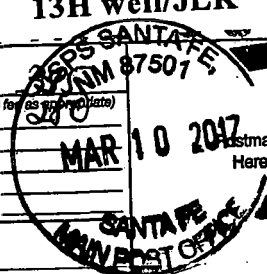
**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, **XTO/Corral Canyon**  
**OFFICE** 13H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Paid \$

Sent To COG Operating LLC  
 Street at 600 West Illinois Avenue  
 City, State Midland, TX 79701

PS Form 3811, April 2015 PSN 7530-02-000-9053



**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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:  
 COG Operating LLC  
 600 West Illinois Avenue  
 Midland, TX 79701

2. Article Number (Transfer from service label)  
 7016 1370 0000 0804 1572

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

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

B. Received by (Printed Name) *John Smith*  
 C. Date of Delivery *3/13/17*

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

PS Form 3811, April 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**

Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICE**

**XTO/Corral Canyon**  
**13H well/JLK**

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☒ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage

\$

Total

\$

Sent To

Street and

City, State

PS Form 3811, April 2015 PSN 7530-02-000-9053

**Stovall Energy, Ltd.**  
**P.O. Box 10**  
**Graham, TX 76450**



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

**Stovall Energy, Ltd.**  
**P.O. Box 10**  
**Graham, TX 76450**

**9590 9403 0670 5183 6870 62**

2. Article Number (Transfer from service label)

**7016 1370 0000 0804 1633**

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

**x Lila Clarke**

☐ Agent

☐ Addressee

B. Received by (Printed Name)

**Lila Clarke**

C. Date of Delivery

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

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>TM</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>TM</sup>  
☐ Signature Confirmation Restricted Delivery

cted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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 USA, Inc.**  
**5 Greenway Plaza, Suite 110**  
**Houston, TX 77046**

**9590 9403 0670 5183 6870 79**

2. Article Number (Transfer from service label)

**7016 1370 0000 0804 1596**

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>TM</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>TM</sup>  
☐ Signature Confirmation Restricted Delivery

d Delivery

2016 4080 0000 0804 1602

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICE** XTO/Corral Canyon  
 13H well HX  
 USPS SAN JUAN NM 87501

Certified Mail Fee \$3.40  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$2.80  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total \$

**Postmark:** MAR 10 2017  
**Post Office:** SANTA FE NM POST OFFICE

Sent **ExxonMobil Corporation**  
 Street **810 Houston Street**  
 City **Fort Worth, TX 76102**

PS Form 3811, April 2015 PSN 7530-02-000-9053

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:  
**ExxonMobil Corporation**  
**810 Houston Street**  
**Fort Worth, TX 76102**

**9590 9403 0670 5183 6870 86**

2. Article Number (Transfer from service label)  
**7016 1370 0000 0804 1602**

**PS Form 3811, April 2015 PSN 7530-02-000-9053**

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
☒ *Josmi Cal* ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
 C. Date of Delivery  
**MAR 13 2017**

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

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Insured Mail  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

**Domestic Return Receipt**

ExxonMobil Corporation  
810 Houston Street  
Fort Worth, TX 76102

OXY USA, Inc.  
5 Greenway Plaza, Suite 110  
Houston, TX 77046

Stovall Energy, Ltd.  
P.O. Box 10  
Graham, TX 76450

COG Operating LLC  
600 West Illinois Avenue  
Midland, TX 79701

Penroc Oil Corporation  
1515 W. Calle Sur Street  
Hobbs, NM 88240

BAGAM Ltd.  
P.O. Box 900  
Graham, TX 76450

HMJ Minerals, Inc.  
P.O. Box 1240  
Graham, TX 76450

L.E. Opermann  
1505 Neely  
Midland, TX 79701

LRF Jr., LLC  
P.O. Box 11327  
Midland, TX 79702

Moon Royalty L.L.C.  
P.O. Box 720070  
Oklahoma City, OK 73172

Concho Oil & Gas  
600 West Illinois Avenue  
Midland, TX 79701

Sonic Oil & Gas, LP  
505 5th Street  
Graham, TX 76450

H.M. Bettis, Inc.  
505 5th Street  
Graham, TX 76450

Guinn Family Properties, Ltd.  
P.O. Box 1298  
Graham, TX 76450

The Allar Company  
735 Elm Street  
Graham, TX 76450

**CORRAL CANYON  
FEDERAL NO. 14H WELL -  
POOLING LIST**

HOLLAND & HART 

**Jordan L. Kessler**  
**Associate**  
**Phone (505) 988-4421**  
**Fax (505) 983-6043**  
**jlkessler@hollandhart.com**

March 10, 2017

**VIA CERTIFIED MAIL**  
**CERTIFIED RECEIPT REQUESTED**

**TO: POOLED PARTIES**

**Re: Application of XTO Energy Inc. for a non-standard spacing and  
proration unit, and compulsory pooling, Eddy County, New Mexico.  
Corral Canyon Federal No. 14H Well**

Dear Sir or Madam:

This letter is to advise you that XTO Energy Inc., 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 March 30, 2017. 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 Angie Repka, at (817) 885-2746 or [Angie\\_Repka@xtoenergy.com](mailto:Angie_Repka@xtoenergy.com).

Sincerely,



Jordan L. Kessler  
**ATTORNEY FOR XTO ENERGY INC.**

**Holland & Hart **

**Phone (505) 988-4421 Fax (505) 983-6043 [www.hollandhart.com](http://www.hollandhart.com)**

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

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

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

**APPLICATION OF XTO ENERGY INC.  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT, AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.**

2011 FEB 28 10:00 AM  
RECEIVED  
CASE NO. 15663

**APPLICATION**

XTO Energy Inc., ("XTO") through its undersigned attorneys, hereby files this application with the Oil Conservation Division pursuant to the provisions of N.M. Stat. Ann. § 70-2-17, for an order (1) creating a 320-acre spacing and proration unit comprised of the E/2 W/2 of Section 8 and the E/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico; and (2) pooling all uncommitted interests in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), underlying this acreage. In support of its application, XTO states:

1. XTO Energy Inc. (OGRID No. 5380) is a working interest owner in the subject acreage and has the right to drill thereon.
2. XTO proposes to dedicate the above-referenced spacing and proration unit as the project area for its proposed **Corral Canyon Federal No. 14H Well**, which will be horizontally drilled from a surface location in the SE/4 SW/4 of Section 5 (Unit N) to a bottom hole location in the SE/4 SW/4 (Unit N) of Section 17.
3. The Division's district office has placed this well in the Willow Lake; Bone Spring, Southeast (Pool Code 96217), which is subject to the general statewide

rules. The completed interval for this well will remain within the 330-foot standard offset required by the Statewide Rules set forth in 19.15.15 NMAC.

4. XTO has sought and been unable to obtain voluntary agreement for the development of these lands from all of the working interest owners in the subject spacing unit.

5. The pooling of interests will avoid the drilling of unnecessary wells, will prevent waste and will protect correlative rights.

6. In order to permit XTO to obtain it's just and fair share of the oil and gas underlying the subject lands, all mineral interests in this non-standard spacing unit should be pooled and XTO Energy Inc. should be designated the operator of this proposed horizontal well and spacing unit.

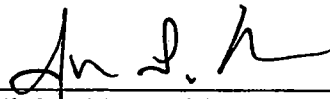
WHEREFORE, XTO requests that this application be set for hearing before an Examiner of the Oil Conservation Division on March 30, 2017, and, after notice and hearing as required by law, the Division enter an order:

- A. Creating a 320-acre non-standard spacing and proration unit in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), comprised of the E/2 W/2 of Section 8 and the E/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico;
- B. Pooling all uncommitted interests in the non-standard spacing and proration unit;
- C. Designating XTO Energy Inc. operator of this non-standard spacing unit and the horizontal well to be drilled thereon;

- D. Authorizing XTO to recover its costs of drilling, equipping and completing the well;
- E. Approving the actual operating charges and costs of supervision while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- F. Imposing a 200% penalty for the risk assumed by XTO in drilling and completing the well against any working interest owner who does not voluntarily participate in the drilling of the well.

Respectfully submitted,

HOLLAND & HART, LLP

By:   
Michael H. Feldewert  
Jordan L. Kessler  
Post Office Box 2208  
Santa Fe, New Mexico 87504-2208  
(505) 988-4421  
(505) 983-6043 Facsimile  
mfeldewert@hollandhart.com  
jlkessler@hollandhart.com

**ATTORNEYS FOR XTO ENERGY INC.**

**U.S. Postal Service™**  
**CERTIFIED MAIL™ RECEIPT**  
*Domestic Mail Only*

For delivery information, visit **usps.com**

**OFFICE**

Certified Mail Fee \$ 3.60

Extra Services & Fees (check box, add fee to postage)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Total Postage and Fees \$ 3.60

Sent To Guinn Family Properties, Ltd.

Street and P.O. Box 1298

City, State, ZIP+4® Graham, TX 76450

PS Form 3849, October 2003

**U.S. Postal Service**  
**CERTIFIED MAIL® RECEIPT**  
*Domestic Mail Only*

For delivery information, visit **usps.com**

**OFFICE**

**TO: XTO/Corral Canyon**  
**14H well/JLK**

**USPS SANTA FE, NM 87507**  
**MAR 16 2017**  
**SANTA FE, NM**  
**MAIN POST OFFICE**

**Certified Mail Fee**  
 \$ 3.65

**Extra Services & Fees (check box, add fee as appropriate)**


<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ <u>2.80</u>
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____

**Postage**  
 \$ \_\_\_\_\_

**Total Postage and Fees**  
 \$ \_\_\_\_\_

**Sent to:** **H.M. Bettis, Inc.**  
**Street:** **505 5th Street**  
**City:** **Graham, TX 76450**

**PS Form 3800, June 2015**

<b>Domestic Return Receipt</b>	
<p><b>SENDER COMPLETE</b></p> <p>■ <b>Complete items 1, 2, and 3.</b></p> <p>■ <b>Print your name and address on the reverse so that we can return the card to you.</b></p> <p>■ <b>Attach this card to the back of the mailpiece, or on the front if space permits.</b></p> <p><b>1. Article Addressed to:</b></p> <p style="text-align: center; font-size: 1.2em;">Guinn Family Properties, Ltd P.O. Box 1298 Graham, TX 76450</p> <p style="text-align: center; font-size: 1.2em;">6990 9402 2002 6123 0739 38</p> <p><b>2. Article Number (Transfer from service label)</b></p> <p style="text-align: center; font-size: 1.2em;">7016 2070 0000 4815 6618</p>	<p><b>TOX EXPRESS</b></p> <p><b>A. Signature</b></p> <p><b>X</b> </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p><b>B. Received by (Printed Name)</b></p> <p><b>C. Date of Delivery</b></p> <p><b>D. Is delivery address different from item 1? <input type="checkbox"/> Yes</b>  <b>If YES, enter delivery address below: <input type="checkbox"/> No</b></p> <p><b>3. Service Type</b></p> <p><input type="checkbox"/> Adult Signature</p> <p><input type="checkbox"/> Adult Signature Restricted Delivery</p> <p><input checked="" type="checkbox"/> Certified Mail®</p> <p><input type="checkbox"/> Certified Mail Restricted Delivery</p> <p><input type="checkbox"/> Collect on Delivery</p> <p><input type="checkbox"/> Collect on Delivery Restricted Delivery</p> <p><input type="checkbox"/> Registered Mail™</p> <p><input type="checkbox"/> Registered Mail Restricted Delivery</p> <p><input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Signature Confirmation™</p> <p><input type="checkbox"/> Signature Confirmation Restricted Delivery</p>

SENDER. COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<p> <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. </p> <p>1. Article Addressed to:</p> <p style="text-align: center;"> <b>H.M. Bettis, Inc.</b>  <b>505 5th Street</b>  <b>Graham, TX 76450</b> </p> <div style="border: 1px solid black; width: 100px; height: 40px; margin: 10px auto;"></div> <p style="text-align: center;">9590 9402 1505 5362 6128 80</p>	<p>A. Signature</p> <p><b>X</b> <i>[Signature]</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery <b>3/13/17</b></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES, enter delivery address below: <input type="checkbox"/> No</p>
<p>2</p> <p style="text-align: center;"> <b>7016 2070 0000 4815 6625</b> </p>	<p>3. Service Type</p> <p> <input type="checkbox"/> Adult Signature  <input checked="" 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 </p> <p style="text-align: right;"> <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 </p> <p style="text-align: center;">(over 500g)</p>

7016 2070 0000 4815 6632

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **usps.com**

**OFFICE** XTO/Corral Canyon  
 14H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee to postage)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage \$  
 Total Postage \$  
 Sent To  
 Street Address  
 City, State

Sonic Oil & Gas, LP  
 505 5th Street  
 Graham, TX 76450

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 6656

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **usps.com**

**OFFICE** XTO/Corral Canyon  
 14H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee to postage)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage \$  
 Total Postage \$  
 Sent To  
 Street Address  
 City, State

Moon Royalty L.L.C.  
 P.O. Box 720070  
 Oklahoma City, OK 73172

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

DELIVERY

- Complete items 1, 2, and 3.
- 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:

Sonic Oil & Gas, LP  
 505 5th Street  
 Graham, TX 76450

9590 9402 1505 5362 6128 97

2.

7016 2070 0000 4815 6632

(over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

X

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3/13/17

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Delivery Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

SENDER: COMPLETE THIS SECTION

DELIVERY

- Complete items 1, 2, and 3.
- 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:

Moon Royalty L.L.C.  
 P.O. Box 720070  
 Oklahoma City, OK 73172

9590 9402 1505 5362 6129 10

3. Article Number (Transfer from envelope label)

7016 2070 0000 4815 6656

(over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

X

☐ Agent  
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

3/13/17

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

7016 2070 0000 4815 6644

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
Total \$  
Sent To  
Street  
City, State, ZIP+4®

Concho Oil & Gas  
600 West Illinois Avenue  
Midland, TX 79701

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 6644

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
Domestic Mail Only

For delivery information, visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Certified Mail Fee \$  
Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
Total Postage \$  
Sent To  
Street and Apt.  
City, State, ZIP+4®

LRF Jr., LLC  
P.O. Box 11327  
Midland, TX 79702

PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**MAIL CERTIFIED MAIL**

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3.  
■ 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 *[Signature]* ☐ Agent ☐ Addressee  
B. Received by (Printed Name) *[Name]* C. Date of Delivery *5/13/17*

1. Article Addressed to:  
  
Concho Oil & Gas  
600 West Illinois Avenue  
Midland, TX 79701  
  
9590 9402 1505 5362 6129 03

2. *7016 2070 0000 4815 6644* Restricted Delivery (over \$500)

3. Service Type  
☐ Adult Signature ☐ Priority Mail Express®  
☐ Adult Signature Restricted Delivery ☐ Registered Mail™  
☐ Certified Mail® ☐ Registered Mail Restricted Delivery  
☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise  
☐ Collect on Delivery ☐ Signature Confirmation™  
☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 6670

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**14H well/JLK**

**OFFICIAL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total P: \$

Sent To: **L.E. Opermann**

Street: **1505 Neely**

City, St: **Midland, TX 79701**

Postmark: **SANTA FE NM 87501 MAR 10 2017**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 6687

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**14H well/JLK**

**OFFICIAL**

Certified Mail Fee \$ 3.45

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total P: \$

Sent To: **HMJ Minerals, Inc.**

Street: **P.O. Box 1240**

City, St: **Graham, TX 76450**

Postmark: **SANTA FE NM 87501 MAR 10 2017**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:**

**L.E. Opermann**  
**1505 Neely**  
**Midland, TX 79701**

**2. Article Number (Transfer from caption label)**

**9590 9402 1505 5362 6129 34**

**7016 2070 0000 4815 6670**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**A. Signature**

*[Signature]*

- ☐ Agent  
☒ Addressee

**B. Received by (Printed Name)**

**L.E. Opermann**

**C. Date of Delivery**

**3-13-17**

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

**3. Service Type**

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®  
☒ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

(over \$500) Restricted Delivery

Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:**

**HMJ Minerals, Inc.**  
**P.O. Box 1240**  
**Graham, TX 76450**

**2. Article Number (Transfer from caption label)**

**9590 9402 1505 5362 6129 41**

**7016 2070 0000 4815 6687**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION ON DELIVERY**

**A. Signature**

*[Signature]*

- ☐ Agent  
☒ Addressee

**B. Received by (Printed Name)**

**L.E. Opermann**

**C. Date of Delivery**

**3/14/17**

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

**3. Service Type**

- ☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®  
☒ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

(over \$500) Restricted Delivery

Domestic Return Receipt

7016 2070 0000 4815 6694

**U.S. Postal Service**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **XTO/Corral Canyon**  
**OFFICIAL** 14H well/JLK

Certified Mail Fee \$ 34.5

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.40

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Fee \$

Sent To **BAGAM Ltd.**  
**P.O. Box 900**  
**Graham, TX 76450**

Street or City, State

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

**BAGAM Ltd.**  
**P.O. Box 900**  
**Graham, TX 76450**

9590 9402 1505 5362 6129 58

2. Article Number (Transfer from service label)

7016 2070 0000 4815 6694

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature **X** [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 3/17/17

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

7016 2070 0000 4815 6700

**U.S. Postal Service**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **XTO/Corral Canyon**  
**OFFICIAL** 14H well/JLK

Certified Mail Fee \$ 34.5

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.40

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Fee \$

Sent To **Penroc Oil Corporation**  
**1515 W. Calle Sur Street**  
**Hobbs, NM 88240**

Street or City, State

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER COMPLETE

- Complete items 1, 2, and 3.
- 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:

**Penroc Oil Corporation**  
**1515 W. Calle Sur Street**  
**Hobbs, NM 88240**

9590 9402 1505 5362 6129 65

2

7016 2070 0000 4815 6700

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature **X** [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) [Signature] C. Date of Delivery 3-13-17

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

3. Service Type

☐ Adult Signature ☐ Priority Mail Express®

☐ Adult Signature Restricted Delivery ☐ Registered Mail™

☒ Certified Mail® ☐ Registered Mail Restricted Delivery

☐ Certified Mail Restricted Delivery ☐ Return Receipt for Merchandise

☐ Collect on Delivery ☐ Signature Confirmation™

☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery

7016 2070 0000 4815 6922

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **OFFIC**

**XTO/Corral Canyon**  
**14H well/JLK**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Post \$

Sent To **COG Operating LLC**  
 Street and **600 West Illinois Avenue**  
 City, State **Midland, TX 79701**

PS Form 3800, April 2015 PSN 7530-02-000-9037 See Reverse for Instructions

7016 2070 0000 4815 6915

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **OFFIC**

**XTO/Corral Canyon**  
**14H well/JLK**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Post \$

Sent To **Stovall Energy, Ltd.**  
 Street and **P.O. Box 10**  
 City, State **Graham, TX 76450**

PS Form 3800, April 2015 PSN 7530-02-000-9037 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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:  
**COG Operating LLC**  
**600 West Illinois Avenue**  
**Midland, TX 79701**

2. Article Number (Transfer from service label)  
**9590 9402 1505 5362 6129 72**

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

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

5. Signature  
**[Signature]**  
☐ Agent  
☒ Addressee

6. Received by (Printed Name)  
**[Signature]**

7. Date of Delivery  
**3/3/17**

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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:  
**Stovall Energy, Ltd.**  
**P.O. Box 10**  
**Graham, TX 76450**

2. Article Number (Transfer from service label)  
**9590 9402 1505 5362 6128 42**

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

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

5. Signature  
**[Signature]**  
☐ Agent  
☒ Addressee

6. Received by (Printed Name)  
**[Signature]**

7. Date of Delivery  
**3/4/2017**

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 6908

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, **XTO/Corral Canyon**

**OFFICIAL** 14H **USPS SANTIAGO NM 87501**

Certified Mail Fee \$ 2.80

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Total Fee \$ 2.80

Sent To OXY USA, Inc.

Street 5 Greenway Plaza, Suite 110

City, State Houston, TX 77046

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 6892

U.S. Postal Service<sup>TM</sup>  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, **XTO/Corral Canyon**

**OFFICIAL** 14H **USPS SANTIAGO NM 87501**

Certified Mail Fee \$ 2.80

Extra Services & Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy) \$ 2.80

☐ Return Receipt (electronic) \$ 0.00

☐ Certified Mail Restricted Delivery \$ 0.00

☐ Adult Signature Required \$ 0.00

☐ Adult Signature Restricted Delivery \$ 0.00

Postage \$ 0.00

Total Fee \$ 2.80

Sent To ExxonMobil Corporation

Street 810 Houston Street

City, State Fort Worth, TX 76102

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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 USA, Inc.  
 5 Greenway Plaza, Suite 110  
 Houston, TX 77046

9590 9402 1505 5362 6128 59

2. Article Number (Transfer from service label)

7016 2070 0000 4815 6908

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

X [Signature]
☐ Agent  
☐ Addressee

B. Received by (Printed Name)

X [Signature]

C. Date of Delivery

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

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>TM</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>TM</sup>  
☐ Signature Confirmation Restricted Delivery

Restricted Delivery (over \$500)

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

ExxonMobil Corporation  
 810 Houston Street  
 Fort Worth, TX 76102

9590 9402 1505 5362 6128 66

2. Article Number (Transfer from service label)

7016 2070 0000 4815 6892

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

X [Signature]
☐ Agent  
☐ Addressee

B. Received by (Printed Name)

X [Signature]

C. Date of Delivery

MAR 13 2017

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

3. Service Type

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail<sup>®</sup>  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Priority Mail Express<sup>®</sup>  
☐ Registered Mail<sup>TM</sup>  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation<sup>TM</sup>  
☐ Signature Confirmation Restricted Delivery

Restricted Delivery

ExxonMobil Corporation  
810 Houston Street  
Fort Worth, TX 76102

OXY USA, Inc.  
5 Greenway Plaza, Suite 110  
Houston, TX 77046

COG Operating LLC  
600 West Illinois Avenue  
Midland, TX 79701

Concho Oil & Gas  
600 West Illinois Avenue  
Midland, TX 79701

Nadel & Gussman Permian, LLC  
4000 North Big Spring, Suite  
310  
Midland, TX 79705

Chevron U.S.A. Inc.  
6301 Deauville Blvd.  
Midland, TX 79706

Devon Energy Corporation  
333 West Sheridan Avenue  
Oklahoma City, OK 73102

Yates Petroleum Corporation  
105 S. Fourth Street  
Artesia, NM 88210

EOG Resources, Inc.  
P.O. Box 2267  
Midland, TX 79702

ABO Petroleum  
105 S. Fourth Street  
Artesia, NM 88210

Myco Industries Inc.  
105 S. Fourth Street  
Artesia, NM 88210

**CORRAL CANYON FEDERAL NO.  
13H WELL LIST  
OFFSET OPERATORS LIST**

HOLLAND & HART<sup>LLP</sup>



**Jordan L. Kessler**

**Associate**

**Phone (505) 988-4421**

**Fax (505) 983-6043**

**jlkessler@hollandhart.com**

March 10, 2017

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO: OFFSETTING LESSEES AND OPERATORS**

**RE: Application of XTO Energy Inc. for a non-standard spacing and  
proration unit, and compulsory pooling, Eddy County, New Mexico.  
Corral Canyon Federal No. 13H Well**

This letter is to advise you that XTO Energy Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application.* You are receiving notice of this application because of the request for the proposed non-standard spacing and proration unit and due to the proposed unorthodox well location.

This application has been set for hearing before a Division Examiner at 8:15 AM on March 30, 2017. 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.

If you have any questions about this matter please contact Angie Repka, at (817) 885-2746 or [Angie\\_Repka@xtoenergy.com](mailto:Angie_Repka@xtoenergy.com).

Sincerely,

Jordan L. Kessler

**ATTORNEY FOR XTO ENERGY INC.**

**Holland & Hart LLP**

**Phone (505) 988-4421 Fax (505) 983-6043 [www.hollandhart.com](http://www.hollandhart.com)**

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

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

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

**APPLICATION OF XTO ENERGY INC.  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT, AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.**

RECEIVED  
FEB 23 1987  
OIL CONSERVATION DIVISION  
SANTA FE, N.M.  
CASE NO. 15664

**APPLICATION**

XTO Energy Inc., ("XTO") through its undersigned attorneys, hereby files this application with the Oil Conservation Division pursuant to the provisions of N.M. Stat. Ann. § 70-2-17, for an order (1) creating a 320-acre spacing and proration unit comprised of the W/2 W/2 of Section 8 and the W/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico; and (2) pooling all uncommitted interests in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), underlying this acreage. In support of its application, XTO states:

1. XTO Energy Inc. (OGRID No. 5380) is a working interest owner in the subject acreage and has the right to drill thereon.
2. XTO proposes to dedicate the above-referenced spacing and proration unit as the project area for its proposed **Corral Canyon Federal No. 13H Well**, which will be horizontally drilled from a surface location in the SE/4 SE/4 of Section 6 (Unit P) to a bottom hole location in the SW/4 SW/4 (Unit M) of Section 17.
3. The Division's district office has placed this well in the Willow Lake; Bone Spring, Southeast (Pool Code 96217), which is subject to the general statewide

rules. The completed interval for this well will remain within the 330-foot standard offset required by the Statewide Rules set forth in 19.15.15 NMAC.

4. XTO has sought and been unable to obtain voluntary agreement for the development of these lands from all of the working interest owners in the subject spacing unit.

5. The pooling of interests will avoid the drilling of unnecessary wells, will prevent waste and will protect correlative rights.

6. In order to permit XTO to obtain it's just and fair share of the oil and gas underlying the subject lands, all mineral interests in this non-standard spacing unit should be pooled and XTO Energy Inc. should be designated the operator of this proposed horizontal well and spacing unit.

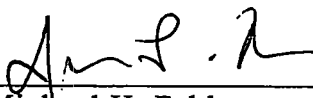
WHEREFORE, XTO requests that this application be set for hearing before an Examiner of the Oil Conservation Division on March 30, 2017, and, after notice and hearing as required by law, the Division enter an order:

- A. Creating a 320-acre non-standard spacing and proration unit in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), comprised of the W/2 W/2 of Section 8 and the W/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico;
- B. Pooling all uncommitted interests in the non-standard spacing and proration unit;
- C. Designating XTO Energy Inc. operator of this non-standard spacing unit and the horizontal well to be drilled thereon;

- D. Authorizing XTO to recover its costs of drilling, equipping and completing the well;
- E. Approving the actual operating charges and costs of supervision while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- F. Imposing a 200% penalty for the risk assumed by XTO in drilling and completing the well against any working interest owner who does not voluntarily participate in the drilling of the well.

Respectfully submitted,

HOLLAND & HART, LLP

By:   
\_\_\_\_\_  
Michael H. Feldewert  
Jordan L. Kessler  
Post Office Box 2208  
Santa Fe, New Mexico 87504-2208  
(505) 988-4421  
(505) 983-6043 Facsimile  
mfeldewert@hollandhart.com  
jlkessler@hollandhart.com

**ATTORNEYS FOR XTO ENERGY INC.**

7016 1370 0000 0804 1565

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**OFFICIAL USE** 13H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total P \$

Sent To: Myco Industries Inc.  
 Street: 105 S. Fourth Street  
 City, St: Artesia, NM 88210  
 PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

345 USPS SANTA FE NM 87501  
 MAR 10 2017  
 SANTA FE POST OFFICE

SENDER: COMPLETE THIS

- Complete items 1, 2, and 3.
- 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 Inc.  
 105 S. Fourth Street  
 Artesia, NM 88210

9590 9403 0670 5183 6854 71

2

7016 1370 0000 0804 1565

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

7016 1370 0000 0804 1732

U.S. Postal Service™  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**OFFICIAL USE** 13H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage \$  
 Total P \$

Sent To: ABO Petroleum  
 Street: 105 S. Fourth Street  
 City, St: Artesia, NM 88210  
 PS Form 3811, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

345 USPS SANTA FE NM 87501  
 MAR 10 2017  
 SANTA FE POST OFFICE

SENDER: COMPLETE THIS

- Complete items 1, 2, and 3.
- 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:

ABO Petroleum  
 105 S. Fourth Street  
 Artesia, NM 88210

9590 9403 0670 5183 6854 64

2. Article Number (Transfer from service label)

7016 1370 0000 0804 1732

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

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

☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☒ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

7016 1370 0000 0804 1725

# U.S. Postal Service<sup>TM</sup> CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

 For delivery information, visit **XTO/Corral Canyon**  
**OFFICIAL** 13H well/JLK

## Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.45
<input type="checkbox"/> Return Receipt (electronic)	\$ 2.10
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

## Postage

 \$  
 Total Postage

 \$  
 Sent To

Street and

City, State,

 EOG Resources, Inc.  
 P.O. Box 2267  
 Midland, TX 79702

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

Postmark  
Here

7016 1370 0000 0804 1718

# U.S. Postal Service<sup>TM</sup> CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

 For delivery information, visit **XTO/Corral Canyon**  
**OFFICIAL** 13H well/JLK

## Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)	
<input checked="" type="checkbox"/> Return Receipt (hardcopy)	\$ 3.45
<input type="checkbox"/> Return Receipt (electronic)	\$ 2.10
<input type="checkbox"/> Certified Mail Restricted Delivery	\$
<input type="checkbox"/> Adult Signature Required	\$
<input type="checkbox"/> Adult Signature Restricted Delivery	\$

## Postage

 \$  
 Total Postage

 \$  
 Sent To

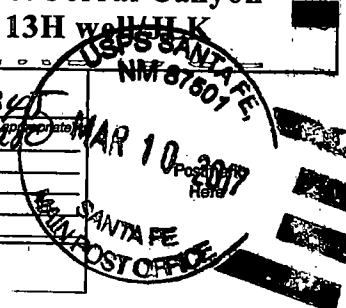
Street and

City, State,

 Yates Petroleum Corporation  
 105 S. Fourth Street  
 Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions



## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

 EOG Resources, Inc.  
 P.O. Box 2267  
 Midland, TX 79702

9590 9403 0670 5183 6854 57

## 2. Article Number (Transfer from service label)

7016 1370 0000 0804 1725

PS Form 3811, April 2015 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☒ Agent  
☒ Addressee

## B. Received by (Printed Name)

J. Seery

## C. Date of Delivery

3-17-17

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

## 3. Service Type

- |  |  |
|--|--|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express <sup>®</sup>              |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail <sup>TM</sup>                   |
| <input type="checkbox"/> Certified Mail <sup>®</sup>             | <input type="checkbox"/> Registered Mail Restricted Delivery             |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise                  |
| <input type="checkbox"/> Collect on Delivery                     | <input checked="" type="checkbox"/> Signature Confirmation <sup>TM</sup> |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery      |
| <input type="checkbox"/> Insured Mail                            |  |

Restricted Delivery

Domestic Return Receipt

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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 S. Fourth Street  
 Artesia, NM 88210

9590 9403 0670 5183 6854 40

## 2. Article Number (Transfer from service label)

7016 1370 0000 0804 1718

PS Form 3811, April 2015 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

J. Seery

## C. Date of Delivery

3/14/17

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

## 3. Service Type

- |  |  |
|--|--|
| <input type="checkbox"/> Adult Signature                         | <input type="checkbox"/> Priority Mail Express <sup>®</sup>              |
| <input type="checkbox"/> Adult Signature Restricted Delivery     | <input type="checkbox"/> Registered Mail <sup>TM</sup>                   |
| <input type="checkbox"/> Certified Mail <sup>®</sup>             | <input type="checkbox"/> Registered Mail Restricted Delivery             |
| <input type="checkbox"/> Certified Mail Restricted Delivery      | <input type="checkbox"/> Return Receipt for Merchandise                  |
| <input type="checkbox"/> Collect on Delivery                     | <input checked="" type="checkbox"/> Signature Confirmation <sup>TM</sup> |
| <input type="checkbox"/> Collect on Delivery Restricted Delivery | <input type="checkbox"/> Signature Confirmation Restricted Delivery      |

Restricted Delivery

Domestic Return Receipt

7016 1370 0000 0804 1701

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit **usps.com**

**OFFICE** 13H WALK  
 NM 87501

Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage  
 \$

Total  
 \$

Sent To  
 Street  
 City, State, ZIP+4<sup>®</sup>

Devon Energy Corporation  
 333 West Sheridan Avenue  
 Oklahoma City, OK 73102

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Devon Energy Corporation  
 333 West Sheridan Avenue  
 Oklahoma City, OK 73102

9590 9403 0670 5183 6854 33

2. Article Number (Transfer from service label)

7016 1370 0000 0804 1701

A. Signature

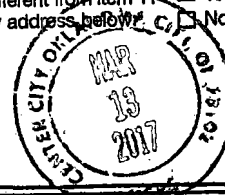
X

☐ 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

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail<sup>®</sup>
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express<sup>®</sup>
- ☐ Registered Mail<sup>TM</sup>
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☒ Signature Confirmation<sup>TM</sup>
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7016 1370 0000 0804 1695

**U.S. Postal Service<sup>TM</sup>**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit **usps.com**

**OFFICE** 13H WALK  
 NM 87501

Certified Mail Fee  
 \$

Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy) \$  
☐ Return Receipt (electronic) \$  
☐ Certified Mail Restricted Delivery \$  
☐ Adult Signature Required \$  
☐ Adult Signature Restricted Delivery \$

Postage  
 \$

Total  
 \$

Sent To  
 Street  
 City, State, ZIP+4<sup>®</sup>

Chevron U.S.A. Inc.  
 6301 Deauville Blvd.  
 Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

## SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Chevron U.S.A. Inc.  
 6301 Deauville Blvd.  
 Midland, TX 79706

9590 9403 0670 5183 6854 26

2. Article Number (Transfer from service label)

7016 1370 0000 0804 1695

A. Signature

B. Received by (Printed Name)

☒ Agent☐ Addressee

C. Date of Delivery

03/14/2017

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail<sup>®</sup>
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery

- ☐ Priority Mail Express<sup>®</sup>
- ☐ Registered Mail<sup>TM</sup>
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☒ Signature Confirmation<sup>TM</sup>
- ☐ Signature Confirmation Restricted Delivery

Restricted Delivery

PS Form 3811, April 2015 PSN 7530-02-000-9053

Domestic Return Receipt

889T 4080 0000 02ET 9T02

2016 1370 0000 02ET 9102

PS Form 3811, July 2015 PSN 7530-02-000-9053

PS Form 3811, July 2015 PSN 7530-02-000-9053

499T 4080 0000 02ET 9T02

259T 4080 0000 02ET 9102

PS Form 3811, July 2015 PSN 7530-02-000-9053PS Form 3811, July 2015 PSN 7530-02-000-9053

7016 1370 0000 0804 1640

**U.S. Postal Service<sup>™</sup>**  
**CERTIFIED MAIL<sup>®</sup> RECEIPT**  
 Domestic Mail Only

For delivery information, visit [usps.com](http://usps.com)

**OFFICE** **SANTA FE** **NEW MEXICO**  
**MAR 10 2017**

**TXTO/Corral Canyon**  
**13H well/JLK**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☒ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total \$  
 Sent  
 Street  
 City

**ExxonMobil Corporation**  
**810 Houston Street**  
**Fort Worth, TX 76102**

PS Form 3800, April 2015 PSN 7530-02-000-9047 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3.
- 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:

**ExxonMobil Corporation**  
**810 Houston Street**  
**Fort Worth, TX 76102**

**9590 9402 2002 6123 0739 83**

2. Article Number (Transfer from service label)

**7016 1370 0000 0804 1640**

PS Form 3811, July 2015 PSN 7530-02-000-9053

**COMPLETE THIS SECTION OF RECEIPT**

A. Signature

**X Jeanne Cox**

- ☐ Agent
- ☐ Addressee

B. Received by (Printed Name)

**MAR 13 2017**

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

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail<sup>®</sup>
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express<sup>®</sup>
- ☐ Registered Mail<sup>™</sup>
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation<sup>™</sup>
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

**ExxonMobil Corporation**  
810 Houston Street  
Fort Worth, TX 76102

**OXY USA, Inc.**  
5 Greenway Plaza, Suite 110  
Houston, TX 77046

**COG Operating LLC**  
600 West Illinois Avenue  
Midland, TX 79701

**Concho Oil & Gas**  
600 West Illinois Avenue  
Midland, TX 79701

**Nadel & Gussman Perm, LLC**  
4000 North Big Spring, Ste 310  
Midland, TXX 79705

**Chevron U.S.A. Inc.**  
6301 Deauville Blvd.  
Midland, TX 79706

**Devon Energy Corporation**  
333 West Sheridan Avenue  
Oklahoma City, OK 73102

**Yates Petroleum Corporation**  
105 S. Fourth Street  
Artesia, NM 88210

**EOG Resources, Inc.**  
P.O. Box 2267  
Midland, TX 79702

**ABO Petroleum**  
105 S. Fourth Street  
Artesia, NM 88210

**Myco Industries Inc.**  
105 S. Fourth Street  
Artesia, NM 88210

**CORRAL CANYON**  
**FEDERAL NO. 14H WELL**  
**OFFSET LIST**

HOLLAND & HART 

**Jordan L. Kessler**  
**Associate**  
Phone (505) 988-4421  
Fax (505) 983-6043  
jlkessler@hollandhart.com

March 10, 2017

**VIA CERTIFIED MAIL**  
**RETURN RECEIPT REQUESTED**

**TO: OFFSETTING LESSEES AND OPERATORS**

**RE: Application of XTO Energy Inc. for a non-standard spacing and proration unit, and compulsory pooling, Eddy County, New Mexico.**  
**Corral Canyon Federal No. 14H Well**

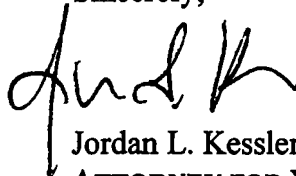
This letter is to advise you that XTO Energy Inc. has filed the enclosed application with the New Mexico Oil Conservation Division. *Your interests are not being pooled under this application.* You are receiving notice of this application because of the request for the proposed non-standard spacing and proration unit and due to the proposed unorthodox well location.

This application has been set for hearing before a Division Examiner at 8:15 AM on March 30, 2017. 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.

If you have any questions about this matter please contact Angie Repka, at (817) 885-2746 or [Angie\\_Repka@xtoenergy.com](mailto:Angie_Repka@xtoenergy.com).

Sincerely,



Jordan L. Kessler  
**ATTORNEY FOR XTO ENERGY INC.**

**Holland & Hart** 

Phone (505) 988-4421 Fax (505) 983-6043 [www.hollandhart.com](http://www.hollandhart.com)

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

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

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

**APPLICATION OF XTO ENERGY INC.  
FOR A NON-STANDARD SPACING AND  
PRORATION UNIT, AND COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO.**

2017 FEB 28 10:10 AM  
RECEIVED  
CASE NO. 15663

**APPLICATION**

XTO Energy Inc., ("XTO") through its undersigned attorneys, hereby files this application with the Oil Conservation Division pursuant to the provisions of N.M. Stat. Ann. § 70-2-17, for an order (1) creating a 320-acre spacing and proration unit comprised of the E/2 W/2 of Section 8 and the E/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico; and (2) pooling all uncommitted interests in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), underlying this acreage. In support of its application, XTO states:

1. XTO Energy Inc. (OGRID No. 5380) is a working interest owner in the subject acreage and has the right to drill thereon.
2. XTO proposes to dedicate the above-referenced spacing and proration unit as the project area for its proposed **Corral Canyon Federal No. 14H Well**, which will be horizontally drilled from a surface location in the SE/4 SW/4 of Section 5 (Unit N) to a bottom hole location in the SE/4 SW/4 (Unit N) of Section 17.
3. The Division's district office has placed this well in the Willow Lake; Bone Spring, Southeast (Pool Code 96217), which is subject to the general statewide

rules. The completed interval for this well will remain within the 330-foot standard offset required by the Statewide Rules set forth in 19.15.15 NMAC.

4. XTO has sought and been unable to obtain voluntary agreement for the development of these lands from all of the working interest owners in the subject spacing unit.

5. The pooling of interests will avoid the drilling of unnecessary wells, will prevent waste and will protect correlative rights.

6. In order to permit XTO to obtain its just and fair share of the oil and gas underlying the subject lands, all mineral interests in this non-standard spacing unit should be pooled and XTO Energy Inc. should be designated the operator of this proposed horizontal well and spacing unit.

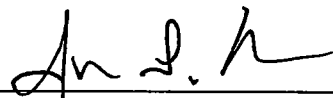
WHEREFORE, XTO requests that this application be set for hearing before an Examiner of the Oil Conservation Division on March 30, 2017, and, after notice and hearing as required by law, the Division enter an order:

- A. Creating a 320-acre non-standard spacing and proration unit in the Bone Spring formation, Willow Lake; Bone Spring, Southeast (Pool Code 96217), comprised of the E/2 W/2 of Section 8 and the E/2 W/2 of Section 17, Township 25 South, Range 29 East, NMPM, Eddy County, New Mexico;
- B. Pooling all uncommitted interests in the non-standard spacing and proration unit;
- C. Designating XTO Energy Inc. operator of this non-standard spacing unit and the horizontal well to be drilled thereon;

- D. Authorizing XTO to recover its costs of drilling, equipping and completing the well;
- E. Approving the actual operating charges and costs of supervision while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures; and
- F. Imposing a 200% penalty for the risk assumed by XTO in drilling and completing the well against any working interest owner who does not voluntarily participate in the drilling of the well.

Respectfully submitted,

HOLLAND & HART, LLP

By:   
Michael H. Feldewert  
Jordan L. Kessler  
Post Office Box 2208  
Santa Fe, New Mexico 87504-2208  
(505) 988-4421  
(505) 983-6043 Facsimile  
mfeldewert@hollandhart.com  
jlkessler@hollandhart.com

**ATTORNEYS FOR XTO ENERGY INC.**

7016 1370 0000 0804 1541

# U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information

OFFICIAL

XTO/Corral Canyon  
14H well/JLK

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy)☐ Return Receipt (electronic)☐ Certified Mail Restricted Delivery☐ Adult Signature Required☐ Adult Signature Restricted Delivery

Postage

\$

Total Post

\$

Sent To

Street

City, State

Myco Industries Inc.  
105 S. Fourth Street  
Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER COMPLETE THIS SECTION

- Complete Items 1, 2, and 3.
- 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 Inc.  
105 S. Fourth Street  
Artesia, NM 88210

9590 9402 1505 5362 6128 73

2

7016 1370 0000 0804 1541

PS Form 3811, July 2015 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

(Bra)

☐ Agent☐ Addressee

B. Received by (Printed Name)

Bra

C. Date of Delivery

3/14/17

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery☐ Insured Mail☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

all Restricted Delivery

Domestic Return Receipt

7016 1370 0000 0804 1551

# U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information

OFFICIAL

XTO/Corral Canyon  
14H well/JLK

Certified Mail Fee

\$

Extra Services &amp; Fees (check box, add fee as appropriate)

☒ Return Receipt (hardcopy)☐ Return Receipt (electronic)☐ Certified Mail Restricted Delivery☐ Adult Signature Required☐ Adult Signature Restricted Delivery

Postage

\$

Total Post

\$

Sent To

Street

City, State

ABO Petroleum  
105 S. Fourth Street  
Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9047

See Reverse for Instructions

## SENDER COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

ABO Petroleum  
105 S. Fourth Street  
Artesia, NM 88210

9590 9402 1505 5362 6126 68

2

7016 1370 0000 0804 1558

PS Form 3811, July 2015 PSN 7530-02-000-9053

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

(Bra)

☐ Agent☐ Addressee

B. Received by (Printed Name)

Bra

C. Date of Delivery

3/13/17

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

3. Service Type

☐ Adult Signature☐ Adult Signature Restricted Delivery☐ Certified Mail®☐ Certified Mail Restricted Delivery☐ Collect on Delivery☐ Collect on Delivery Restricted Delivery

all Restricted Delivery

☐ Priority Mail Express®☐ Registered Mail™☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation™☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

7016 2070 0000 4815 6717

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**OFF** 14H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee to postage)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage \$  
 Total \$

Sent To: **EOG Resources, Inc.**  
 Street: **P.O. Box 2267**  
 City, St: **Midland, TX 79702**

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**SENDER COMPLETE THIS SECTION**

■ Complete Items 1, 2, and 3.  
 ■ 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:  
**EOG Resources, Inc.**  
**P.O. Box 2267**  
**Midland, TX 79702**

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 6717**

3. Service Type  
☒ Adult Signature  
☒ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☒ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

A. Signature **X [Signature]** ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) **S. Bury** C. Date of Delivery **3/17/17**  
 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 6724

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**OFF** 14H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee to postage)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage \$  
 Total \$

Sent To: **Yates Petroleum Corporation**  
 Street: **105 S. Fourth Street**  
 City, St: **Artesia, NM 88210**

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**SENDER COMPLETE THIS SECTION**

■ Complete Items 1, 2, and 3.  
 ■ 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 S. Fourth Street**  
**Artesia, NM 88210**

2. Article Number (Transfer from service label)  
**7016 2070 0000 4815 6724**

3. Service Type  
☒ Adult Signature  
☒ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☒ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

A. Signature **X [Signature]** ☐ Agent ☐ Addressee  
 B. Received by (Printed Name) **Bna** C. Date of Delivery **3/13/17**  
 D. Is delivery address different from item 1? ☐ Yes  
 If YES, enter delivery address below: ☐ No

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**14H well/JLK**

**OFFICIAL USE**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Fee \$

Postmark Here  
 MAY 10 2017  
 SANTA FE POST OFFICE

Devon Energy Corporation  
 333 West Sheridan Avenue  
 Oklahoma City, OK 73102

Instructions

7016 2070 0000 4815 6731

**U.S. Postal Service™**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**14H well/JLK**

**OFFICIAL USE**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery \$  
 Postage \$  
 Total Fee \$

Postmark Here  
 MAY 10 2017  
 SANTA FE POST OFFICE

Chevron U.S.A. Inc.  
 6301 Deauville Blvd.  
 Midland, TX 79706

PS Form 3800, April 2015 PSN 7530-02-000-9053

7016 2070 0000 4815 6748

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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:  
 Devon Energy Corporation  
 333 West Sheridan Avenue  
 Oklahoma City, OK 73102

2. Article Number (from label)  
 7016 2070 0000 4815 6731

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Insured Mail Restricted Delivery (over \$500)

A. Signature  
 XTO/Corral Canyon  
☐ 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  
☐ Priority Mail Express®  
☒ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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.

Article Addressed to:  
 Chevron U.S.A. Inc.  
 6301 Deauville Blvd.  
 Midland, TX 79706

9590 9402 1505 5362 6127 05

2. Article Number (from label)  
 7016 2070 0000 4815 6748

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☒ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Insured Mail Restricted Delivery (over \$500)

A. Signature  
 XTO/Corral Canyon  
☒ 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  
☐ Priority Mail Express®  
☒ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 6755

# U.S. Postal Service<sup>™</sup> CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit **XTO/Corral Canyon****OFFICIAL** 14H well/JLK

Certified Mail Fee

Extra Services & Fees (check box, add fees as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Fee

\$

Sent To

Street &amp;

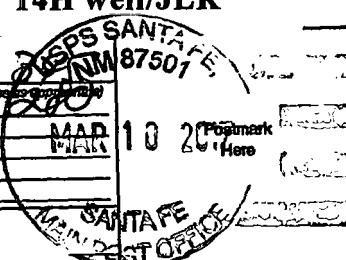
City, St

State

Zip

PS Form 3811, July 2015 PSN 7530-02-000-9053

Nadel & Gussman Perm, LLC  
4000 North Big Spring, Ste 310  
Midland, TX 79705



# U.S. Postal Service<sup>™</sup> CERTIFIED MAIL<sup>®</sup> RECEIPT

Domestic Mail Only

For delivery information, visit **XTO/Corral Canyon****OFFICIAL** 14H well/JLK

Certified Mail Fee

Extra Services & Fees (check box, add fees as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage

\$

Total

\$

Sent To

Street

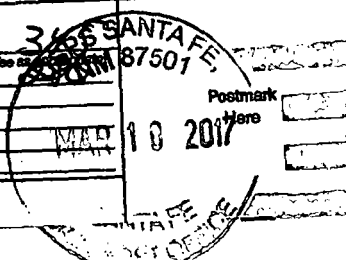
City

State

Zip

PS Form 3811, July 2015 PSN 7530-02-000-9053

Concho Oil & Gas  
600 West Illinois Avenue  
Midland, TX 79701



7016 2070 0000 4815 6762

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Nadel & Gussman Perm, LLC  
4000 North Big Spring, Ste 310  
Midland, TX 79705

9590 9402 1505 5362 6127 12

2. Article Number (Transfer from service label)

7016 2070 0000 4815 6755

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

X *Lauren Frango*☐ Agent☐ Addressee

B. Received by (Printed Name)

*Lauren Frango*

C. Date of Delivery

*3/13/17*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail<sup>®</sup>

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>☐ Registered Mail<sup>™</sup>☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation<sup>™</sup>☐ Signature Confirmation Restricted Delivery

Restricted Delivery

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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 Oil & Gas  
600 West Illinois Avenue  
Midland, TX 79701

9590 9402 1505 5362 6127 29

2. Article Number (Transfer from service label)

7016 2070 0000 4815 6762

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

A. Signature

X *G. Smith*☐ Agent☐ Addressee

B. Received by (Printed Name)

*Ken Smith*

C. Date of Delivery

*3/13/17*D. Is delivery address different from item 1? ☐ YesIf YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature

☐ Adult Signature Restricted Delivery

☐ Certified Mail<sup>®</sup>

☐ Certified Mail Restricted Delivery

☐ Collect on Delivery

☐ Collect on Delivery Restricted Delivery

☐ Priority Mail Express<sup>®</sup>☐ Registered Mail<sup>™</sup>☐ Registered Mail Restricted Delivery☐ Return Receipt for Merchandise☐ Signature Confirmation<sup>™</sup>☐ Signature Confirmation Restricted Delivery

(over 500)

7016 2070 0000 4815 6779

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**OFFICE** 14H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee to postage)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery  
 Postage \$  
 Total \$  
 Sent To  
 Street  
 City, State

COG Operating LLC  
 600 West Illinois Avenue  
 Midland, TX 79701

PS Form 3811, July 2015 PSN 7530-02-000-9053 See Reverse for Instructions

7016 2070 0000 4815 6786

U.S. Postal Service  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information: **XTO/Corral Canyon**  
**OFFICE** 14H well/JLK

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee to postage)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery  
 Postage \$  
 Total Postage \$  
 Sent To  
 Street  
 City, State

OXY USA, Inc.  
 5 Greenway Plaza, Suite 110  
 Houston, TX 77046

PS Form 3811, July 2015 PSN 7530-02-000-9053 Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

COG Operating LLC  
 600 West Illinois Avenue  
 Midland, TX 79701

9590 9402 1505 5362 6127 36

## 2. Article Number (Transfer from service label)

7016 2070 0000 4815 6779

PS Form 3811, July 2015 PSN 7530-02-000-9053

## A. Signature

*[Signature]*  
☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

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

## C. Date of Delivery

5/13/17  
 C. Date of Delivery

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

## 3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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 USA, Inc.  
 5 Greenway Plaza, Suite 110  
 Houston, TX 77046

9590 9402 1505 5362 6127 43

## 2. Article Number (Transfer from service label)

7016 2070 0000 4815 6786

PS Form 3811, July 2015 PSN 7530-02-000-9053

## A. Signature

*[Signature]*  
☐ Agent  
☐ Addressee

## B. Received by (Printed Name)

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

## C. Date of Delivery

5/13/17  
 C. Date of Delivery

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

## 3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☐ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

(over \$500)

Domestic Return Receipt

7016 2070 0000 4815 6793

**U.S. Postal Service**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **XTO/Corral Canyon**  
**OFFIC 14H well/JLK**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage \$  
 Total Postage \$

Sent To  
 Street and A  
 City, State, ZIP+4®

**ExxonMobil Corporation**  
**810 Houston Street**  
**Fort Worth, TX 76102**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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:

**ExxonMobil Corporation**  
**810 Houston Street**  
**Fort Worth, TX 76102**

9590 9402 1505 5362 6127 50

7016 2070 0000 4815 6793

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Glenn Orr* ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
 C. Date of Delivery  
**MAR 13 2017**

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

3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

7016 2070 0000 4815 6809

**U.S. Postal Service**  
**CERTIFIED MAIL® RECEIPT**  
 Domestic Mail Only

For delivery information, visit **XTO/Corral Canyon**  
**OFFIC 14H well/JLK**

Certified Mail Fee \$  
 Extra Services & Fees (check box, add fee as appropriate)  
☐ Return Receipt (hardcopy)  
☐ Return Receipt (electronic)  
☐ Certified Mail Restricted Delivery  
☐ Adult Signature Required  
☐ Adult Signature Restricted Delivery

Postage \$  
 Total Postage \$

Sent To  
 Street and A  
 City, State, ZIP+4®

**The Allar Company**  
**735 Elm Street**  
**Graham, TX 76450**

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

■ Complete items 1, 2, and 3.  
 ■ 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:

**The Allar Company**  
**735 Elm Street**  
**Graham, TX 76450**

9590 9402 2002 6123 0739 45

7016 2070 0000 4815 6809

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature  
 X *Sheila Burt* ☐ Agent ☐ Addressee

B. Received by (Printed Name)  
 C. Date of Delivery  
**Sheila Burt 3/13/17**

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

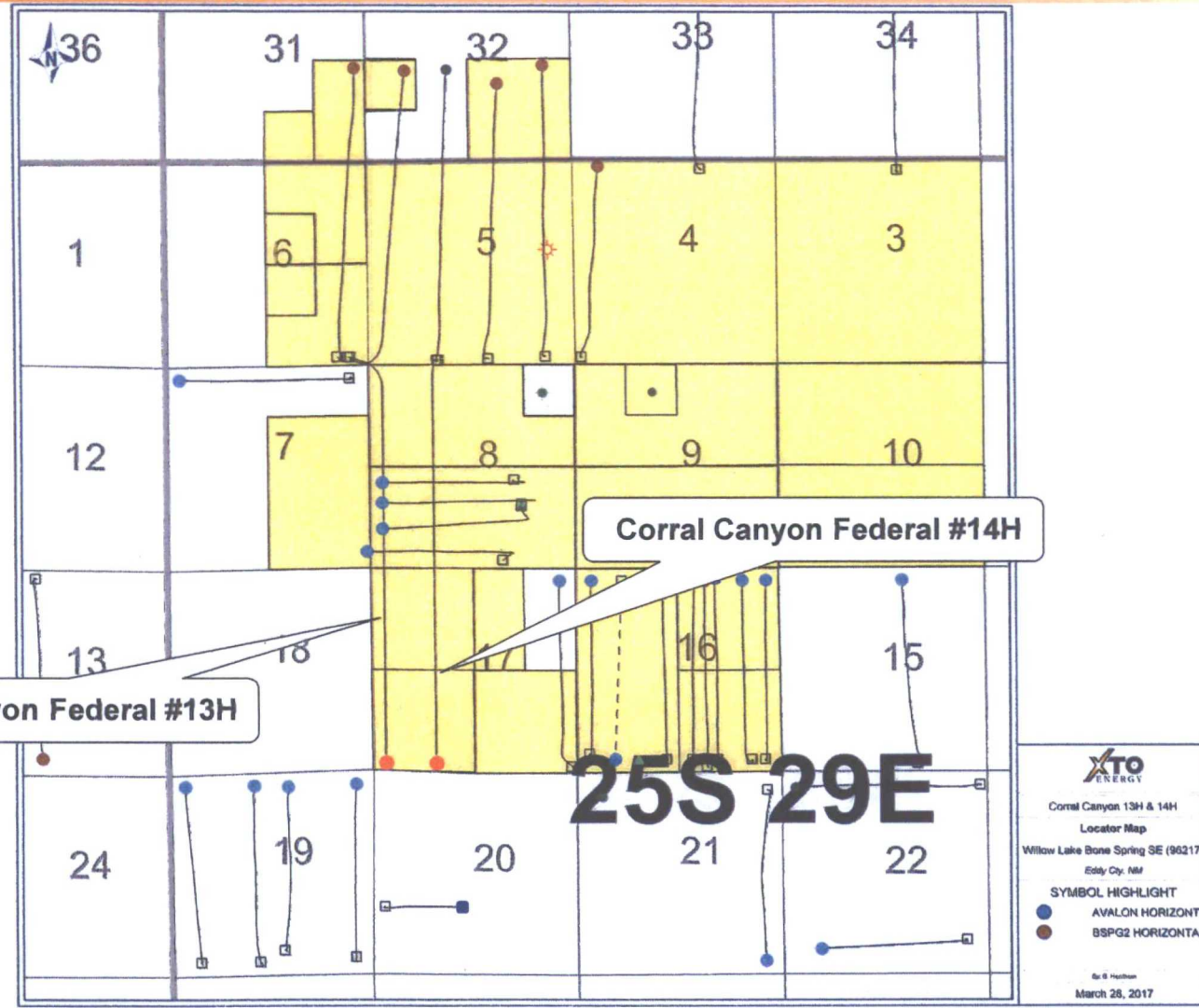
3. Service Type  
☐ Adult Signature  
☐ Adult Signature Restricted Delivery  
☐ Certified Mail®  
☐ Certified Mail Restricted Delivery  
☐ Collect on Delivery  
☐ Collect on Delivery Restricted Delivery  
☐ Restricted Delivery

☐ Priority Mail Express®  
☐ Registered Mail™  
☐ Registered Mail Restricted Delivery  
☐ Return Receipt for Merchandise  
☐ Signature Confirmation™  
☐ Signature Confirmation Restricted Delivery

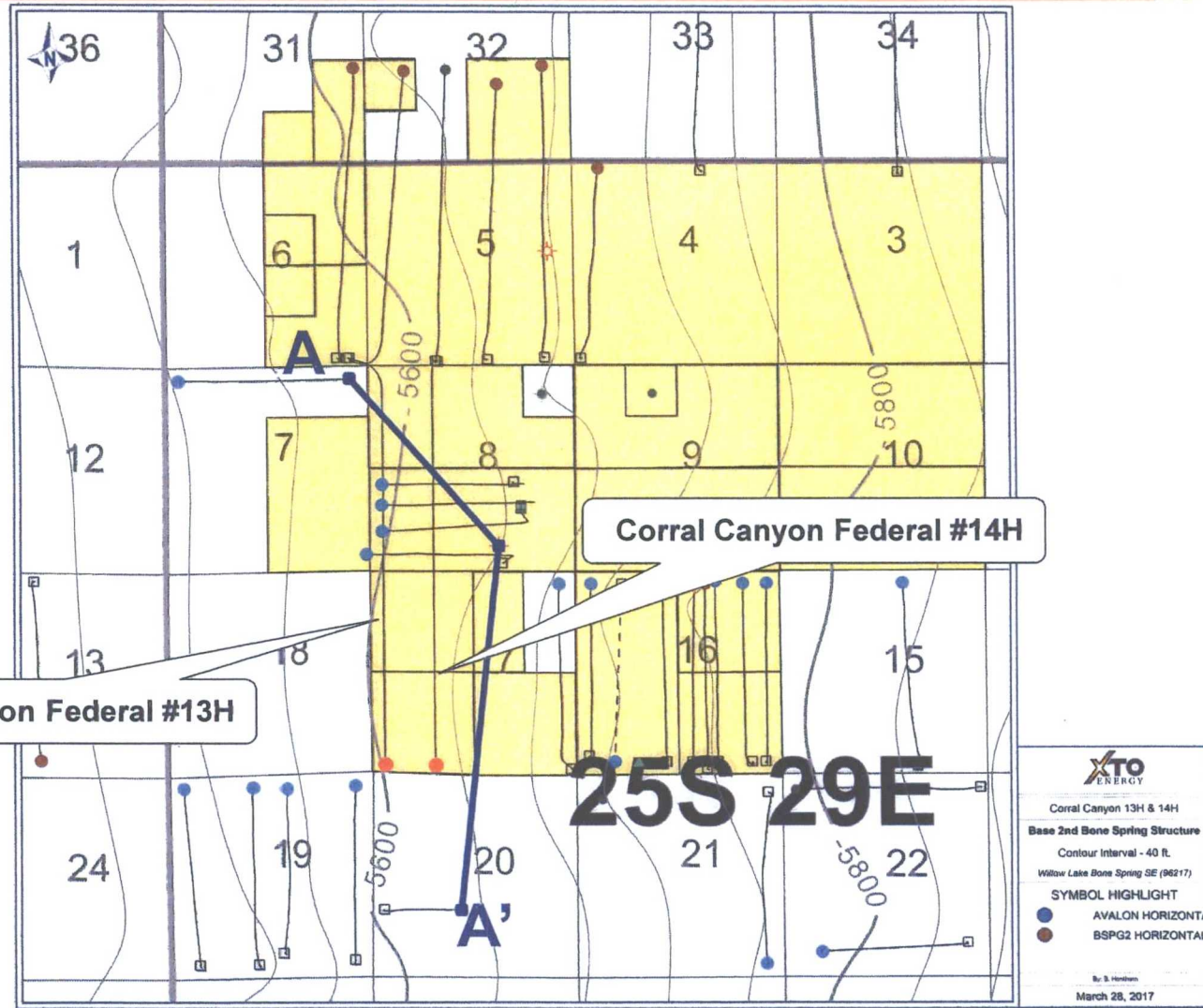
(over \$500)

PS Form 3811, July 2015 PSN 7530-02-000-9053 Domestic Return Receipt

# Area Locator Map



# 2nd Bone Spring Base Structure



# Stratigraphic Cross Section




**A**  300153655901  
**SHOWSTOPPER 7 FEDERAL COM**  
**1H**  
 COG OPER LTD LIABILITY CORP  
 T25S R29E S7

<5,775FT>

 300152947500  
**CHIMAYO**  
**1**  
 DEVON ENERGY PROD L P  
 T25S R29E S8

<9,976FT>

 300153643000  
**SHOCKER 20 FEDERAL**  
**1H**  
 MARBOB ENERGY CORP  
 T25S R29E S20

**A'**

