GILLER BIVISIHAL J. RASMUSSEN OPERATING, INC.
SIX DESTA DRIVE SUM SOSS RECEIVED

MIDLAND, TEXAS 79705 (915) 687-1664

'90 MAY 29 AM 9 41

May 22, 1990

Mr. William J. LeMay, Director New Mexico Oil Conservation Division P. O. Box 2088 Sante Fe, New Mexico 87501

Administrative Approval of an Unorthodox Well Location RE:

State "A" a/c 2(# 57)

Jalmat Gas Pool

Lea County, New Mexico

Dear Mr. LeMay,

Hal J. Rasmussen Operating Inc. respectfully requests to administratively approve the State "A" a/c 2 # 57 as an unorthodox well location in the Jalmat Gas Pool, located 1980 FEL and 1980 ft FNL of Section 9, T22S R36E, Lea County, New Mexico. The State "A" a/c 2 # 57 was a previously approved recompletion in the Jalmat Gas Pool. Due to Division Order No. R-9073 dated December 14, 1989, the above well location is now included in a 480 acre proration unit comprising the N 1/2 and the SW 1/4 of section 9 T22S R36E and is now classified as unorthodox . Hal J. Rasmussen Operating Inc. also requests administrative approval to simultaneously dedicate the 480 acre tract to well numbers 57,63,38, and 40 located in unit letters G,C,K, and A respectively.

The offset operators have been notified of this application by certified mail. Copies of the return receipts will be forwarded when received. Attached is a plat showing the location of the State "A" a/c 2 # 57 and the proration unit the well will be included in. A list of offset operators has also been attatched.

If you need any further information regarding this request, please call me at (915) 687-1664.

Thank-you for your consideration.

Sincerely,

CC: New Mexico OIl Conservation Division District 1 Office P.O. Box 1980 Hobbs, New Mexico 88240

State "A" a/c 2 well # 57 Offset Operators

Chevron
Mr. Al Bohling
P.O. Box 670
Hobbs, New Mexico 88240

Arco Ms. Cindy Ellis P O Box 1610 Midland , Texas 79702

Meridian
Mr. Jim Cramer
21 Desta Drive
Midland, Texas 79705

Marathon
P. O. Box 2405
Hobbs, New Mexico 88240

Submit to Appropriate District Office State Lease - 4 copies Fee Lease - 3 copies

DISTRICT III

#### State of New Mexico Energy, Minerals and Natural Resources Department

Revised 1-1-89

### OIL CONSERVATION DIVISION

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

P.O. Drawer DD, Artesia, NM 88210

P.O. Box 1980, Hobbs, NM 88240

## WELL LOCATION AND ACREAGE DEDICATION PLAT

1000 Rio Brazos Rd., Aztec, NM 87410 All Distances must be from the outer boundaries of the section Well No. Operator Hal J. Rasmussen Operating, Inc. STATE Unit Letter Section Township Range County Lea 225 36 € NMPM Actual Footage Location of Well: 1980 NORTH 1980 line feet from the feet from the line and Ground level Elev. Producing Formation Pool Dedicated Acreage: 480 Jalmat-TNSL-YTS-7R 2 27AY 1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below. 2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty). 3. If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.? If answer is "yes" type of consolidation If answer is "po" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if neccessary. No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division. CHEVRON OPERATOR CERTIFICATION I hereby certify that the information contained herein in true and complete to the best of my knowledge and belief. Signature 2310 Printed Name <u>Jay D</u>. Cherski Position Agent Company 1980 Hal J. Rasmussen Operating, Inc. #57 Date SE KTION SURVEYOR CERTIFICATION 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 1980' supervison, and that the same is true and ARCO correct to the best of my knowledge and belief. Date Surveyed Signature & Seal of Professional Surveyor Certificate No.

MARATHON



Six Desta Drive, Suite 2700 Midland, Texas 79705

May 22, 1990

Al Bohling Chevron P.O. Box 670 Hobbs, New Mexico 88240

Dear Mr. Bohling,

In accordance with New Mexico Oil Conservation Division regulations, you, as an offset operator, are hereby notified of Hal J Rasmussen Operating Inc.'s application to approve the State "A" a/c 2 well no. (57), a recent recompletion in the Jalmat Gas Pool, as a non-standard location. Due to Division Order No. R-9073 the well is now included in a 480 acre proration unit comprising the N 1/2 and the SE 1/4 of section 9 T22S R 36E. The well is located 1980 feet FNL and 1980 feet FEL of Section 9, T22S R36E, Lea County, New Mexico .

If you have no objections, please execute one copy of this letter and return it in the enclosed self addressed stamped envelope to the attention of Jay Cherski. The second copy may be retained for your files.

Thank you for your cooperation in this matter. If you have any questions, please contact Jay Cherski at (915) 687-1664.

Sincerely,

Hal J Rasmussen Operating, Inc.

Jav Cherski

EXECUTED THE /st DAY OF June, 1990

BY Clan W. Bohling
Special Projects Engineer

SIX DESTA DRIVE, SUITE 5850 MIDLAND, TEXAS 79705 (915) 687-1664

May 22, 1990

Marathon P.O. Box 2405 Hobbs, New Mexico 88240

Dear Sirs,

In accordance with New Mexico Oil Conservation Division regulations, you, as an offset operator, are hereby notified of Hal J Rasmussen Operating Inc.'s application to approve the State "A" a/c 2 well no. 57, a recent recompletion in the Jalmat Gas Pool, as a non-standard location. Due to Division Order No. R-9073 the well is now included in a 480 acre proration unit comprising the N 1/2 and the SE 1/4 of section 9 T22S R 36E. The well is located 1980 feet FNL and 1980 feet FEL of Section 9, T22S R36E, Lea County, New Mexico .

If you have no objections, please execute one copy of this letter and return it in the enclosed self addressed stamped envelope to the attention of Jay Cherski. The second copy may be retained for your files.

Thank you for your cooperation in this matter. If you have any questions, please contact Jay Cherski at (915) 687-1664.

Sincerely,

Hal J Rasmussen Operating, Inc.

Jay Cherski

EXECUTED	THE	DAY	OF	 1990
ВҮ				

DECENTE 5-25-90 AWB

SIX DESTA DRIVE, SUITE 2700 MIDLAND, TEXAS 79705 (915) 687-1664

May 22, 1990

Al Bohling Chevron P.O. Box 670 Hobbs, New Mexico 88240



Dear Mr. Bohling,

In accordance with New Mexico Oil Conservation Division regulations, you, as an offset operator, are hereby notified of Hal J Rasmussen Operating Inc.'s application to approve the State "A" a/c 2 well no. 57, a recent recompletion in the Jalmat Gas Pool, as a non-standard location. Due to Division Order No. R-9073 the well is now included in a 480 acre proration unit comprising the N 1/2 and the SE 1/4 of section 9 T22S R 36E. The well is located 1980 feet FNL and 1980 feet FEL of Section 9, T22S R36E, Lea County, New Mexico .

If you have no objections, please execute one copy of this letter and return it in the enclosed self addressed stamped envelope to the attention of Jay Cherski. The second copy may be retained for your files.

Thank you for your cooperation in this matter. If you have any questions, please contact Jay Cherski at (915) 687-1664.

Sincerely,

Hal J Rasmussen Operating, Inc.

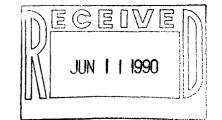
Jay Cherski

Ja Ch

EXECUTED THE /st DAY OF June 1990

BY Alan W-Bohling
Special Projects Engineer

SIX DESTA DRIVE, SUITE 2700 MIDLAND, TEXAS 79705 (915) 687-1664



May 22, 1990

Jim Cramer Meridian 21 Desta Drive Midland, Texas 79705

Dear Mr. Cramer,

In accordance with New Mexico Oil Conservation Division regulations, you, as an offset operator, are hereby notified of Hal J Rasmussen Operating Inc.'s application to approve the State "A" a/c 2 well no. 57, a recent recompletion in the Jalmat Gas Pool, as a non-standard location. Due to Division Order No. R-9073 the well is now included in a 480 acre proration unit comprising the N 1/2 and the SE 1/4 of section 9 T22S R 36E. The well is located 1980 feet FNL and 1980 feet FEL of Section 9, T22S R36E, Lea County, New Mexico .

If you have no objections, please execute one copy of this letter and return it in the enclosed self addressed stamped envelope to the attention of Jay Cherski. The second copy may be retained for your files.

Thank you for your cooperation in this matter. If you have any questions, please contact Jay Cherski at (915) 687-1664.

Sincerely,

Hal J Rasmussen Operating, Inc.

Jay Cherski

EXECUTED THE 8 DAY OF June 1990

Rebert J. Bradshow SR. STAFF EUV./REG. SpEC.

SIX DESTA DRIVE, SUITE 2700 MIDLAND, TEXAS 79705 (915) 687-1664

May 22, 1990

Cindy Ellis Kenn Rentro Arco P.O. Box 1610 Midland, Texas 79702



Dear Ms. Ellis,

In accordance with New Mexico Oil Conservation Division regulations, you, as an offset operator, are hereby notified of Hal J Rasmussen Operating Inc.'s application to approve the State "A" a/c 2 well no. 57, a recent recompletion in the Jalmat Gas Pool, as a non-standard location. Due to Division Order No. R-9073 the well is now included in a 480 acre proration unit comprising the N 1/2 and the/AT 1/4 of section 9 T22S R 36E. The well is located 1980 feet FNL and 1980 feet FEL of Section 9, T22S R36E, Lea County, New Mexico.

If you have no objections, please execute one copy of this letter and return it in the enclosed self addressed stamped envelope to the attention of Jay Cherski. The second copy may be retained for your files.

Thank you for your cooperation in this matter. If you have any questions, please contact Jay Cherski at (915) 687-1664.

Sincerely,

Hal J Rasmussen Operating, Inc.

Jay Cherski

Son Chi

EXECUTED THE 30TH DAY OF May 1990

BY

## HAL J. RASMUSSEN OPERATING, ON CONSERVATION DIVISION

SIX DESTA DRIVE, SUITE 2700 MIDLAND, TEXAS 79705 (915) 687-1664

'90 OCT 10 AM 9 31

October 2, 1990

Mr. Michael E. Stogner Chief Hearing Officer/Engineer Oil Conservation Division P.O. Box 2088 Sante Fe, New Mexico 87504

Dear Mr. Stogner:

Enclosed are copies of unorthodox location application letters, offset operator waiver letters and certified mail return receipts for the unorthodox location applications recently submitted on the <u>State "A" A/C 2 well No. 57</u>, and the State "A" A/C 3 well no. 8. Also enclosed is a copy of Administrative Order NSL-2730 along with a copy of the application to amend the above order as a result of Division Order R-9073. Copies of certified mail return receipts pertaining to this application have also been enclosed.

The above three wells are currently listed as "nc" in the most recent gas proration schedule in the Jalmat Field and I believe this is due to our failure to provide you with the complete information needed in order to process the documents necessary to obtain allowables for these wells.

I apologize for any inconvenience this has caused you and if you have any questions or need any further information please call Jay Cherski at 915-687-1664. Thank you for your consideration in this manner.

Sincerely,

Jay Cherski

Hal J Rasmussen Operating Inc.

SIX DESTA DRIVE, SUITE 5850 MIDLAND, TEXAS 79705 (915) 687-1664

May 22, 1990

Mr. William J. LeMay, Director New Mexico Oil Conservation Division P. O. Box 2088 Sante Fe, New Mexico 87501

RE: Administrative Approval of an Unorthodox Well Location State "A" a/c 2 # 57 Jalmat Gas Pool Lea County, New Mexico

Dear Mr. LeMay,

Hal J. Rasmussen Operating Inc. respectfully requests to administratively approve the State "A" a/c 2 # 57 as an unorthodox well location in the Jalmat Gas Pool, located 1980 FEL and 1980 ft FNL of Section 9, T22S R36E, Lea County, New Mexico. The State "A" a/c 2 # 57 was a previously approved recompletion in the Jalmat Gas Pool. Due to Division Order No. R-9073 dated December 14, 1989, the above well location is now included in a 480 acre proration unit comprising the N 1/2 and the SW 1/4 of section 9 T22S R36E and is now classified as unorthodox. Hal J. Rasmussen Operating Inc. also requests administrative approval to simultaneously dedicate the 480 acre tract to well numbers 57,63,38, and 40 located in unit letters G,C,K, and A respectively.

The offset operators have been notified of this application by certified mail. Copies of the return receipts will be forwarded when received. Attached is a plat showing the location of the State "A" a/c 2 # 57 and the proration unit the well will be included in. A list of offset operators has also been attached.

If you need any further information regarding this request, please call me at (915) 687-1664.

Thank-you for your consideration.

Sincerely,

Jay Cherski

CC: New Mexico OIl Conservation Division District 1 Office P.O. Box 1980
Hobbs, New Mexico 88240

State "A" a/c 2 well # 57
Offset Operators

Chevron
Mr. Al Bohling
P.O. Box 670
Hobbs, New Mexico 88240

Arco Ms. Cindy Ellis P O Box 1610 Midland , Texas 79702

Meridian
Mr. Jim Cramer
21 Desta Drive
Midland, Texas 79705

Marathon
P. O. Box 2405
Hobbs, New Mexico 88240

Submit to Appropriate District Office State Lease - 4 copies Fee Lease - 3 copies

# State of New Mexico Energy, Minerals and Natural Resources Department

Form C-102 Revised 1-1-89

#### (

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

DISTRICT II P.O. Drawer DD, Artesia, NM 88210 OIL CONSERVATION DIVISION
P.O. Box 2088
Santa Fe, New Mexico 87504-2088

DISTRICT III 1000 Rio Brizos Rd., Artec, NM 87410

WELL LOCATION	AND ACREAGE DEDIC	ATION PLAT
All Distance must	ha from the outer boundains a	I the section

	•	All Dista	ances must be from the oute	ir boundaries of the	section	
Operator	<del></del>		Lease			Well No.
Hal J. Ra	asmussen O	perating, Inc	.   57	A15 "A"	AIC	2 57
Unit Letter	Section	Township	Range		10	County
( <del>-</del>	9	225	36	<del>-</del>	NMPM	Lea
Actual Footage Lox	,					
1980	feet from the	NORTH	line and	190	feet from the	WEST line
Ground level Elev.	Pro	ducing Formation	Pool	<u> </u>	1000 110001 410	Dedicated Acreage:
	,	マチンチト	[Jalmat-	-TNSL-YTS-7F	?	480 Acres
1. Outlin			by colored pencil or bachure			700 744
2. If mod 3. If mod unitize	re than one lease i re than one lease o ation, force-poolin Yes	is dedicated to the well, or of different ownership is ig, etc.?  No If ans	outline each and identify the own dedicated to the well, have the wer is "yes" type of consolidat ons which have actually been of	whership thereof (bod) interest of all owner	h as to working i	• •
	if necessary.	where the day construction	our wined have actually court	Augustus (Osc 10	. Tasa Bac a	
		ped to the well until all i	nterests have been consolidate	d (by communitization	on, unitization, fo	reed-pooling, or otherwise)
or until a	noo-standard uni		st, has been approved by the D	rivisioa.	· ·	
	- 1 - 1 1 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1	CHE	v RON	CART Language Approximate a content of	marth and	OPERATOR CERTIFICATION
	231		, 1986'	'S	conta best	I hereby certify that the information ained herein in true and complete to the of my knowledge and belief.
		±63		1 ×40	11.7	ed Name ay D. Cherski
·					<b>1</b> } {	gent
	   		±57	1980		J. Rasmussen Operating,
\\\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.\.		S£	27102			SURVEYOR CERTIFICATION
The same of the sa	\980'       		9 ARCO		on to actual super correct debelia.	reby certify that the well location shown his plat was plotted from field notes of all surveys made by me or under my trison, and that the same is true and ect to the best of my knowledge and f.
A CONTRACTOR OF THE CONTRACTOR		,0861			Sig: Prof	nature & Scal of essional Surveyor
* 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	wani Nagasa - Mark Barani Mag			<u> </u>	Cert	isicate No.
}		$\sim$	ARATHON			

card from being returned to you. The return receipt fee y	will provide you the name of the person delivere
card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the follo for fees and check box(es) for additional service(s) re	wing services are available. Consult postmaste
for fees and check box(es) for additional service(s) re- 1. Show to whom delivered, date, and addressee (Extra charge)	quested. 's address. 2.   Restricted Delivery  (Extra charge)
3. Article Addressed to:	4. Article Number
al Bohling	P046 611 992
al Bohling" Chevron	Type of Service:
0 0 0 000	Registered Insured
P.O. Box 670	Certified COD
Hobbs, New Mexico	Express Mail Return Receipt for Merchandise
April 1, 1 Jew Michael	Always obtain signature of addressee
	or agent and DATE DELIVERED.
5. Signature - Address	8. Addressee's Address (ONLY if
X - Donor up ul -	requested and fee paid)
6. Signeture - Agent	
X Olandrone - Vaeur	The state of the s
2 2 2 2 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	1 302
7. Date of Delivery	
SENDER: Complete Items 1 and 2 when additions 3 and 4.	onal services are desired, and complete item
SENDER: Complete items 1 and 2 when additional and 4.  Put your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the folic for fees and check box(es) for additional services) or	reverse side. Failure to do this will prevent the will provide you the name of the person delivered wing services are available. Consult postment
rut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the folio for fees and check box(es) for additional service(s) re 1.   Show to whom delivered, date, and addressee (Extra charge)	reverse side. Failure to do this will prevent the will provide you the name of the person delivery thing services are available. Consult postmast quested.  's address. 2.   Restricted Delivery
card from being returned to you. The return receipt feeto and the date of delivery. For additional fees the folic for fees and check box(es) for additional service(s) respectively.	reverse side. Failure to do this will prevent th will provide you the name of the person deliver wing services are available. Consult postmast quested.  's address. 2.   Restricted Delivery (Extra charge)
rut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt feeto and the date of delivery. For additional fees the following fees and check box(es) for additional service(s) resulting to the service of th	reverse side. Failure to do this will prevent the will provide you the name of the person deliverd owing services are available. Consult postmast quested.  's address. 2.   Restricted Delivery (Extra charge)  4. Article Number
rut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt feeto and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) respectively. Show to whom delivered, date, and addressee (Extra charge)  3. Article Addressed to:	reverse side. Failure to do this will prevent the will provide you the name of the person delivery owing services are available. Consult postmast quested.  's address. 2.   Restricted Delivery (Extra charge)  4. Article Number  POHC 611 991
rut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the foliofor fees and check box(es) for additional service(s) re 1. Show to whom delivered, date, and addressee (Extra charge)  3. Article Addressed to:	reverse side. Failure to do this will prevent the will provide you the name of the person delivery wing services are available. Consult postmast quested.  's address. 2.   Restricted Delivery (Extra charge)  4. Article Number  POHC 6/1/99/
rut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the foliofor fees and check box(es) for additional service(s) re 1. Show to whom delivered, date, and addressee (Extra charge)  3. Article Addressed to:	reverse side. Failure to do this will prevent the will provide you the name of the person delivery wing services are available. Consult postmast quested.  's address. 2.   Restricted Delivery (Extra charge)  4. Article Number  POHC 6/1/99/
rut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt feet to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) results and check box(es) for additional service(s) resu	reverse side. Failure to do this will prevent the will provide you the name of the person delivery wing services are available. Consult postmast quested.  's address. 2.   Restricted Delivery (Extra charge)  4. Article Number  POHC 6/1/99/
rut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the foliofor fees and check box(es) for additional service(s) re 1. Show to whom delivered, date, and addressee (Extra charge)  3. Article Addressed to:	reverse side. Failure to do this will prevent th will provide you the name of the person delivered wing services are available. Consult postmasted quested. 's address. 2.   Restricted Delivery (Extra charge)  4. Article Number  POHGG//99/  Type of Service:  Registered Insured  Certified COD  Express Mail Receipt for Merchandise
rut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt feeto and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) respectively. Show to whom delivered, date, and addressee (Extra charge)  3. Article Addressed to:	reverse side. Failure to do this will prevent th will provide you the name of the person delivered will provide you the name of the person delivered will postmasted the person delivered will postmasted the person delivery (Extra charge)  4. Article Number  POHO GII 99/  Type of Service:  Registered Insured Certified COD Express Mail Receipt for Merchandise  Always obtain signature of addressee
The Your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the folic for fees and check box(es) for additional service(s) re  1. Show to whom delivered, date, and addressee (Extra charge)  3. Article Addressed to:  Marathon  P.O. Burk 2465  Abobbs, New Merker  88240	reverse side. Failure to do this will prevent th will provide you the name of the person delivered withing services are available. Consult postmasted quested.  's address. 2. Restricted Delivery (Extra charge)  4. Article Number  POHC CII 991  Type of Service: Registered Insured Certified COD Express Mail Return Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.
Fut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) results and check box(es) for additional service(s) results and eddressee (Extra charge)  3. Article Addressed to:  Marathon  P.O. Box 2465  Abobbs, New Merker  88240  5. Signature - Address	reverse side. Failure to do this will prevent th will provide you the name of the person delivered will provide you the name of the person delivered puested.  's address. 2. Restricted Delivery (Extra charge)  4. Article Number  POHC (1/99/)  Type of Service: Registered Insured Certified COD Express Mail Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.  8. Addressee's Address (ONLY if
Fut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) respectively. The shows to whom delivered, date, and addressed (Extra charge)  3. Article Addressed to:  Marathon  P.O. Bux 2465  Abobbs, New Mexico  88240  5. Signature - Address  X	reverse side. Failure to do this will prevent th will provide you the name of the person delivered withing services are available. Consult postmasted quested.  's address. 2. Restricted Delivery (Extra charge)  4. Article Number  POHC CII 991  Type of Service: Registered Insured Certified COD Express Mail Return Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.
Fut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the following fees and check box(es) for additional service(s) respectively. The shows to whom delivered, date, and addressed (Extra charge)  3. Article Addressed to:  **Marathor**  *P.O. Bux 2465*  **Dobbs**, Two Mexico 88240*  5. Signature - Address*  **Address**	reverse side. Failure to do this will prevent th will provide you the name of the person delivered will provide you the name of the person delivered puested.  's address. 2. Restricted Delivery (Extra charge)  4. Article Number  POHC (1/99/)  Type of Service: Registered Insured Certified COD Express Mail Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.  8. Addressee's Address (ONLY if
Fut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) respectively. The shows to whom delivered, date, and addressed (Extra charge)  3. Article Addressed to:  Marathon  P.O. Bux 2465  Abobbs, New Mexico  88240  5. Signature - Address  X	reverse side. Failure to do this will prevent th will provide you the name of the person delivered will provide you the name of the person delivered puested.  's address. 2. Restricted Delivery (Extra charge)  4. Article Number  POHC (1/99/)  Type of Service: Registered Insured Certified COD Express Mail Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.  8. Addressee's Address (ONLY if
Fut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the following fees and check box(es) for additional service(s) respectively. The shows to whom delivered, date, and addressed (Extra charge)  3. Article Addressed to:  **Marathor**  *P.O. Bux 2465*  **Dobbs**, Two Mexico 88240*  5. Signature - Address*  **Address**	reverse side. Failure to do this will prevent th will provide you the name of the person delivered will provide you the name of the person delivered puested.  's address. 2. Restricted Delivery (Extra charge)  4. Article Number  POHC (1/99/)  Type of Service: Registered Insured Certified COD Express Mail Receipt for Merchandise  Always obtain signature of addressee or agent and DATE DELIVERED.  8. Addressee's Address (ONLY if
Fut your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the folic for fees and check box(es) for additional service(s) re 1. Show to whom delivered, date, and addressee (Extra charge)  3. Article Addressed to:  Marathon  P.O. But 2465  Hobbs, Thur Merker  88240  5. Signature - Address  C. Signature - Address	reverse side. Failure to do this will prevent the will provide you the name of the person delivered will provide you the name of the person delivered will provide you the name of the person delivered will postmast your delivery.    Consult postmast   Consult postmast

PS Form 3811, Mar. 1988 \* U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT