

IN THE MATTER OF THE APPLICATION OF :
YATES PETROLEUM CORPORATION FOR AN : CASE NO. 10489
UNORTHODOX GAS WELL LOCATION, CHAVES :
COUNTY, NEW MEXICO :

YATES PETROLEUM CORP.
BEFORE EXAMINER STOGNER
NMOCD CASE NO. 10489
DATE: 06/11/92
EXHIBIT NO. 2

EXHIBIT "A"

Collins & Ware, Inc.
303 West Wall Ave, Suite 2200
Midland, Texas 79701

BHP Petroleum (Americas), Inc.
5847 San Felipe, Suite 3600
Houston, Texas 77057

EXHIBIT "B"

LOSEE, CARSON, HAAS & CARROLL, P. A.

ERNEST L. CARROLL
JOEL M. CARSON
JAMES E. HAAS
A. J. LOSEE
DEAN B. CROSS
MARY LYNN BOGLE

300 YATES PETROLEUM BUILDING
P. O. DRAWER 239
ARTESIA, NEW MEXICO 88211-0239

TELEPHONE
(505) 746-3505
TELECOPY
(505) 746-6316

May 12, 1992

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Collins & Ware, Inc.
303 West Wall Ave., Suite 2200
Midland, TX 79701

Re: Application of Yates Petroleum Corporation
for an Unorthodox Gas Well Location, Chaves
County, New Mexico

Gentlemen:

This office represents Yates Petroleum Corporation. On May 12, 1992, the above-referenced Application was sent for filing by Yates Petroleum Corporation. A copy of that Application is enclosed for reference. Yates has requested that this be heard by the Commission on June 11, 1992. I will advise you if that date is changed. Any party wishing to appear must file a prehearing statement by the Friday prior to the date of hearing, and any party wishing to receive other parties' prehearing statements or pleadings must file an entry of appearance. I would request that you notify us whether or not you will protest the proposed amendment referred to herein. If you do not intend to protest said Application, enclosed you will find a waiver whereby you can make that decision known, and if you will return said waiver to us, we will file it in this case, therefore alleviating the necessity of your attendance at the hearing on the matter.

P 574 253 203

Very truly yours,

LOSEE, CARSON, HAAS & CARROLL, P.A.

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to <u>Collins & Ware, Inc.</u>	
Street and No.	
P.O., State and ZIP Code	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$

SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3 and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt Fee will provide you the signature of the person delivered to and the date of delivery.		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: <u>Collins & Ware, Inc.</u> <u>303 West Wall Ste. 2200</u> <u>Midland, TX 79701</u>		4a. Article Number: <u>P 574 253 203</u>	
5. Signature (Addressee) <u>[Signature]</u>		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
		7. Date of Delivery <u>5-13-92</u>	
		8. Addressee's Address (Only if requested and fee is paid)	

U.S.G.P.O. 1989-234-555

June 1985

LAW OFFICES

LOSEE, CARSON, HAAS & CARROLL, P. A.

ERNEST L. CARROLL
JOEL M. CARSON
JAMES E. HAAS
A. J. LOSEE
—
DEAN B. CROSS
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P 574 253 208

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June 1985

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P.O., State and ZIP Code	
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5. Signature (Addressee): <u>[Signature]</u>		8. Addressee's Address (Only if requested and fee is paid)	