



Daniel Pequeno, CPL/ESA
Land Representative

MidContinent/Alaska BU
North American Exploration
and Production Company
15 Smith Road, RM-2235
Midland, Texas 79705
Tel 432 687 7461
Fax 432 687 7871
peqd@chevron.com

January 31, 2008

**RE: APPLICATION FOR VERTICAL EXPANSION
VACUUM GRAYBURG SAN ANDRES UNIT
LEA COUNTY, NEW MEXICO (CHEVRON FILE NO. QLS-044246)**

Attention: Vacuum Grayburg San Andres Unit Offset Operators and Surface Owners
(See attached list)

Ladies and Gentlemen:

For your information as an offset operator and surface owner, Chevron U.S.A., Inc. hereby gives notice of their intent to file an Application for Vertical Expansion of the Unitized Formation of the Vacuum Grayburg San Andres Unit in Lea County, New Mexico with the State of New Mexico, Commissioner of Public Lands and the New Mexico Oil Conservation Division.

Attached is a copy of the application which is being filed simultaneously with this notification. Exhibit "A" & "B" is the map and land description for the Vacuum Grayburg San Andres Unit in relation to your offset operations. If you have any objections to this application, your objection must be filed in writing with the Santa Fe Office of the Oil Conservation Division located at 1220 South Saint Frances Drive, Santa Fe, New Mexico 87505 within 15 days of the date of this letter. If there is no objection, the Commissioner of Public Lands and the Division Director may approve this application.

Sincerely,

A handwritten signature in black ink, appearing to read "Daniel Pequeno", written over a horizontal line. The signature is stylized with loops and a long horizontal stroke extending to the right.

Daniel Pequeno

Enclosure

Lea County, New Mexico

Township 17 S Range 34 E

Township 17 S Range 35 E

Township 18 S Range 34 E

Township 18 S Range 35 E

Form 104—(Four on Township)

6	5	4	3	2	1	6	5	4	3	2	1
7	8	9	10	11	12	7	8	9	10	11	12
18	17	16	15	14	13	18	17	16	15	14	13
19	20	21	22	23	24	19	20	21	22	23	24
30	29	28	27	26	25	30	29	28	27	26	25
31	32	33	34	35	36	31	32	33	34	35	36
6	5	4	3	2	1	6	5	4	3	2	1
7	8	9	10	11	12	7	8	9	10	11	12
18	17	16	15	14	13	18	17	16	15	14	13
19	20	21	22	23	24	19	20	21	22	23	24
30	29	28	27	26	25	30	29	28	27	26	25
31	32	33	34	35	36	31	32	33	34	35	36

ATTACHMENT II

**APPLICATION OF CHEVRON USA INC. FOR VERTICAL EXPANSION OF
THE UNITIZED FORMATION OF THE UNIT AGREEMENT FOR THE
DEVELOPMENT AND OPERATION OF THE VACUUM GRAYBURG SAN
ANDRES UNIT AREA, LEA COUNTY, NEW MEXICO**

NOTICE LIST

T-18-S, R-34-E, N.M.P.M.

**SECTIONS 3 & 10-12: ALL; SECTION 13: N/2N/2, NE/4NE/4, W/2NE/4 & S/2;
SECTION 14: N/2N/2**

OFFSET OPERATORS

BP America Production Company
P. O. Box 3092
Houston, TX 77253

Chevron USA Inc.
15 Smith Road
Midland, TX 79705

Dalport Oil Corporation
5646 Milton Street #413
Dallas, TX 75206

Douglas Oil & Gas LP
500 W. Texas Ave., Suite 940
Midland, TX 79701

Chase Oil Corporation
P. O. Box 1210
Graham, TX 76046

ExxonMobil Corporation
P. O. Box 2305
Houston, TX 77252

Gordon M. Cove Estate
P. O. Box 64244
Lubbock, TX 79424

J. M. Leonard and BP Exploration
1100 Penn Tower
Oklahoma, OK 73118

Nadel and Gussman Permian LLC
15 E. 5th Street, Suite 3200
Tulsa, OK 74103

Occidental Permian Limited Partnership
P. O. Box 4294
Houston, TX 77210

OXY USA WTP Limited Partnership
P. O. Box 50250
Midland, TX 79701

Daniel Gonzales
P. O. Box 2475
Santa Fe, NM 87504-2475

SURFACE OWNERS:

Pearce Trust, Roy F. Pearce Sr.
& Roy F. Pearce Jr., Co-Trustees
1717 Jackson
Pecos, TX 79772

Lee Cattle Company Limited Partnership
HC 60 Box 465
Lovington, NM 88200

January 31, 2008

State of New Mexico
Commissioner of Public Lands
P. O. Box 1148
Santa Fe, New Mexico 87504-1148

T-18-S, R-35-E, N.M.P.M.
SECTIONS 6 & 7: ALL; SECTION 18: N/2NW/4

OFFSET OPERATORS:

Chase Oil Corporation
P. O. Box 1767
Artesia, NM 88211

Chevron USA Inc.
15 Smith Road
Midland, TX 79705

Marathon Oil Company
P. O. Box 2069
Houston, TX 77252

Triple T Resources LP
4809 Cole Ave., Suite 108
Dallas, TX 75205

SURFACE OWNERS:

Giles M. Lee and Joe A. Lee
HC 60 Swamp Road
Lovington, NM 88260

Lee Cattle Company Limited Partnership
HC 60 Box 465
Lovington, NM 88260

State of New Mexico
Commissioner of Public Lands
P. O. Box 1148
Santa Fe, New Mexico 87504-1148

T-17-S, R-34-E, N.M.P.M.
**SECTION 25: W/2SE/4; SECTION 26: S/2; SECTION 27: S/2;
SECTIONS 34-36: ALL**

OFFSET OPERATORS:

BP America Production Company
P. O. Box 3092
Houston, TX 77253

Marathon Oil Company
P. O. Box 2069
Houston, TX 77252

Brazos Limited Partnership
P. O. Box 911
Breckenridge, TX 76424

Mobil Producing Texas & New Mexico Inc.
P. O. Box 2305
Houston, TX 77252

January 31, 2008

Chevron USA Inc.
15 Smith Road
Midland, TX 79705

Shinnery Oil Company Inc.
606 W. Tennessee, Suite 107
Midland, TX 79701

ConocoPhillips Company
P. O. Box 7500
Bartlesville, OK 74005

XTO Energy Inc.
810 Houston Street
Fort Worth, TX 76102

Headington Oil Company
7557 Rambles Road, Suite 1150
Dallas, TX 75231

SURFACE OWNERS:

Pearce Trust, Roy F. Pearce Sr., &
Roy F. Pearce Jr., Co-Trustees
1717 Jackson
Pecos, TX 79772

State of New Mexico
Commissioner of Public Lands
P. O. Box 1148
Santa Fe, New Mexico 87504-1148

T-17-S, R-35-E, N.M.P.M.
SECTION 31: ALL

Chevron USA Inc.
15 Smith Road
Midland, TX 79705

ConocoPhillips Company
P. O. Box 7500
Bartlesville, OK 74005

Marathon Oil Company
P. O. Box 2069
Houston, TX 77252

Mobil Producing Texas & New Mexico Inc.
P. O. Box 2305
Houston, TX 77210

XTO Energy Inc.
810 Houston Street
Fort Worth, TX 76192

Occidental Permian Limited Partnership
P. O. Box 4294
Houston, TX 77210

SURFACE OWNERS:

Pearce Trust, Roy F. Pearce Sr., &
Roy F. Pearce, Jr., Co-Trustees
1717 Jackson
Pecos, TX 79772

State of New Mexico
Commissioner of Public Lands
P. O. Box 1148
Santa Fe, New Mexico 87504-1148

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BP AMERICA PRODUCTION COMPANY
P O BOX 3092
HOUSTON TX 77253

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent
☐ Addressee

B. Recipient (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ NoRECEIVED
EDCS
FEB 04 2008

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7007 2560 0001 2989 3548
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

BRAZOS LIMITED PARTNERSHIP
P O BOX 911
BRECKENRIDGE TX 76424

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Christine Lopez* ☐ Agent

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

FEB 04 2008

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7007 2560 0001 2989 3555
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

CERTIFIED MAIL RECEIPT

(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

Postage

Certified Fee

Return Receipt Fee (Endorsement Required)

BP AMERICA PRODUCTION COMPANY

P O BOX 3092
HOUSTON TX 77253

PEOD
RM 2235
VGSA

Postmark Here
FEB 04 2008

Total Postage & Fees \$

Sent To

Street, Apt. No., or PO Box No.

City, State, Zip+4

PS Form 3800, August 2006 See Reverse for Instructions

U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com.

OFFICIAL USE

Postage

Certified Fee

Return Receipt Fee (Endorsement Required)

RESTRICTED DELIVERY

BRAZOS LIMITED PARTNERSHIP
P O BOX 911
BRECKENRIDGE TX 76424

PEOD
RM 2235
VGSA

Postmark Here
FEB 04 2008

Total Postage & Fees \$

Sent To

Street, Apt. No., or PO Box No.

City, State, Zip+4

PS Form 3800, August 2006 See Reverse for Instructions

U.S. Postal Service CERTIFIED MAIL RECEIPT

(Domestic Mail Only, No Insurance Coverage Provided)

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ PEQD
 Certified Fee RM 2235
 Return Receipt Fee VGSA
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$
 CHASE OIL CORPORATION
 P O BOX 1210
 GRAHAM TX 76046

Sent To

Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7007 2560 0001 2989 3562

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ PEQD
 Certified Fee RM 2235
 Return Receipt Fee VGSA
 (Endorsement Required)
 Restricted Delivery Fee
 (Endorsement Required)
 Total Postage & Fees \$
 CHASE OIL CORPORATION
 P O BOX 1767
 ARTESIA NM 88211

Sent To

Street, Apt. No.,
 or PO Box No.
 City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7007 2560 0001 2989 3579

ENDER: 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 so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

DALPORT OIL CORPORATION
5646 MILTON ST #413
DALLAS TX 75206

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
B. Received by (Printed Name) ☐ Addressee
C. Date of Delivery 2-4-08
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☒ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number 7007 2560 0001 2989 3609
(Transfer from service label)

Form 3811, February 2004 Domestic Return Receipt

102395-02-M-1540

ENDER: COMPLETE THIS SECTION

1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
2. Print your name and address on the reverse so that we can return the card to you.
3. Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

CONOCOPHILLIPS COMPANY
P O BOX 7500
BARTLESVILLE OK 74005

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
B. Received by (Printed Name) ☐ Addressee
C. Date of Delivery
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

FEB 04 2008

3. Service Type
☒ Certified Mail ☒ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7007 2560 0001 2989 3593
(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt

102395-02-M-1540

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$0.00
Certified Fee \$0.00
Return Receipt Fee \$0.00
Restricted Delivery (Endorsement Required)
Total Postage & Fees \$0.00
Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4
DALPORT OIL CORPORATION
5646 MILTON ST #413
DALLAS TX 75206

7007 2560 0001 2989 3609

U.S. Postal Service CERTIFIED MAIL RECEIPT (Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$0.00
Certified Fee \$0.00
Return Receipt Fee \$0.00
Restricted Delivery (Endorsement Required)
Total Postage & Fees \$0.00
Sent To
Street, Apt. No., or PO Box No.
City, State, ZIP+4
CONOCOPHILLIPS COMPANY
P O BOX 7500
BARTLESVILLE OK 74005

7007 2560 0001 2989 3593

PS Form 3800, August 2006 See Reverse for Instructions

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DAVID GONZALES
P O BOX 2475
SANTA FE NM 87504-2475
Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by ☒ Certified Mail ☐ Registered Mail ☐ Return Receipt for Merchandise
- C. Date of Delivery Feb 06 2008
- D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

FEB 06 2008

3. Service Type ☒ Certified Mail ☐ Registered Mail ☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

2. Article Number (Transfer from service label) **7007 2560 0001 2989 3623**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

DOUGLAS OIL & GAS LP
500 W TEXAS AVE STE 940
MIDLAND TX 79701

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ Agent ☐ Addressee
- B. Received by (Printed Name) Sherry Harper C. Date of Delivery 2-1-08
- D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

DOUGLAS OIL & GAS LP
500 W TEXAS AVE STE 940
MIDLAND TX 79701

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered Mail ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

2. Article Number (Transfer from service label) **7007 2560 0001 2989 3623**

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees

Sent to _____
Street, Apt. No., or PO Box No. _____
City, State, ZIP+4 _____
PS Form 3800, August 2006 See Reverse for Instructions

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage \$

Certified Fee

Return Receipt Fee (Endorsement Required)

Restricted Delivery Fee (Endorsement Required)

Total Postage & Fees

Sent to _____
Street, Apt. No., or PO Box No. _____
City, State, ZIP+4 _____
PS Form 3800, August 2006 See Reverse for Instructions

DOUGLAS OIL & GAS LP
500 W TEXAS AVE STE 940
MIDLAND TX 79701

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

EXXONMOBIL CORPORATION
P O BOX 2305
HOUSTON TX 77252

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature

GEE

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☒ Express Mail

☐ Registered
☐ Insured Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 2560 0001 2989 3630

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

GILES M LEE AND JOIE A LEE
HC 60 SWAMP RD
LOVINGTON NM 88260

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Giles M Lee

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail

☒ Express Mail

☐ Registered
☐ Insured Mail
☐ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from service label)

7007 2560 0001 2989 3647

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**

(Domestic Mail Only: No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage \$ 3.11
Certified Fee \$ 2.08
Return Receipt Fee (Endorsement Required)
Restricted Delivery (Endorsement Required)

PEOD
RM 2235
VGSA

Postmark
Here

Total Postage & Fees

EXXONMOBIL CORPORATION
P O BOX 2305
HOUSTON TX 77252

Sent to

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**

(Domestic Mail Only: No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage \$ 3.11
Certified Fee \$ 2.08
Return Receipt Fee (Endorsement Required)
Restricted Delivery (Endorsement Required)

PEOD
RM 2235
VGSA

Postmark
Here

GILES M LEE AND JOIE A LEE
HC 60 SWAMP RD
LOVINGTON NM 88260

Sent to

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	PEOD RM 2235 VGSA
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$12.70	

Sent To
Street, Apt. No., or PO Box No.
City, State, Zip+4
GORDON MCCOY ESTATE
PO BOX 64244
DALLAS TX 75224

PS Form 3800, August 2005 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$	PEOD RM 2235 VGSA
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees \$12.70	

Sent To
Street, Apt. No., or PO Box No.
City, State, Zip+4
MCCOY ESTATE
PO BOX 64244
DALLAS TX 75224

PS Form 3800, August 2005 See Reverse for Instructions

7007 2560 0001 2989 3661

7007 2560 0001 2989 3654

SENDER: COMPLETE THIS SECTION

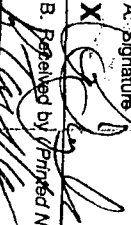
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

LEE CATTLE COMPANY LIMITED PARTNERSHIP
HC 60 BOX 465
LOVINGTON NM 88260

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

- A. Signature  ☒ Agent ☐ Addressee
- B. Received by (Printed Name) GEE C. Date of Delivery 2-2-2
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number

(Transfer from service label)

7007 2560 0001 2989 3678

S Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

MARATHON OIL COMPANY
P O BOX 2069
HOUSTON TX 77252

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

- A. Signature GEE ☐ Agent ☐ Addressee
- B. Received by (Printed Name) GEE C. Date of Delivery FEB 05 2003
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Article Number

(Transfer from service label)

7007 2560 0001 2989 3685

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service
CERTIFIED MAIL RECEIPT

(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	PEOD
Certified Fee	\$	RM 2235
Return Receipt Fee	\$	VGSA
(Endorsement Required)		Postmark Here
(Endorsement Required)		
Total Postage & Fees	\$	

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7007 2560 0001 2989 3678

U.S. Postal Service
CERTIFIED MAIL RECEIPT

(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage	\$	PEOD
Certified Fee	\$	RM 2235
Return Receipt Fee	\$	VGSA
(Endorsement Required)		Postmark Here
(Endorsement Required)		
Total Postage & Fees	\$	

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

7007 2560 0001 2989 3685

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MOBIL PRODUCING TEXAS & NEW MEXICO
P O BOX 2305
HOUSTON TX 77252

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature

GEE

☐ Agent
☐ Addressee

B. Received by (Printed Name)

☐ Date of Delivery
 2/2/2004

D. Is delivery address different from item 1?

☐ Yes
☒ No

3. Service Type

☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☒ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes
☒ No

2. Article Number

(Transfer from service label)

7007 2560 0001 2989 3692

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

NADL AND GUSSMAN PERMIAN LLC
15 E 5TH ST STE 3200
TULSA OK 74103

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ Agent
☐ Addressee

B. Received by (Printed Name)

☐ Date of Delivery
 2/2/2004

D. Is delivery address different from item 1?

☐ Yes
☒ No

3. Service Type

☒ Certified Mail
☐ Registered
☐ Insured Mail
☐ Express Mail
☒ Return Receipt for Merchandise
☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes
☒ No

2. Article Number

(Transfer from service label)

7007 2560 0001 2989 3708

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service

CERTIFIED MAIL RECEIPT

(Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage & Fees \$
 Certified Fee \$
 Return Receipt Fee \$
 (Endorsement Required)
 PEOD
 RM 2235
 VGSA
 Postmark
 Here

MOBIL PRODUCING TEXAS & NEW MEXICO
P O BOX 2305
HOUSTON TX 77252

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT

(Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage & Fees \$
 Certified Fee \$
 Return Receipt Fee \$
 (Endorsement Required)
 PEOD
 RM 2235
 VGSA
 Postmark
 Here

NADL AND GUSSMAN PERMIAN LLC
15 E 5TH ST STE 3200
TULSA OK 74103

Sent To

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

OCCIDENTAL PERMIAN LIMITED PARTNERSHIP
P O BOX 4294
HOUSTON TX 7721J0

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

A. Signature [Signature] ☐ Agent
B. Received by (Printed Name) STANLEY ☐ Addressee
C. Date of Delivery 02/05/04

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7007 2560 0001 2989 3715

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-15-40

CERTIFIED MAIL RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage \$
Certified Fee \$
Return Receipt Fee (Endorsement Required) \$
Restricted Delivery Fee (Endorsement Required) \$
Total Postage & Fees \$

SENT TO
Street, Apt. No., or PO Box No.
City, State, ZIP+4
PEOD
RM 2235
VCSA
Postmark Here
PEARCE TRUST
1717 JACKSON
P O BOX 4294
HOUSTON TX 7721J0

PS Form 3800, August 2006 See Reverse for Instructions

CERTIFIED MAIL RECEIPT

(Domestic Mail Only: No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

Postage \$
Certified Fee \$
Return Receipt Fee (Endorsement Required) \$
Restricted Delivery Fee (Endorsement Required) \$
Total Postage & Fees \$

SENT TO
Street, Apt. No., or PO Box No.
City, State, ZIP+4
PEOD
RM 2235
VCSA
Postmark Here
PEARCE TRUST
1717 JACKSON
P O BOX 4294
HOUSTON TX 7721J0

PS Form 3800, August 2006 See Reverse for Instructions

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

SHINNERY OIL COMPANY INC
606 W TENNESSEE STE 107
MIDLAND TX 79701

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

- Signature [Signature] ☐ Agent ☒ Addressee
- B. Received by (Printed Name) Jace Lee C. Date of Delivery 1 Feb 08
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☒ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number **7007 2560 0001 2989 3760**

(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

TRIPLE T RESOURCES LP
4809 COLE AVE STE 108
DALLAS TX 75205

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

- A. Signature [Signature] ☐ Agent ☒ Addressee
- B. Received by (Printed Name) [Signature] C. Date of Delivery 1 Feb 08
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number **7007 2560 0001 2989 3401**

(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt

102595-02-M-1540

U.S. Postal Service

CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 5.15

Certified Fee 0.40

Return Receipt Fee 0.30

(Endorsement required)

SHINNERY OIL COMPANY INC
606 W TENNESSEE STE 107
MIDLAND TX 79701

Total Postage \$ 5.85

PEOD
RM 2235
VGSA

Postmark Here

Sent to

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

U.S. Postal Service

CERTIFIED MAIL RECEIPT
(Domestic Mail Only. No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage \$ 5.15

Certified Fee 0.40

Return Receipt Fee 0.30

(Endorsement required)

TRIPLE T RESOURCES LP
4809 COLE AVE STE 108
DALLAS TX 75205

Total Postage \$ 5.85

PEOD
RM 2235
VGSA

Postmark Here

Sent to

Street, Apt. No.,
or PO Box No.

City, State, ZIP+4

PS Form 3800, August 2006

See Reverse for Instructions

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

XTO ENERGY INC
810 HOUSTON ST
FORT WORTH TX 76102

Vacuum Grayburg SA Vertical Expan

COMPLETE THIS SECTION ON DELIVERY

Signature Brown ☐ Agent
Received by / (Printed Name) Brown ☐ Addressee
C. Date of Delivery 2/1/08
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured/Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7007 2560 0001 2989 3418

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

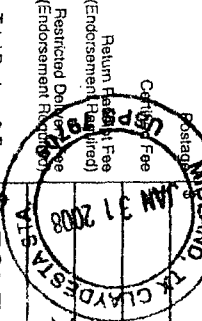
7007 2560 0001 2989 3418

CERTIFIED MAIL[®] RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

For delivery information visit our website at www.usps.com

OFFICIAL USE

Postage RM 2235
Certified Fee
Return Receipt Fee
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)
Total Postage & Fees
Postmark Here
PEOD
RM 2235
VGSA
XTO ENERGY INC
810 HOUSTON ST
FORT WORTH TX 76102



Sent To
Street Apt. No.,
or PO Box No.
City, State, ZIP+4
PS Form 3800, August 2006 See Reverse for Instructions

15 Smith Road
Midland, Texas 79705

7007 2560 0001 2989 3661

First Class Mail

J M LEONARD AND BP
EXPLORATION INC
1100 PENN TOWER
OKLAHOMA OK 73118

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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
J M LEONARD AND BP EXPLORATION INC
1100 PENN TOWER
OKLAHOMA OK 73118
Vacuum Crayburg SA Vertical Espan

COMPLETE THIS SECTION ON DELIVERY

- A. Signature ☒ X
- B. Received by (Printed Name) ☐ Agent ☐ Addressee
- C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

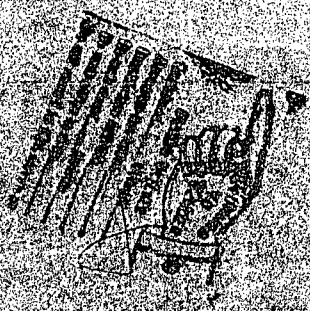
3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered Mail ☐ Return Receipt for Merchandise



15 Smith Road
Midland, Texas 79705

CERTIFIED MAIL

7007 2560 0001 2989 3654



First Class Mail

GORDON M COVE ESTATE
P O BOX 6434
LUBBOCK, TX 79424



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 so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

GORDON M COVE ESTATE
P O BOX 6434
LUBBOCK, TX 79424

COMPLETE THIS SECTION ON DELIVERY

A. Signature	☒ Agent
B. Received by (Printed Name)	☐ Addressee
C. Date of Delivery	
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	

Handwritten notes:
2-1
2-11
2-16