

**STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

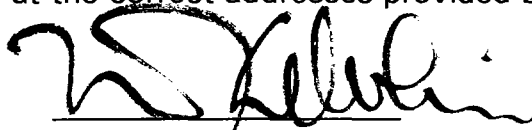
In the matter of the hearing called
by the Oil Conservation Division
for the purpose of considering:

CASE NO. 11405

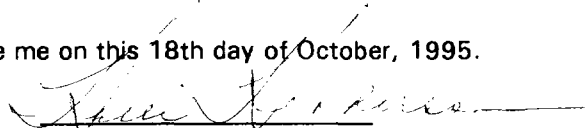
Application of Meridian Oil Inc.
for Downhole Commingling,
Sanchez A Com Well No 2,
Section 16, T28N, R9W,
Lea County, New Mexico.

CERTIFICATE OF MAILING AND COMPLIANCE WITH ORDER R-8054

W. THOMAS KELLAHIN, attorney in fact and authorized representative of Meridian Oil Inc., states that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on the 25th day of September 1995 I caused to be sent, by certified mail return receipt requested, notice of this hearing and a copy of the application for the referenced case along with the cover letter, at least twenty days prior to the hearing set for October 19, 1995, to the parties shown in the application as evidenced by the attached copies of receipt cards, and that pursuant to Division Rule 1207, notice has been given at the correct addresses provided by such rule.


W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me on this 18th day of October, 1995.


Notary Public

My Commission Expires: June 15, 1998

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
 - Complete items 3, and 4a & b.
 - Print your name and address on the reverse of this form so that we can return this card to you.
 - Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Meridian/Sanchez 10/19/95
September 25, 1995

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

Conoco Inc.
10 Desta Drive
STE 100W
Midland, TX 79705
Attn: Jerry Hoover

4a. Article Number

424 287 455

4b. Service Type

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery

9-27

5. Signature (Addressee)

6. Signature (Agent)

Meridian Sanchez

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 424 287 455



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to	
Street and No.	
Conoco Inc.	
10 Desta Drive	
STE 100W	
Midland, TX 79705	
Attn: Jerry Hoover	
PS Form 3811, December 1991	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date, and Addressee's Address	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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 - Complete items 3, and 4a & b.
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- Meridian/Sanchez 10/19/95
September 25, 1995

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

West Largo Corporation
6638 W. Ottawa Ave
Ste 100
Littleton, CO 80123

4a. Article Number

424 287 453

4b. Service Type

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery

9-27-95

5. Signature (Addressee)

6. Signature (Agent)

Meridian Sanchez

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 424 287 453



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to	
West Largo Corporation	
6638 W. Ottawa Ave	
Ste 100	
Littleton, CO 80123	
PS Form 3811, December 1991	
Special Delivery Fee	
Restricted Delivery Fee	

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- Meridian/Sanchez 10/19/95
September 25, 1995

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

Commissioner of Public Lands
State of New Mexico
POB 1148
Santa Fe, New Mexico 87501
Attn: Pete Martinez

4a. Article Number

424 287 452

4b. Service Type

- ☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery

9-27-95

5. Signature (Addressee)

6. Signature (Agent)

Meridian Sanchez

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 424 287 452



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to	
Commissioner of Public Lands	
State of New Mexico	
POB 1148	
Santa Fe, New Mexico 87501	
Attn: Pete Martinez	
PS Form 3811, December 1991	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date, and Addressee's Address	
TOTAL Postage & Fees	\$

Meridian/Sanchez 10/19/95
September 25, 1995

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Meridian/Sanchez 10/19/95
September 25, 1995

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:
Williams Production Company
POB 58900
Salt Lake City, UT 84158

4a. Article Number
424 287 460

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
9/28/95

5. Signature (Addressee)

6. Signature (Agent)
K McLoe

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 424 287 460

 **Receipt for Certified Mail**
No Insurance Coverage Provided
Do not use for International Mail (See Reverse)

1993 Sent to
Williams Production Company
POB 58900
Salt Lake City, UT 84158

PS For

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing	

Is your RETURN ADDRESS completed on the reverse side?

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• Complete items 3, and 4a & b.
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• Attach this form to the front of the mailpiece, or on the back if space does.

Meridian/Sanchez 10/19/95
September 25, 1995

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:
Texaco Exploration & Production
POB 2100
Denver, CO 80201-2100

4a. Article Number
424 287 459

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
9/28/95

5. Signature (Addressee)


6. Signature (Agent)
Robert R

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 424 287 459

 **Receipt for Certified Mail**
No Insurance Coverage Provided
Do not use for International Mail (See Reverse)

1993 Sent to
Texaco Exploration & Production
POB 2100
Denver, CO 80201-2100

PS

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	

Is your RETURN ADDRESS completed on the reverse side?

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• Complete items 3, and 4a & b.
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• Attach this form to the front of the mailpiece, or on the back if space does.

Meridian/Sanchez 10/19/95
September 25, 1995

I also wish to receive the following services (for an extra fee):
1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:
Amoco Production Company
POB 800
Denver, CO 80201

4a. Article Number
424 287 452

4b. Service Type
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

7. Date of Delivery
9/27/95

5. Signature (Addressee)


6. Signature (Agent)
[Signature]

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 424 287 456

 **Receipt for Certified Mail**
No Insurance Coverage Provided
Do not use for International Mail (See Reverse)

1993 Sent to
Amoco Production Company
POB 800
Denver, CO 80201

PS For

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$

Meridian/Sanchez 10/19/95
September 25, 1995

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does.

Meridian/Sanchez 10/19/95
September 25, 1995

Article number and the date

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Southland Royalty Company
POB 4289
Farmington, NM 87499-4289

4a. Article Number
424 287 457

4b. Service Type

☐ Registered ☐ Insured

☐ Certified ☐ COD

☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery
9-26-95

5. Signature (Addressee)

6. Signature (Agent)
Judith Dee

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

393
Southland Royalty Company
POB 4289
Farmington, NM 87499-4289

PS Fo

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date, and Addressee's Address	

Z 424 287 457



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
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- Attach this form to the front of the mailpiece, or on the back if space does.

Meridian/Sanchez 10/19/95
September 25, 1995

Article number and the date

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Doris O. Moore
Harbor View 16
720 Milton Rd.
Rye, New York 10580

4a. Article Number
424 287 451

4b. Service Type

☐ Registered ☐ Insured

☐ Certified ☐ COD

☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery
9-27-95

5. Signature (Addressee)
Doris O. Moore

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

93
Doris O. Moore
Harbor View 16
720 Milton Rd.
Rye, New York 10580

PS Fo

Special Delivery Fee	
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Z 424 287 451



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

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SENDER:

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Meridian/Sanchez 10/19/95
September 25, 1995

Article number and the date

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

SG Interests
811 Dallas
Houston, TX 77002

4a. Article Number
424 287 458

4b. Service Type

☐ Registered ☐ Insured

☐ Certified ☐ COD

☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery
9-27-95

5. Signature (Addressee)
Michael W...

6. Signature (Agent)

8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1991 *U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

393
SG Interests
811 Dallas
Houston, TX 77002

PS Fo

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date, and Addressee's Address	
TOTAL Postage & Fees	\$

Meridian/Sanchez 10/19/95
September 25, 1995

Z 424 287 458



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address.

Meridian/Sanchez 10/19/95
September 25, 1995

t we can

space

le number.
nd the date

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

SG Interests & DJ Simmons
POB 1469
Farmington, NM 87499

4a. Article Number

424 287 454

4b. Service Type

☐ Registered

☐ Insured

☒ Certified

☐ COD

☐ Express Mail

☒ Return Receipt for Merchandise

7. Date of Delivery

9-25

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

[Signature]

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 424 287 454



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

993

Sent to

SG Interests & DJ Simmons
POB 1469
Farmington, NM 87499

PS Form

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$

Postmark or Date

Meridian/Sanchez 10/19/95
September 25, 1995