

FAX COVER SHEET

То:	Mr. Michael Stogner	From:	Nancy Bratcher
Company:	Oil Conservation Division	Date:	May 16, 2006
Fax No:	505-476-3462	Pages:	20
Re:	SS Snakebite #2		

If you have trouble receiving this fax, please call Nancy at 505-748-3303.

P.O. Box 227 • Artesia, New Mexico 88211-0227 • 505-748-3303 • Fax 505-746-2523



Memo

To:	Mr. Michael Stogner, Oil Conservation Division
Address:	1220 St. Francis Drive, Santa Fe, NM 87504
From:	Nancy Bratcher - Marbob Energy Corporation
Date:	5/16/2006
Re:	SS Snakebite #2

Dear Mr. Stogner:

Enclosed is a copy of the green cards that we received back from the contacted parties and a confirmation sheet that Gretchen T. Lane received her copies by fax. I also enclosed a copy of Cynthia Clayton Burr's returned envelope stating that it was "unclaimed". I spoke with Cynthia and mailed it again. I am still waiting on that green card to return. Last I enclosed the returned envelope stating that Jill E. Cornell's was also "unclaimed". After several phone calls I sent it Fed-Ex and a copy of that is enclosed as well.

If you need anything else or have any questions please call me at 505-748-3303. Thank you and have a great day!

Sincerely,

Nancy Bratcher Land Department

The attached is being sent to you without benefit of a formal cover letter in the hope that promptness is more important than formality.

P.O. Box 227 - Artesia, NM 88211-0227 - 505-748-3303 - Fax 505-746-2523

Confirmation Report - Memory Send

· .		Time : 05-10-06 11:11 Tel line : 15057462523 Name : MARBOB
	:	785
Job number	•	(65
Date	:	05-10 11:09
To	;	15052947230
Document pages	:	06
Start time	:	05-10 11:09
End time	:	05-10 11:11
Pages sent	:	06
Status	:	OK
Job number ; 785		+++ SEND SUCCESSFUL +++



FAX TRANSMITTAL SHEET

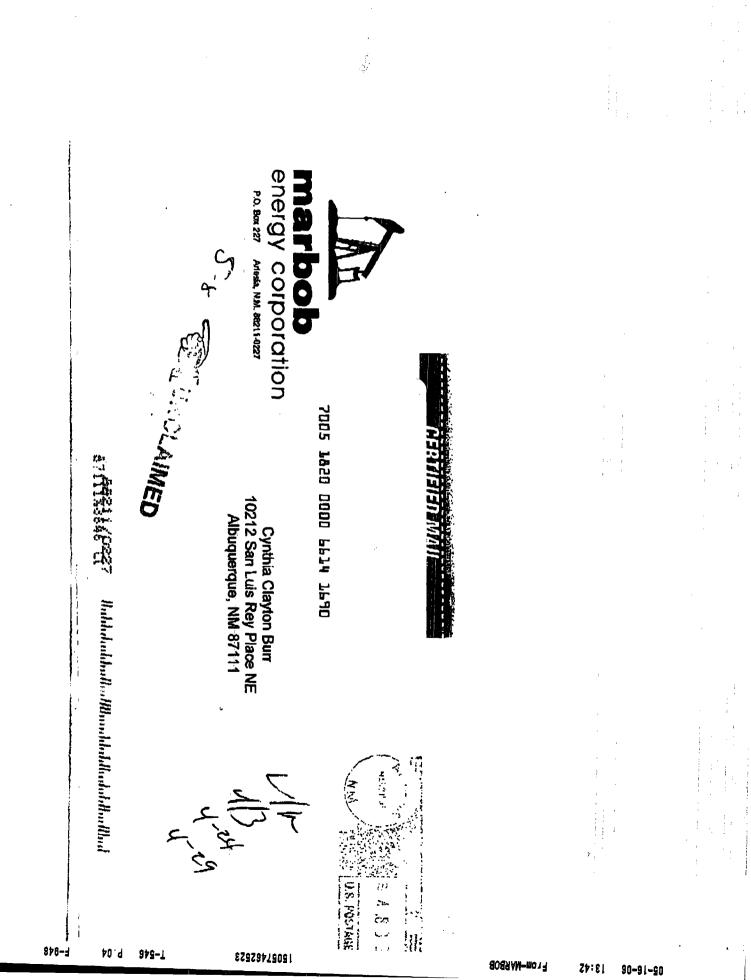
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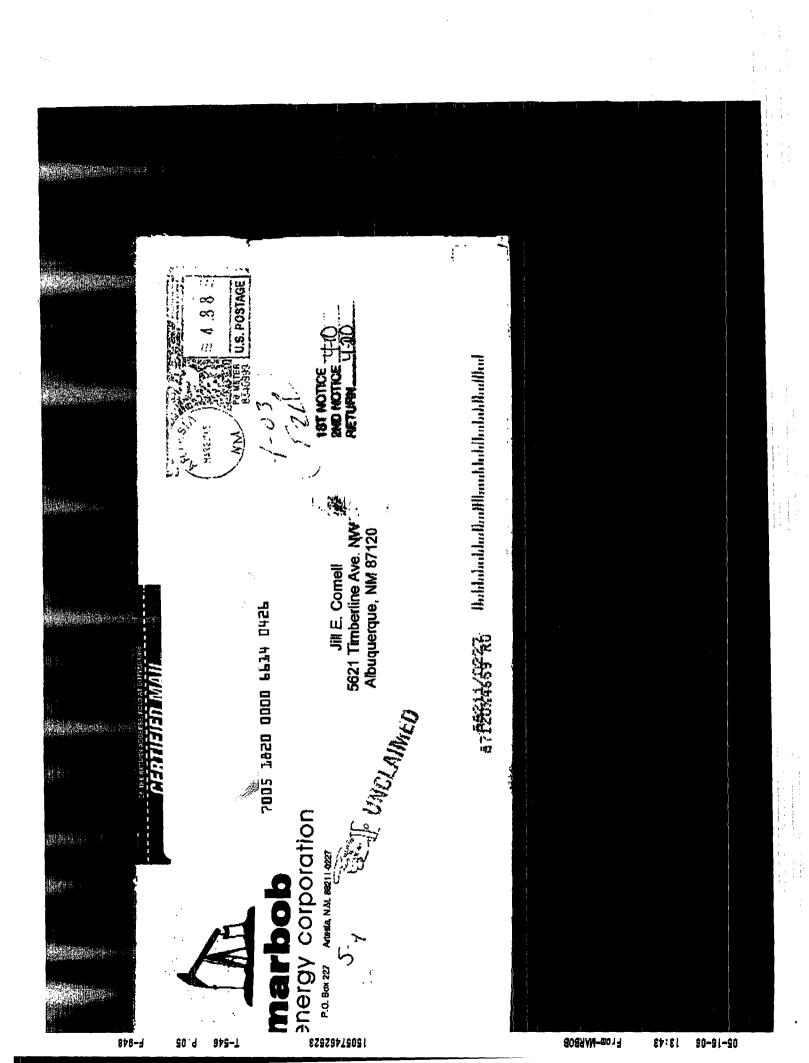
IF YOU HAVE ANY TROUBLE RECEIVING THIS FAX, FLEASE CONTACT ME.

PHONE: 505/748-\$803

Fax: 505/744-2523

P.C. Box 227 - Artacia, New Maxiou 88211-0227 + (505) 748-3303 - Max (665) 748-2523





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San Diego, CA 92106-1537	3. Service Type
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From-MARBOB	15057462523 T-546 P.08
Complete items 1, 2, and 3. Also complete	A Signature
item 4 if Restricted Delivery is desired.	X My August Agent
Print your name and address on the reverse so that we can return the card to you.	B_Boceived by (Printed Name) C. Dete of Delh
Attach this card to the back of the mailplece,	CARY GONISAS 4120
or on the front if space permits.	D. Is delivery address different from item 17 . Yes
1. Article Addressed to:	If YES, enter delivory address below: 🔲 No
	APK 17 2006
Sandra Lee Gonzales	
3065 South Marissa Drive	
Tucson, AZ 85730	3. Service Type 2 Certified Mail Di Express Mail
	Registered Return Receipt for Merchan
S.S. Shakebite #2	
2. Article Number	- 4. Restricted Delivery? (Extra Pee) □ Yee
	20 0000 6614 1676
PS Form 3811, February 2004 Domestic Re	sturn Receipt ` 102595-02-M-
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete Items 1, 2, and 3. Also complete	A Signature
item 4 If Restricted Delivery is desired.	X Agent
Print your name and address on the reverse so that we can return the card to you.	K. Received by (Printed Name) C. Date of Delin
Attach this card to the back of the mailpiece,	Jennifer Fess (er
or on the front if space permits.	D. is delivery address different from item 1? Ves
1. Article Addressed to:	If YES, enter delivery address below: No
. -	
Jennifer Thickstun Fessler	
2557 Roscomare Rd.	L
Los Angeles, CA 90077-1814	3. Service Type
-	Registered References Mail
< < < m kd ite #2	U Insured Mail C.C.D.
D.D NVXKIMITE IF L	4. Restricted Deliverv? (Extra Fee)
· 2. Artic	
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PS For	12595-02-M
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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item 4 if Restricted Delivery is desired. Print your name and address on the reverse	X. T. Clonm - Addres
so that we can return the card to you.	B. Received by (Printed Name) C. Date of Deliv
Attach this card to the back of the maliplece, or on the front if space permits.	4/3/06
1. Article Addressed to:	D. is delivery address different from item 17 D Yes If YES, enter delivery address below: D No
Gary T. Cloman	APR 1 3 2006
4 Elk Circle	
Salinas, CA 93905	S. Serviće Type
	Registered Return Receipt for Merchand
CE SMOVINILA HO	
S.S. SNGKEDITE #2	4. Restricted Delivery? (Extra Fee)
(Transfer from service tabel) 7005 18	
P\$ Form 3811, February 2004 Domestic Re	turn Receipt 102395-02-M-
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item 4 if Restricted Delivery is desired, Print your name and address on the reverse	X A OLUCE Agent
so that we can return the card to you.	B. Received by (Painted Name) C. Date of Deliver
Attach this card to the back of the maliplece, or on the front if space permits.	HVA CORNET (473/06
Anticle Addressed to:	D. Is delivery address different from item 1? Ves
	If YES, enter delivery address below; 🛛 No
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11	APR 0 5 2006
11	
Craig A. Cornell	
43 Rincon Loop Rd.	3. Service Type
	Contrillod Mall 🔲 Express Mall
43 Rincon Loop Rd. Tijeras, NM 87059	
43 Rincon Loop Rd.	Ver Contrilod Mail D Express Mell
43 Rincon Loop Rd. Tijeras, NM 87059 55 Snake bite #2	Contribud Mail D Express Mail

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05-16-06

13:43	From-MARBOB	15057462523 T-546 P.09/20 F-948
	Complete items 1, 2, and 3. Also complete	A. Signature/
	item 4 if Restricted Delivery is desired.	Agent
	Print your name and address on the reverse so that we can return the card to you.	B. Received by (Printed Name) C. Date of Delivery
•	Attach this card to the back of the mailplece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
	1. Article Addressed to:	D. Is delivery address different from itom 17 Q Yes
		If YE9, enter delivery address below:
		APP 0 5 appar
	Charles Arthur Clayton 10607 North 33rd Avenue	APR 0 5 2006
	Phoenix, AZ 85029	3. Service Type
		Certified Mail D Excress Mail
		Registered Nor Friturn Receipt for Merchandise
	5.4 Knakohite #2	.4. Restricted Delivery? (Dytre Fee)
	2. A	
	PS F	102595-02-M-1640
	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
t (14) 1	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Signature
÷	Print your name and address on the reverse so that we can return the card to you.	B. Received by (Printed Name) C. Thate of Delivery
	Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Thate of Delivery B. WONTH ONACRUCH 306
	1. Article Addressed to:	D. is delivery address different from itom 1? D Yas
		If YES, enter delivery address below: DNo
1		
	BK Bill Horation Corporation 101593 11th Street, Suite 401	APR 0 5 2005
	Tulsa, OK 74128	3. Service Type
		Certified Mail 🔲 Express Mail
		Registered Y2-Realth Receipt for Merchandise Insured Mail C.O.O.
	S.S. Snakebite #2	4. Restricted Delivery? (Extra Fee)
	2. Article Number 7005 38	320 0000 6614 1546
		atum Receipt 102595-02-M-1540
	SENDER: COMPLETE THIS SECTION	. COMPLETE THIS SECTION ON DELIVERY
	Complete Items 1, 2, and 3. Also complete	A. Signature
	 Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	<u>and a second s</u>
· .	 Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. 	A. Signature X. A. Cweint Marrey Agent B. Received by (Pated Name) C. Date of Delivery
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	 Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 mallplece, or on the front if space permits. 1. Article Addressed to: Catherine Ross 	A. Signature X. A. Weith The Agent B. Received by (Patted Name) A. E. Content Nome C. Date of Delivery A. E. Content Nome C. Date of Delivery A. E. Content Nome C. Date of Delivery A Content Nome C. Date of Delivery A Content Nome Hypes, enter delivery address below: No APR 0.5
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	 Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 mallplece, or on the front if space permits. 1. Article Addressed to: Catherine Ross 3000 Frontier NE Albuquerque, NM 87106 	A. Signature X. A. Weith The Agent Addressee B. Received by (Patted Name) A. E. CVIENDIT 1:055 4-3-06 D. Is delivery address addr
	 Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 mallplece, or on the front if space permits. Article Addressed to: Catherine Ross 3000 Frontier NE Albuquerque, NM 87106 S.S. SACKEDITE #2. 	A. Signature X. A. Weith and Depart Addressee B. Received by (Panted Name) A. E. CYNEROM C. Date of Delivery A. C. Date of Deliver
	Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 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 mallplece, or on the front if space permits. Attach this card to the back of the mallplece, or on the front if space permits. Catherine Ross 3000 Frontier NE Albuquerque, NM 87106 SS SACKEDITE #22 Article Number (Transfer from service label) 7005 1	A. Signature X. A. Gweith and Delivery A. E. Contect Name) A. E. Contect Name) C. Date of Delivery A. E. Contect Name) C. Date of Delivery 4 - 3 - 06 D. Is delivery address below: No APR 0.5 S. Servita Appr 5 Ver Contified Nell S. Deparess Mell Brogissened Defenses Mell Brogissened Defenses Mell Brogissened Defenses Mell ARE C.O.D. 4. Restricted Delivery? (Extra Pee) D Yes
	 Complete Items 1, 2, and 3. Also complete item 4 If Restricted Delivery is desired. 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 mallplece, or on the front if space permits. 1. Article Addressed to: Catherine Ross 3000 Frontier NE Albuquerque, NM 87106 S.S. SACKEDITE #2. 2. Article Number (Transfer from service label) 	A. Signature X. A. Weith and Depart Addressee B. Received by (Panted Name) A. E. CYNEROM C. Date of Delivery A. C. Date of Deliver
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	Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your mane and address on the reverse so that we can return the card to you. Attach this card to the back of the mallplece, or on the front if space permits. Catherine Ross 3000 Frontier NE Albuquerque, NM 87106 SS SACKEDITE THE Albuquergue 700 7005 1 PS Form 3811, February 2004 Pomestic R SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete tem 4 KBestricted Delivery is desired. Frint your, name and address on the reverse	A. Signature X. A. Weith and Depart Addressee B. Received by (Patted Name) A. EV. CMILLIONT 1:055 4-3-06 D. Is delivery address of the and 1? Vos If YES, enter delivery address below: No APR 0.5 /// APR 0.5 // S. Service app Veroentified Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Ves BED 000 4614 0415 Insured Mail 102595-02-M-1640 COMPLETE THIS SECTION ON DELIVERY A Signature X. With May Addressee
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05-16-06	13:44	From-MARBOB	15057482523 T-548 P.12/20 F-848
		Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Sicherung
		Print your name and address on the reverse	X Addressee
		so that we can return the card to you. E Attach this card to the back of the malipiece,	B. Beceived by (Printed Marne) C. Date of Delivery
		or on the front if space permits.	COEUNY PALAMUS
		1. Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
		Diverse GP, III	APR 1 0 2006
		PO Box 2059	
		San Antonio, TX 78297-2059	3. Service Type
			Centified Mail D Express Mail
			Registered Val Return Receipt for Merchandise Insured Mail Q.O.D.
		S.S. Snakebite #2	4. Restricted Delivery? (Extra Fee)
		2. Article Number 7005 18	20 0000 6614 1577
	; , [
		PS Form 3811, February 2004 Domestic Ret	turn Receipt 102595-02-M-1540
	1	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
	,	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Gigneture
	· .	Print your name and address on the reverse	X Phin Formil D Addressee
		so that five can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery
		or on the front if space permits.	b. is delivery address different from here 12 Yes
		1. Article Addressed to:	b. is delivery address different from item 1? Yes If YES, enter delivery address below: PTNo
		Rachelle E. Gamble	
		300 Bandon Avenue SW	
		Bandon, OR 97411	APR 1 0 2006
		Dancon, OK 87411	3. Septce Type
			Certified Mail
			Registered TREAT Receipt for Merchandiae
		5.5 Snakebite #2	4. Restricted Delivery? (Extra Fee)
		2. Article Number	
			620 0000 6614 1911
		PS Form 3811, February 2004 Domestic Re	102595-02-M-1540
		SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON OCLIVERY
		Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	
	, ,	Print your name and address on the reverse	Addressed
		so that we can return the card to year.	B. Received by (Printed Name) DR Disco HUDry
		or on the front if space permits.	D, is delivery address different from item 1? Ves
		1. Article Addressed to:	If YES, enter delivery address below:
		a state	App.
		John Thickstun	APR 10 2005
		6672 Michaeljohn	- 2006
		La Jolla, CA 92037-6239	. Service-Type
			Var Certified Mail D Booress Mail
		5.5. Snakebite #2	4. Rostricted Delivery? (Edra Fee)
		2. Article Number (Transfer from service table) 7005 14	20 0000 6614 1836
		PS Form 3811, February 2004 Domestic Re	
	1	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
			A./Siggsture // //
		Item 4 If Restricted Delivery is desired.	
		Print your name and address on the reverse so that we can return the card to you.	Kandel Since Z Addressee
	1	Attach this card to the back of the mailpiece, or on the front if space permits.	B-Received by (Pomped Name) C. Date of Delivery AVTOIL (DMAN 4/6/000
	-		D. Is delivery address different from them 1?
			If YES, enter délivery address below: 🛛 No
		·]	APRIO
		Carol Ann Cloman	""M] ()
		4560 Nassaa Place	
		Boulder, CO 80301-6032	3. Septe Type
			Registered Return Receipt for Merchandise
		S.S. Snakebite #2	D Insured Mail C.O.D.
	-	2. Article Number	4. Rostricted Delivery? (Extra Fac)
	-	(Transfer from service lebel) 7005 1820	0000 6614 1874
		PS Form 3811 February 2004 Domostic Ration	Renal of the sea

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05-16-06 13:44 From-MARBOB 15057462523 T-546 P.13/20 F-948 Complete Items 1, 2, and 3. Also complete Item 4 if Restricted Delivery is desired. A. Signature C Agent Х 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 maliplece, C Addressee Pete of Delivery B. Received by (Printed Name) 106 or on the front if space permits, Yes D. is delivery address different from item 1? 1. Article Addressed to: DÍ No If YES, enter delivery address below: APR 10 200 Susan Thickstun 5690 Arbor Grove Ct. Sorvjoe Type San Diego, CA 92121-4343 Certified Mall Ecoress Mail -Return Receipt for Marchan Insured Mail C.O.D. S.S. Snakebite #2 🗖 Yee 4. Restricted Delivery? (Edge Fee) 2. Article Number 7005 1820 0000 6614 1799 (Transfer from service label) 102585-02-14-1540 PS Form 3811, February 2004 Domestic Return Receipt COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Detivery is desired.
 Print your name and address on the reverse. A. Slon Agent Agent X A so that we can return the card to you. C. Date of Delivery B. Received by (Prl or on the front if space permits. ĥ Ves D; Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: APR 1 0 2006 George G. Eddy, Jr. rustee, Josephine Tracy Eddy Revocable Tru 809 Terrace Mountain Drive Austin, TX 78746-2850 3. Service Type 🛛 Express Mail C Registered LE Return Receipt for Merchandlee Insured Mali 🗖 0.0.D. Snake bite #2 4. Restricted Delivery? (Edga Fee) Ves Article Numbe 7005 1820 0000 6614 0372 (Transfer from service label) PS form 3811, February 2004 102595-02-M-1540 . Domestic Return Receipt SENDER: COMPLETE THIS SECTION complete this section on delivery Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. A. Sia Agent Print your name and address on the reverse so that we can return the card to you. 11 Addressee by (Printed No £ C. Date of Delivery E Attach this card to the back of the mailpiece, or on the front if space permits. 1? 🗆 Yes D. 15(3) livery aride 1. Article Addressed to: If YES, ent Cheşapeake Energy Corporation P.O. Box 18496 Oklahoma City, OK 73154 3. Service Type Certified Mail ПЕф s Mail VE-Return Receipt for Merchandise Registered Insured Mail C.O.D. 5.5. Shake bite #2 4. Restricted Delivery? (Bitra Fee) Yes 2. Article Number 7005 1820 0000 6614 1935 (Thans ler from service lebel) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. A. Skapeture x daran Maare Agent Print your name and address on the reverse // Addresse so that we can return the card to you. C. Dig B. Received by (Printed Name) of De Attach this card to the back of the mailpiece, ain May or on the front if space permits. nt from item 17-10 Yes D. Is delivery addre 1. Article Addressed to: If YES, enter delivery addr APR 1 0 2005 Sarah Magee PO Box 506 Hot Springs, AR 71902-0506 3. Service Jyp E Certif ied M C Register 1000 I insured Mail <u>55 Snakebite</u> #2 4. Restricted Delivery? (Extra Fee) 🗆 Yes 2. Article Number 2005 **1820 0000 be**-(Transfer from service labol) wm 3811 Fabruary 2004 DA S. tin Roturn Ronalet -----

15057462523 From-MARBOB T-546 P.14/20 F-948 05-16-06 13:44 VERY Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ÷. A. Slanat C Agent Print your name and address on the reverse Addressee Attach this card to the back of the mailpiece, or on the front if space permits. C: Dato of Delivery D. la delivery addre st from item 17 1. Article Addressed to: ss di If YES, enter deli ΠŇ APR 1 0 2000 **Tom Thickstun** 312 Foxglove Service Typ Kyle, TX 78640 E Certified N D Expe Registered **SP16** 🖾 Insured Mail C C.O.D. 55 Snakebite # 4. Restricted Delivery? (Extra Fee) 🗖 Yes Article Number 7005 1820 0000 6614 1805 (Thansfer from service label) PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540 SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse A. Signature 🖾 Agent X CI Addres so that we can return the card to you. Attach this card to the back of the mailpiece, C. Date of Dolivery 51 or on the front it space permits. delivery add ss diffe 1. Article Addressed to: APR 1 0 200 AP. 13 2000 j Li rM na North 02 Kona, Ltd. 6800 Imperial Valley Dr., Suite 27 Houston, TX 77060-3144 Furth Receipt for M rchandia Ĉ.O.D. - -55 Snakebite #2 4. Restricted Delivery? (Extra Fee) L Yes 2. Article Number 7005 1820 0000 6614 1584 (Transfer from sorv (ce *label*) PS Form 3811, February 2004 Domestic Return Receipt 102596-02-14-1540 SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 Print your name and address on the reverse A, Signature 20.57 CI Agent Address so that we can return the card to you. Attach this card to the back of the mailple or on the front if space permits. to del dress different from itom 1 ш Yes 1. Article Addressed to: H XES delivery address below: APR 1 0-2005 Bill Toffelmire 10760 Villa Torre Street Las Vegas, NV 89141 3. Service Type VI Centified Mail Express Mail Registered VI Return Receipt for Merchandico Insured Mall 🗖 C.O.D. 55, Snakebite # 4. Restricted Delivery? (Extra Fee) Ves Articlo Numbe 7005 1820 0000 6614 1720 (Transfer from servic PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540 COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse Agent X Addressee Attach this card to the back of the mallpiece, or on the front if space permits. or (Printed Name) od b<u>y (P</u>i C. Date of Deliver -3-06 Steve D. is dela 1. Article Addressed to: D No delivery ad APR 1 0 2005 APR 0 3 2006 Steve Toffelmire **413 North Front Street** MAL MAL Dardanelle, AR 72834-3827 Express Mail 1216 Registered um Receipt fo r Merchand 🗖 insured Mali C.O.D. 55. Snakebite #2 4. Restricted Delivery? (Extra Foe) 🗋 Yeş 2. Article Num 7005 1820 0000 6614 1133 (Transfer from service label)

Complete items 1 2 and 2 Alas semilate	A. Signification
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	
Print your name and address on the reverse	Addressed And Andressed
 So that we can return the card to you. Attach this card to the back of the malipiece, or on the front if space permits. 	B. Received by (Printed Name) C. Date of Delivery
1. Article Addressed to:	D. Is delivery address different from item 1? If YES, enter delivery address below: No
×****	APPana
enristopher G. Cornell	APR 1 0 2006
-402 Spencer	
Las Vegas, NV 89101	S. Service Type C. Certified Mail C. Express Mail
	Certified Mail D Express Mail Registered C-Return Receipt for Merchandise Insured Mail D C.O.D.
5.5 Snakebite #2	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7005	1820 0000 6614 1119
	etum Recelpt 102595-02-14-154
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete	A. Signature
item 4 if Restricted Delivery is desired.	Agent
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 mailplece,	B. Received by (Printed Name) C. Gate of Pellver
or on the front if space permits.	D is desired and and a different from item 18/ 1/199
1. Article Addressed to:	D. Is delively address different/from item 17 2798 If YES, enter delivery address below: DNo
+	
Genesis Limited Partnership	APR 1 0 2006
PO Box 1363	
Mt. Pleasant, SC 29465-1363	3. Service Type
	Certified Mail D Express Mail
	Insured Mali C.O.D.
55 snakebite #2	4. Restricted Delivery? (Extra Fae)
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(Transfer from service label) 7005	LA20 0000 6614 1553
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15057462523 T-546 P 18/20 F-948 05-16-06 13:45 From-MARBOB DELIVER Complete Items 1, 2, and 3. Also complete Complete items 1, 2, and 3, Also complete item 4 if Restricted Delivery is desired.
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05-16-06

05-16-06	3 13:45 From-MARBOB	15057462523	T-546 P.20/20
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	so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name)	C. Date of Delivery
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	San Antonio, TX 78258	ADDAD	20000
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	Saratoga, CA 95070-1022	3. Service Type	
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Stogner, Michael, EMNRD

From:	Nancy Bratcher [landtech@marbob.com]	Sent:	Mon 5/22/2006 11:54 AM
To:	Stogner, Michael, EMNRD		
Cc:			
Subject:	SS Snakebite #2		

Attachments:

Dear Mr. Stogner:

May 16 I faxed you a copy of the green cards that we received back from the contacted parties on the SS Snakebite #2. This coming Friday, May 26, we have a chance to move to that location. My boss, Raye Miller, is in Chicago this week and has asked me to contact you to see if there is any way we can get our application approved before Friday for this unorthodox location. Please advise us if it can't be approved before Friday and we will make other arrangements. You can email me back at <u>landtech@marbob.com</u> or you can call me at 505-748-3303.

Thank you for your time,

Nancy Bratcher Land Department

Mote to file 0, TDS0-609357505 Highlights from my beligher conversation w/ 110. Raye Miller (8:45 Am, May 31, 2006: - directional deitting is not cost effective - location chargen to avoid severe slope / hill sich - Mait B is locuted at the edge at an existing from w/coltication - There is a City of Carlebad water supply pipeline in the General even of aveidance - The Dise Tracy lease congrises the NW/4 NE/4 5/2 NE/4 and S/2 NU/4 of Sec. 9 - NE/4 NE/4 of Sec 9 has ilendical evership as to WE Requiry and overiding coyalky interests. - 10:00 an bud. Some 7, 2006 Mr. Mayo Miller came by to check on the status of This application & will leave a menage on his all plane are an rela is minal: (505) - 513-0176