



Cross Timbers Operating Company

DHC 12/28/98
2152

December 3, 1998

Mr. David Catanach
Oil Conservation Commission
2040 South Pacheco
Santa Fe, NM 87505-6429

DEC - 7 1998

RE: Application for Downhole Commingling
State 367, Well No. 1
M-Sec 36-T21S-R37E
API No. 30-025-07043
Lea Co., NM

Dear Mr. Catanach:

Cross Timbers Operating Company is making application to downhole commingle the Tubb with the Drinkard and Blinbry in the captioned well. The following documents are enclosed for your review to approve Cross Timbers' request.

1. Original and one copy of Form C-107-A.
2. Form C-102 for each zone to be commingled.
3. Production curve for each zone.
4. Copy of Form C-101 and Form C-102 to add a zone to the current wellbore.
5. Notification list of all offset operators and a copy of notification letter with Certified Mail receipts .

If additional information is needed, please advise.

Very truly,

Ray F. Martin
Operations Engineer

RFM/jdc

Enclosures

DISTRICT I
P.O. Box 1980, Hobbs, NM 88240

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-107-A
New 3-12-96

DISTRICT II
811 South First St., Artesia, NM 88210

OIL CONSERVATION DIVISION

2040 S. Pacheco
Santa Fe, New Mexico 87505-6429

APPROVAL PROCESS:

☒ Administrative ☐ Hearing

DISTRICT III
1000 Rio Brazos Rd, Aztec, NM 87410

APPLICATION FOR DOWNHOLE COMMINGLING

EXISTING WELLBORE

☒ YES ☐ NO

Operator: Cross Timbers Operating Company 3000 N. Garfield, Suite 175, Midland, TX 79705
State 367 1 M-36-21S-37E Lea
Well No. Unit Ltr. - Sec - Twp - Rge County
OGRID NO. 005380 Property Code 003364 API NO. 30-025-07043 Spacing Unit Lease Types: (check 1 or more)
Federal ☐ State ☒ land/or Fee ☐

The following facts are submitted in support of downhole commingling:	Upper Zone	Intermediate Zones	Lower Zone
1. Pool Name and Pool Code	Blinebry Oil & Gas (06660)	Tubb Oil & Gas (60240)	Drinkard (19190)
2. Top and Bottom of Pay Section (Perforations)	5496'-5838'	6108'-6210' (est)	6297'-6489'
3. Type of production (Oil or Gas)	Oil	Oil	Oil
4. Method of Production (Flowing or Artificial Lift)	Artificial Lift	Artificial Lift	Artificial Lift
5. Bottomhole Pressure Oil Zones - Artificial Lift: Gas & Oil - Flowing: All Gas Zones: Estimated Current Measured Current Estimated Or Measured Original	a. (Current) 500	a. 500	a. 500
	b. (Original)	b.	b.
6. Oil Gravity (° API) or Gas BTU Content	36°	36°	36°
7. Producing or Shut-In?	Producing	Shut In	Producing
Production Marginal? (yes or no) * If Shut-In, give date and oil/gas/ water rates of last production Note: For new zones with no production history, applicant shall be required to attach production estimates and supporting data * If Producing, give date and oil/gas/ water rates of recent test (within 60 days)	Yes		Yes
	Date: Rates:	Date: Estimated Rates: 16/100/0	Date: Rates:
	Date: 11/21/98 Rates: 1.8/109/5	Date: Rates:	Date: 11/21/98 Rates: 1.2/100/2
8. Fixed Percentage Allocation Formula - % for each zone	Oil: 10 % Gas: 35 %	Oil: 84 % Gas: 32 %	Oil: 6 % Gas: 33 %

9. If allocation formula is based upon something other than current or past production, or is based upon some other method, submit attachments with supporting data and/or explaining method and providing rate projections or other required data.
10. Are all working, overriding, and royalty interests identical in all commingled zones? ☒ Yes ☐ No
If not, have all working, overriding, and royalty interests been notified by certified mail? ☐ Yes ☐ No
Have all offset operators been given written notice of the proposed downhole commingling? ☒ Yes ☐ No
11. Will cross-flow occur? ☐ Yes ☒ No If yes, are fluids compatible, will the formations not be damaged, will any cross-flowed production be recovered, and will the allocation formula be reliable. ☐ Yes ☐ No (If No, attach explanation)
12. Are all produced fluids from all commingled zones compatible with each other? ☒ Yes ☐ No
13. Will the value of production be decreased by commingling? ☐ Yes ☒ No (If Yes, attach explanation)
14. If this well is on, or communitized with, state or federal lands, either the Commissioner of Public Lands or the United States Bureau of Land Management has been notified in writing of this application. ☐ Yes ☒ No
15. NMOCD Reference Cases for Rule 303(C) Exceptions: ORDER NO(S). DHC-726 & DHC-317
16. ATTACHMENTS:
* C-102 for each zone to be commingled showing its spacing unit and acreage dedication.
* Production curve for each zone for at least one year. (If not available, attach explanation.)
* For zones with no production history, estimated production rates and supporting data.
* Data to support allocation method or formula.
* Notification list of all offset operators.
* Notification list of working, overriding, and royalty interests for uncommon interest cases.
* Any additional statements, data, or documents required to support commingling.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Ray Martin TITLE Operations Engineer DATE 11/30/98

TYPE OR PRINT NAME Ray F. Martin TELEPHONE NO. (915) 682-8873

CROSS TIMBERS OPERATING COMPANY
ATTACHMENT TO FORM C-107-A
APPLICATION FOR DOWNHOLE COMMINGLING
STATE 367 #1
LEA CO., NM

16. (I) This well has been downhole commingled in Blinebry and Drinkard since 1989 per DHC Order 726. The Blinebry/Drinkard production curve is attached.
- (II) The Tubb formation projected production was based on offset Tubb wells in the Tubb Oil & Gas Pool.
- (III) The Blinebry and Tubb zones have been downhole commingled on lease since 1980 in State 367 #4 per DHC Order 317.

District I
PO Box 1980, Hobbs, NM 88241-1980
District II
811 South First, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-102
Revised October 18, 1994
Instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-07043		² Pool Code 60240		³ Pool Name Tubb Oil & Gas	
⁴ Property Code 003364		⁵ Property Name State 367			⁶ Well Number 1
⁷ OGRID No. 005380		⁸ Operator Name Cross Timbers Operating Company			⁹ Elevation 3361'

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	36	21S	37E		660	South	660	West	Lea

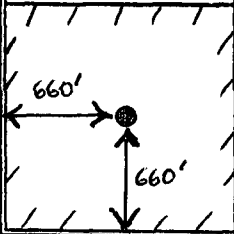
¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County

¹² Dedicated Acres 40	¹³ Joint or Infill	¹⁴ Consolidation Code	¹⁵ Order No.
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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

<p>16</p>				<p>17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>Ray Martin</i> Signature Ray F. Martin Printed Name Operations Engineer Title 11/30/98 Date</p> <p>18 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.</p> <p>Date of Survey Signature and Seal of Professional Surveyer: Certificate Number</p>

16				<p>17 OPERATOR CERTIFICATION</p> <p><i>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief</i></p> <p><u>Ray Martin</u></p> <p>Signature</p> <p><u>Ray F. Martin</u></p> <p>Printed Name</p> <p><u>Operations Engineer</u></p> <p>Title</p> <p><u>11/30/98</u></p> <p>Date</p>
				<p>18 SURVEYOR CERTIFICATION</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><u> </u></p> <p>Date of Survey</p> <p><u> </u></p> <p>Signature and Seal of Professional Surveyor:</p> <p><u> </u></p> <p>Certificate Number</p>
				

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State of New Mexico
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-025-07043	² Pool Code 19190	³ Pool Name Drinkard
⁴ Property Code 003364	⁵ Property Name State 367	⁶ Well Number 1
⁷ OGRID No. 005380	⁸ Operator Name Cross Timbers Operating Company	⁹ Elevation 3361'

¹⁰ Surface Location

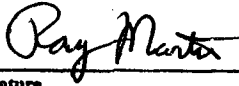
UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
M	36	21S	37E		660'	South	660'	West	Lea

¹¹ 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

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				<p>¹⁸ SURVEYOR CERTIFICATION</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>Date of Survey</p> <p>Signature and Seal of Professional Surveyer:</p> <p>Certificate Number</p>

Cross Timbers Oil Company

STATE 367

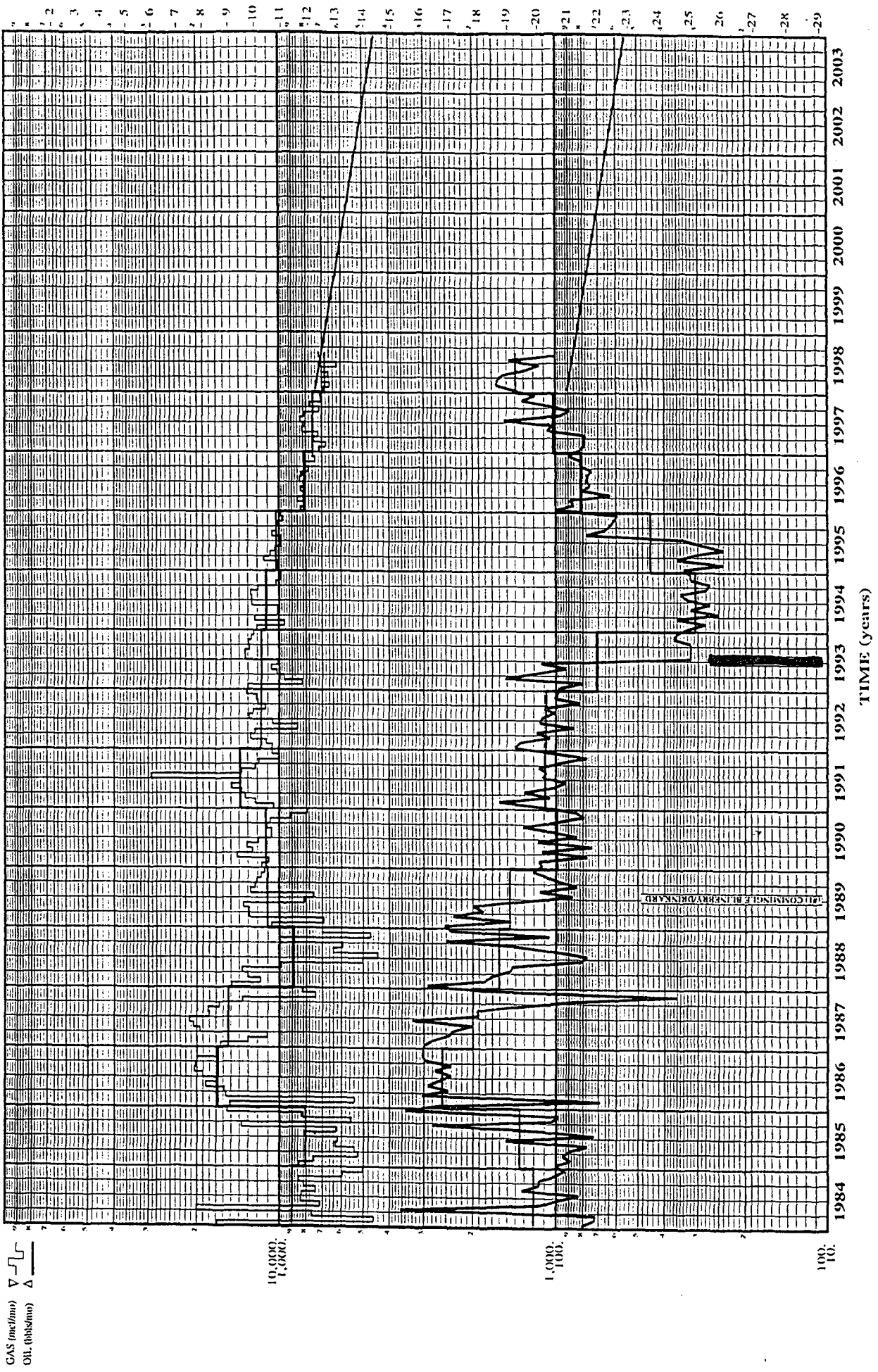
CROSS TIMBERS

BLIN/DRNKD (BLIN/DRNKD)

LEA, NEW MEXICO

36M 21S 37E

PERMIAN BASIN



District I
PO Box 1980, Hobbs, NM 88241-1980
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811 South First, Artesia, NM 88210
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2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-07043		Pool Code 60240		Pool Name Tubb Oil & Gas	
Property Code 003364		Property Name State 367			Well Number 1
OGRID No. 005380		Operator Name Cross Timbers Operating Company			Elevation 3361'

¹⁰ Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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¹¹ 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

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<p>18</p>				<p>¹⁸ SURVEYOR CERTIFICATION</p> <p>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.</p> <p>Date of Survey</p> <p>Signature and Seal of Professional Surveyor:</p> <p>Certificate Number</p>	

CROSS TIMBERS OPERATING COMPANY
APPLICATION FOR DOWNHOLE COMMINGLE

STATE 367 #1
BLINEBRY/TUBB/DRINKARD
SW/4 SW/4 SECTION 36-21S-37E
LEA COUNTY, NEW MEXICO

OFFSET OPERATORS

Exxon Company USA
P. O. Box 4358
Houston, Texas 77210-4358
Certified Mail: P 497 353 843

Section 2: E/2
T22S-R37E

OXY USA, Inc.
P. O. Box 50250
Midland, Texas 79705
Certified Mail: P 497 353 844

Section 35: SE/4
T21S-R37E

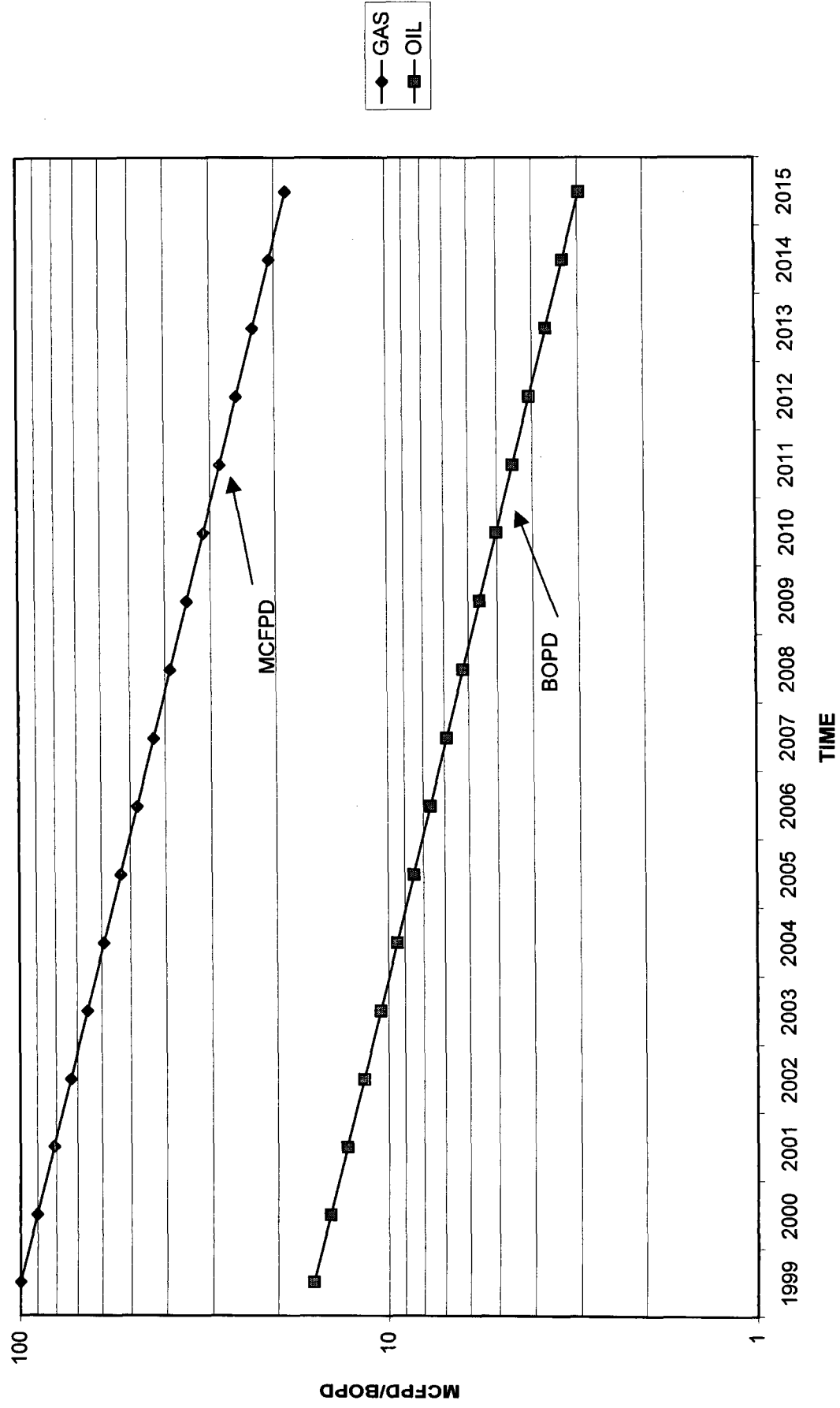
Apache Corporation
2000 Post Oak Blvd., Suite 100
Houston, Texas 77056-4400
Certified Mail: P 497 353 845

Section 36: SE/4 SW/4
T21S-R37E

Marathon Oil Company
P. O. 552
Midland, Texas 79702
Certified Mail: P 497 353 846

Section 1: NW/4
T22S-R37E

TUBB ESTIMATED PRODUCTION



District I
PO Box 1980, Hobbs, NM 88241-1980
District II
811 S. 1st Street, Artesia, NM 88210-2834
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
2040 South Pacheco, Santa Fe, NM 87505

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

☐ AMENDED REPORT

APPLICATION FOR PERMIT TO DRILL, RE-ENTER, DEEPEN, PLUGBACK, OR ADD A ZONE

¹ Operator name and Address Cross Timbers Operating Company 3000 N. Garfield, Suite 175 Midland, Texas 79705		² OGRID Number 005380
		³ API Number 30- 025-07043
⁴ Property Code 003364	⁵ Property Name State 367	⁶ Well No. 1

⁷ Surface Location									
UL or lot no.	Section	Township	Range	Lot. Idn	Feet from the	North/South Line	Feet from the	East/West line	County
M	36	21S	37E		660	South	660	West	Lea

⁸ Proposed 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
⁹ Proposed Pool 1 Tubb Oil & Gas (60240)					¹⁰ Proposed Pool 2				

¹¹ Work Type Code A	¹² Well Type Code 0	¹³ Cable/Rotary	¹⁴ Lease Type Code S	¹⁵ Ground Level Elevation 3361'
¹⁶ Multiple No	¹⁷ Proposed Depth 6550'	¹⁸ Formation Drinkard	¹⁹ Contractor NA	²⁰ Spud Date 01/04/99

²¹ Proposed Casing and Cement Program					
Hole Size	Casing Size	Casing weight/foot	Setting Depth	Sacks of Cement	Estimated TOC
17-1/2"	13-3/8"	48	297'	300	
10-3/4"	8-5/8"	32	2799'	1000	
7-7/8"	5-1/2"	17	6530'	400	

²² Describe the proposed program. If this application is to DEEPEN or PLUG BACK give the data on the present productive zone and proposed new productive zone. Describe the blowout prevention program, if any. Use additional sheets if necessary

1. Move in & rig up workover rig. POH w/rods & pump. Install double ram BOP. POH w/tubing.
2. Set RBP @ 6260'.
3. Perforate Tubb from 6108'-6210'.
4. Acidize & sand frac Tubb perforations.
5. Pull RBP @ 6260'.
6. Run tubing, pump & rods. Remove BOP. Return well to pumping downhole commingled in Blinbry (5496-5838'), Tubb (6108-6210') and Drinkard (6297-6489').

²³ I hereby certify that the information given above is true and complete to the best of my knowledge and belief.

Signature: *Ray F. Martin*

Printed name: Ray F. Martin

Title: Operations Engineer Date: 12/03/98

OIL CONSERVATION DIVISION

Approved by:

Title:

Approval Date:

Expiration Date:



Cross Timbers Operating Company

December 3, 1998

Marathon Oil Company
P. O. Box 552
Midland, Texas 79702

Certified Mail: P 497 353 846

RE: DHC of State 367 #1, Unit Letter M, Section 36, T21S, 37E
Offset Operator Notification

Dear Sir:

Please be informed that Cross Timbers Operating Company intends to downhole commingle the Tubb Oil and Gas Pool (60240) with the Blinebry Oil and Gas Pool (06660) and the Drinkard Pool (19190) in the State 367 #1. The well is currently downhole commingled in the Blinebry and Drinkard Pools. If you have any questions or objections, please contact Erich Palko at (817) 882-7265 or Ray Martin at (915) 682-8873.

Sincerely,

CROSS TIMBERS OPERATING COMPANY

Ray Martin
Operations Engineer

RFM:bu



Cross Timbers Operating Company

December 3, 1998

Apache Corporation
2000 Post Oak Blvd., Suite 100
Houston, Texas 77056-4400

Certified Mail: P 497 353 845

RE: DHC of State 367 #1, Unit Letter M, Section 36, T21S, 37E
Offset Operator Notification

Dear Sir:

Please be informed that Cross Timbers Operating Company intends to downhole commingle the Tubb Oil and Gas Pool (60240) with the Blinebry Oil and Gas Pool (06660) and the Drinkard Pool (19190) in the State 367 #1. The well is currently downhole commingled in the Blinebry and Drinkard Pools. If you have any questions or objections, please contact Erich Palko at (817) 882-7265 or Ray Martin at (915) 682-8873.

Sincerely,

CROSS TIMBERS OPERATING COMPANY

Ray Martin
Operations Engineer

RFM:bu



Cross Timbers Operating Company

December 3, 1998

Exxon Company USA
P. O. Box 4358
Houston, Texas 77210-4358

Certified Mail: P 497 353 843

RE: DHC of State 367 #1, Unit Letter M, Section 36, T21S, 37E
Offset Operator Notification

Dear Sir:

Please be informed that Cross Timbers Operating Company intends to downhole commingle the Tubb Oil and Gas Pool (60240) with the Blinebry Oil and Gas Pool (06660) and the Drinkard Pool (19190) in the State 367 #1. The well is currently downhole commingled in the Blinebry and Drinkard Pools. If you have any questions or objections, please contact Erich Palko at (817) 882-7265 or Ray Martin at (915) 682-8873.

Sincerely,

CROSS TIMBERS OPERATING COMPANY

Ray Martin
Operations Engineer

RFM:bu



Cross Timbers Operating Company

December 3, 1998

OXY USA, Inc.
P. O. Box 50250
Midland, Texas 79705

Certified Mail: P 497 353 844

RE: DHC of State 367 #1, Unit Letter M, Section 36, T21S, 37E
Offset Operator Notification

Dear Sir:

Please be informed that Cross Timbers Operating Company intends to downhole commingle the Tubb Oil and Gas Pool (60240) with the Blinebry Oil and Gas Pool (06660) and the Drinkard Pool (19190) in the State 367 #1. The well is currently downhole commingled in the Blinebry and Drinkard Pools. If you have any questions or objections, please contact Erich Palko at (817) 882-7265 or Ray Martin at (915) 682-8873.

Sincerely,

CROSS TIMBERS OPERATING COMPANY

Ray Martin
Operations Engineer

RFM:bu

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ 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 will show to whom the article was delivered and the date delivered.		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: Exxon Company USA P. O. Box 4358 Houston, TX 77210-4358		4a. Article Number P 497 353 843	
4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD		7. Date of Delivery	
5. Received By: (Print Name)		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) X			

PS Form 3811, December 1994

102595-99-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 497 353 843

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to		Exxon Company USA
Street & Number		P. O. Box 4358
Post Office, State, & ZIP Code		Houston, TX 77210-4358
Postage	\$.32
Certified Fee		1.35
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to Whom & Date Delivered		1.10
Return Receipt Showing to Whom, Date, & Addressee's Address		
TOTAL Postage & Fees	\$	2.77
Postmark or Date 12/3/98		

PS Form 3800, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 497 353 843

MAIL

P 497 353 844

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to		OXY USA, Inc.
Street & Number		P. O. Box 50250
Post Office, State, & ZIP Code		Midland, TX 79705
Postage	\$.32
Certified Fee		1.35
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to Whom & Date Delivered		1.10
Return Receipt Showing to Whom, Date, & Addressee's Address		
TOTAL Postage & Fees	\$	2.77
Postmark or Date		
12/3/98		

PS Form 3800, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 497 353 844

MAIL

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ 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 will show to whom the article was delivered and the date delivered.		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: OXY USA, Inc. P. O. Box 50250 Midland, TX 79705		4a. Article Number P 497 353 844	
4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD		<input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured	
5. Received By: (Print Name)		7. Date of Delivery	
6. Signature: (Addressee or Agent) X		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1994

102595-97-8-0179

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 497 353 845

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to Apache Corporation	
Street & Number 2000 Post Oak Blvd, Suite 100	
Post Office, State, & ZIP Code Houston, TX 77056-4400	
Postage	\$.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.77
Postmark or Date 12/3/98	

PS Form 3800, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 497 353 845

MAIL

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SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ 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 will show to whom the article was delivered and the date delivered.		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: Apache Corporation 2000 Post Oak Blvd., Suite 100 Houston, TX 77056-4400		4a. Article Number P 497 353 845	
4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD		<input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured	
5. Received By: (Print Name) X		7. Date of Delivery	
6. Signature: (Addressee or Agent) X		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1994

102505-00-8-0220

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ 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 will show to whom the article was delivered and the date delivered.		3. Article Addressed to: Marathon Oil Company P. O. 552 Midland, TX 79702	
5. Received By: (Print Name) X		4a. Article Number P 497 353 846	
6. Signature: (Addressee or Agent) X		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
8. Addressee's Address (Only if requested and fee is paid)		7. Date of Delivery	

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

102595-99-B-0229

Domestic Return Receipt

P 497 353 846

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Do not use for International Mail (See reverse)

Sent to	
Marathon Oil Company	
Street & Number	
P. O. Box 552	
Post Office, State, & ZIP Code	
Midland, TX 79702	
Postage	\$.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	
12/3/98	

PS Form 3811, April 1995

Fold at line over top of envelope to the right of the return address

CERTIFIED

P 497 353 846

MAIL