

BEFORE THE  
OIL CONSERVATION DIVISION  
Case No. 12355 Exhibit No. 2  
Submitted By:  
*Matador Petroleum Corp.*  
Hearing Date: March 16, 2000

**KELLAHIN AND KELLAHIN**

ATTORNEYS AT LAW

EL PATIO BUILDING

117 NORTH GUADALUPE

POST OFFICE BOX 2265

SANTA FE, NEW MEXICO 87504-2265

W. THOMAS KELLAHIN\*

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\*NEW MEXICO BOARD OF LEGAL SPECIALIZATION  
RECOGNIZED SPECIALIST IN THE AREA OF  
NATURAL RESOURCES-OIL AND GAS LAW

JASON KELLAHIN (RETIRED 1991)

February 23, 2000

**CERTIFIED MAIL-RETURN RECEIPT REQUESTED**

TO: NOTICE OF THE HEARING OF THE FOLLOWING  
NEW MEXICO OIL CONSERVATION DIVISION CASE:

*Re: Application of Matador E & P Company to establish infill  
well procedures and to amend well location requirements  
for the Red Hills-Wolfcamp Gas Pool, or in the  
alternative, for simultaneous dedication, Lea County, New  
Mexico*

On behalf of Matador E & P Company, please find enclosed a copy of its referenced application. This case has been set for hearing on the New Mexico Oil Conservation Division Examiner's docket now scheduled for 8:15 am, Thursday, March 21, 2000. The hearing will be held at the Division hearing room located at 2040 South Pacheco, Santa Fe, New Mexico.

As party who may be affected by this application, we are notifying you of your right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

Pursuant to the Division's Memorandum 2-90, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 4:00 PM on Friday, March 17, 2000, with a copy delivered to the undersigned.

Very truly yours,

A handwritten signature in black ink, appearing to read 'W. Thomas Kellahin', written over a horizontal line.

W. Thomas Kellahin

EXHIBIT B

Division designated operators in the pool:

BTA Oil Producers  
104 S. Pecos  
Midland, Texas 79701  
Attn: Bob Crawford

Kaiser-Francis Oil Company  
Box 21468  
Tulsa, Oklahoma 74121-1468  
Attn: Jim Wakefield

Division designated operators of Wolfcamp gas wells  
within one (1) mile of the outer boundary of the pool:

None

Is your RETURN ADDRESS completed on the reverse side?

<b>SENTER</b> <input type="checkbox"/> Cor <input type="checkbox"/> Pri <input type="checkbox"/> Car <input type="checkbox"/> Alt <input type="checkbox"/> Writ <input type="checkbox"/> The Matador E & P Company Red Hills March 16, 2000 2/23/00		an return the does not number, the date I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Kaiser-Francis Oil Co. Box 21468 Tulsa, OK 74121-1468 Attn: Jim Wakefield		4a. Article Number 2191 940532	
5. Received By: (Print Name) [Signature]		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
6. Signature: (Addressee or Agent) [Signature]		7. Date of Delivery FEB 28 2000	
PS Form 3811, December 1994		8. Addressee's Address (Only if requested and fee is paid)	

Thank you for using Return Receipt Service.

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<b>SENDEE</b> <input type="checkbox"/> Complete <input type="checkbox"/> Complete <input type="checkbox"/> Print you <input type="checkbox"/> Attach to <input type="checkbox"/> Permit <input type="checkbox"/> Write to <input type="checkbox"/> The Rele Matador E & P Company Red Hills March 16, 2000 2/23/00		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: BTA Oil Producers 104 S. Pecos Midland, TX 79701 Attn: Bob Crawford		4a. Article Number 2191 940533	
5. Received By: (Print Name) [Signature]		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
6. Signature: (Addressee or Agent) [Signature]		7. Date of Delivery FEB 28 2000	
PS Form 3811, December 1994		8. Addressee's Address (Only if requested and fee is paid)	

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