


**Plat of Pooled Area
NAUMANN OIL & GAS, INC.
Sandtank Fed. Com. #1
S/2 Section 31, T17S-R30E,
Eddy County, New Mexico
containing 315.24 acres, more or less
below 5,000'.**

<p>Tr. 1 LC-060529 Phillips Petroleum Corporation 100% 155.24 ac.</p>	<p>Tr. 2 LC-028936-D Logro Corporation 18.75% Anadarko Pet. Corp. 81.25% 80.00 ac.</p> <p> PROPOSED LOCATION 2,220' FEL 660' FSL</p>	<p>Tr.3 LC 028936-A Read & Stevens, Inc., et al. 100% 80.00 ac.</p>
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**BEFORE THE
OIL CONSERVATION DIVISION
Santa Fe, New Mexico**

96243

Case No. 11553 Exhibit No. 1

Submitted by: Naumann Oil & Gas, Inc.

Hearing Date: June 27, 1996

NAUMANN OIL GAS, INC.
SANDTANK FED. COM. #1

TRACT NO.	OWNER	TRACT	INTEREST			
			315.24 AC UNIT	160 AC UNIT	80 AC UNIT	40 AC UNIT
* 1	PHILLIPS PET. CORP.	1.0000000	0.4924502	0.0000000	0.0000000	0.0000000
TRACT NO. 1 TOTAL		1.0000000	0.4924502	0.0000000	0.0000000	0.0000000
* 2	ANADARKO PETROLEUM CORP.	0.8125000	0.2061921	0.4062500	0.8125000	0.8125000
2	LOGRO CORPORATION	0.1875000	0.0475828	0.0937500	0.1875000	0.1875000
TRACT NO. 2 TOTAL		1.0000000	0.2537749	0.5000000	1.0000000	1.0000000
3	BAYNARD MALONE, TR. - ROSS L. MALONE TESTAMENTARY TRUST	0.0312500	0.0079305	0.0156250	0.0000000	0.0000000
3	BAYNARD MALONE, TR. - ELIZABETH A. MALONE TESTAMENTARY TRUST	0.0104167	0.0026435	0.0052083	0.0000000	0.0000000
3	EARL L. MALONE	0.0208333	0.0052870	0.0104167	0.0000000	0.0000000
3	JEAN A. EATON	0.0208333	0.0052870	0.0104167	0.0000000	0.0000000
3	BAYNARD MALONE, TR. - ANDERSON-MALONE TRUST DATED 12/5/91	0.0208333	0.0052870	0.0104167	0.0000000	0.0000000
3	CHARLES F. MALONE, TR. - CHARLES F. MALONE LIVING TRUST DTD 8/1/87	0.0208333	0.0052870	0.0104167	0.0000000	0.0000000
3	EDITH C. WHEELER, DEC.	0.0156250	0.0039652	0.0078125	0.0000000	0.0000000
3	MARY J. MCWHORTER	0.0156250	0.0039652	0.0078125	0.0000000	0.0000000
3	DAVID H. ARRINGTON, ET UX	0.0156250	0.0039652	0.0078125	0.0000000	0.0000000
3	<u>MICHAEL H. MOORE</u>	0.0156250	0.0039652	0.0078125	0.0000000	0.0000000
3	ANN D. ALLISON	0.0156250	0.0039652	0.0078125	0.0000000	0.0000000
3	DAVIS A. COPPEDGE	0.0078125	0.0019826	0.0039063	0.0000000	0.0000000
3	JAMES T. COPPEDGE	0.0078125	0.0019826	0.0039063	0.0000000	0.0000000
3	BRENT W. MCWHORTER OR RUTH A. MCWHORTER TRS - MCWHORTER FAMILY TRUST	0.0156250	0.0039652	0.0078125	0.0000000	0.0000000
3	LEE R. BRIGHAM ET UX, DORIS BRIGHAM, TRS - BRIGHAM TRUST UNDER AGREEMENT DTD 5/11/83	0.1000000	0.0253775	0.0500000	0.0000000	0.0000000
3	FIRST NATIONAL BANK OF CHICAGO, AGENT - ASTON PARTNERSHIP	0.0250000	0.0063444	0.0125000	0.0000000	0.0000000
3	HEIRS OF LINCOLN ASTON, DEC.	0.0250000	0.0063444	0.0125000	0.0000000	0.0000000
3	CHARLES A. ASTON III	0.0150000	0.0038066	0.0075000	0.0000000	0.0000000
3	VALERIE KOBAL	0.0150000	0.0038066	0.0075000	0.0000000	0.0000000
3	ELLEN PAULL	0.0150000	0.0038066	0.0075000	0.0000000	0.0000000
3	AUDREY BEAN	0.0150000	0.0038066	0.0075000	0.0000000	0.0000000
3	READ & STEVENS, INC.	0.0625000	0.0158609	0.0312500	0.0000000	0.0000000
3	ENRON OIL & GAS COMPANY	0.4931250	0.1251427	0.2465625	0.0000000	0.0000000
TRACT NO. 3 TOTAL		1.0000000	0.2537749	0.5000000	0.0000000	0.0000000
UNIT TOTAL			1.0000000	1.0000000	1.0000000	1.0000000

CANNOT
BEACH -
ONLY
AUTOMATIC
MACHINE

Examiner _____

Case No. 11553

EXHIBIT NO. 2

**BEFORE THE
OIL CONSERVATION DIVISION**
Santa Fe, New Mexico

Case No. 11553 Exhibit No. 2

Submitted by: Naumann Oil & Gas, Inc.

Hearing Date: June 27, 1996

LOGRO CORPORATION
AUTHORIZATION FOR EXPENDITURE

Examiner _____
Case No. 11553
EXHIBIT NO. 3

WELL NAME:	<u>SAND TANK FED. COM. NO. 1</u>	PROPOSED DEPTH:	<u>11,800</u>
FIELD NAME:	<u>SAND TANK</u>	LOCATION:	<u>2,220' FEL & 660' FSL</u>
COUNTY:	<u>EDDY</u>	SECTION:	<u>31</u>
STATE:	<u>NEW MEXICO</u>	TOWNSHIP, RANGE:	<u>T17S-R30E</u>
AFE NO.:	<u>960502</u>	BLK, SURVEY:	_____

CODE	ITEM DESCRIPTION	COST TO CASING	COMPLETION	TOTAL
202	Roads, Location, Damages, Permits	20,000	2,000	22,000
204	Supervision	→ 30,000	2,800	32,800
206	Drilling-Footage ft. at \$ /ft	0	0	0
208	Drilling Daywork 40 days at \$ 4,800 /day	192,000	0	192,000
210	Comp Daywork 6 days at \$ 2400 /day	0	14,400	14,400
212	Rig Move	30,000		30,000
214	Cementing Seives, Cement & Accessories	25,000	18,000	43,000
216	Mud & Chemicals	60,000	3,000	63,000
218	Fuel	500	0	500
220	Water	18,000	3,000	21,000
222	Coring	18,000	0	18,000
224	Logging & Testing	36,000	5,000	41,000
226	Perforating	0	25,000	25,000
228	Stimulation	0	23,000	23,000
230	Rental Equipment/Tools	20,000	3,000	23,000
232	Completion Rig		9,800	9,800
234	Mud Logging/Geological Services	12,500	0	12,500
236	Bits	60,000	0	60,000
238	Transportation/Freight	5,500	4,000	9,500
240	Supervision	0	0	0
242	Company Labor/Supervision	0	0	0
244	Overhead/Fixed Rate	10,000	0	10,000
246	Environmental & Safty Charges	5,000	5,000	10,000
248	Contingencies/Miscellaneous	22,000	7,000	29,000
250	Communications	2,000		2,000
299	TOTAL INTANGIBLE	\$566,500	\$125,000	\$691,500
402	Conductor Casing 40 ft. at \$ 25.00 /ft	1,000	0	1,000
404	Surface Casing 650 ft. at \$ 18.00 /ft	11,700	0	11,700
406	Intermediate Casing 4,000 ft. at \$ 11.45 /ft	45,800	0	45,800
408	Protective Casing 12,050 ft. at \$ 8.00 /ft		96,400	96,400
410	Production Casing ft. at \$ /ft	0	0	0
412	Tubing 11,600 ft. at \$ 3.50 /ft	0	40,600	40,600
414	Wellhead	7,000	25,000	32,000
416	Sub-Surface Well Equipment	0	0	0
418	Tanks	0	25,000	25,000
420	Flow Lines		5,000	5,000
422	Valves & Fittings		7,500	7,500
424	Surface Equipment	0	25,000	25,000
426	Non-Controllable Equipment		3,000	3,000
428	Construction	0	10,000	10,000
430	Artificial Lift	0	0	0
499	TOTAL TANGIBLE	\$65,500	\$237,500	\$303,000
999	TOTAL COST	\$632,000	\$362,500	\$994,500

Approved By: _____

Date: 5/2/96

WI Company: _____

WI, %: _____

WI Approved By: _____

Date: _____

**BEFORE THE
OIL CONSERVATION DIVISION**
Santa Fe, New Mexico

Case No. 11553 Exhibit No. 3

Submitted by: Naumann Oil & Gas, Inc.

Hearing Date: June 27, 1996

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 2, 1996

Certified Mail

Paul Hall
Phillips Petroleum Company
4001 Penbrook
Odessa, TX 79762

Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico

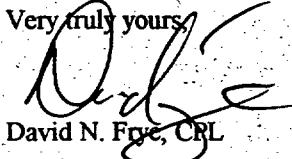
Dear Paul:

Logro Corporation hereby respectfully requests the participation of Phillips Petroleum Company ("Phillips") in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation would entertain a farmout of Phillip's interest under the following general terms:

1. Within 180 days of formal contract, Logro will drill or cause to be drilled an 11,800' Morrow test at a lawful location upon the captioned lands.
2. Upon successful completion of the test, Logro will earn an assignment of 100% of Phillip's interest in the spacing unit for the well from the base of the deepest currently producing zone to the base of the Morrow formation.
3. Logro will have the option to continuously develop the farmout acreage under a 180 day development program.
4. Phillips will retain an overriding royalty equal to the difference between 25% and existing lease burdens with the option to convert said override to a 25% working interest after payout or to increase said override by an additional 5% after payout.
5. All interests are subject to proportionate reduction.
6. The only penalty for failure of Logro to timely commence the above described test shall be the forfeiture of the right to earn any acreage hereunder.

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,


David N. Frye, CRL

BEFORE THE
OIL CONSERVATION DIVISION
Santa Fe, New Mexico

DNF/sbp
96183

Enclosures P.O. Box 261324 • Plano, Texas 75026-1324 •

Case No. 11553 Exhibit No. 4

Submitted by: Naumann Oil & Gas, Inc.

Hearing Date: June 27, 1996

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Baynard W. Malone
P. O. Box 87
Roswell, NM 88202

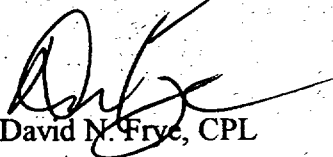
**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. Malone:

Pursuant to my telephone conversation with Mr. Charles Malone, Logro Corporation hereby respectfully requests the participation of the Anderson - Malone Trust, the Ross L. Malone Testamentary Trust and the Elizabeth A. Malone Testamentary Trust in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Frye, CPL

DNF/sbp

Enclosures

96199

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Earl L. Malone
2501 Cortez Court
Roswell, NM 88201

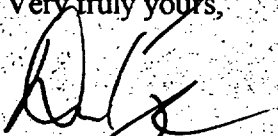
**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. Malone:

Pursuant to my telephone conversation with Mr. Charles Malone, Logro Corporation hereby respectfully requests your participation in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Prye, CPL

DNF/sbp

Enclosures

96198

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Charles F. Malone
P. O. Drawer 700
Roswell, NM 88202

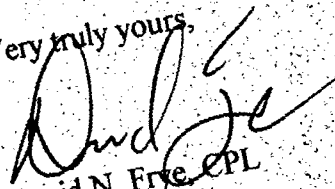
Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico

Dear Mr. Malone:

Logro Corporation hereby respectfully requests the participation of the Charles F. Malone Living Trust and Jean A. Eaton in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment.

We look toward your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,


David N. Frye, CPL

DNF/sbp

Enclosures

96197

P.O. Box 261324 • Plano, Texas 75026-1324 • (214) 964-0608 • Fax (214) 964-3319

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Edith C. Wheeler
P. O. Box 64035
Lubbock, TX 79464-4035

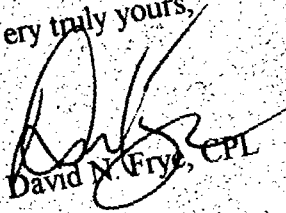
**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Ms Wheeler:

Logro Corporation hereby respectfully requests your participation in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment.

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,


David N. Frye, CPL

DNF/sbp

Enclosures

96200

P.O. Box 261324 • Plano, Texas 75026-1324 • (214) 964-0608 • Fax (214) 964-3319

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Mary J. McWhorter
769 Canyon Road
Logan, UT 84321-4316

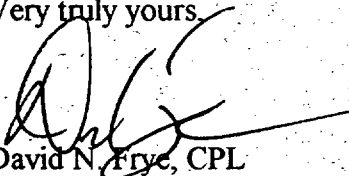
**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Ms McWhorter:

Logro Corporation hereby respectfully requests your participation in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Fryc, CPL

DNF/sbp

Enclosures

96201

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 31, 1996

Certified Mail

David H. Arrington, et ux
P. O. Box 2071
Midland, TX 79702

**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. & Mrs. Arrington:

Logro Corporation hereby respectfully request your participation in the drilling of a 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation would entertain a farmout of your interest under the following general terms:

1. Within 180 days of formal contract, Logro will drill or cause to be drilled an 11,800' Morrow test at a lawful location upon the captioned lands.
2. Upon successful completion of the test, Logro will earn an assignment of 100% of your interest in the spacing unit for the well from the base of the deepest currently producing zone to the base of the Morrow formation.
3. Logro will have the option to continuously develop the farmout acreage under a 180 day development program.
4. You will retain an overriding royalty equal to the difference between 25% and existing lease burdens with the option to convert said override to a 25% working interest after payout.
5. All interests are subject to proportionate reduction.
6. The only penalty for failure of Logro to timely commence the above described test shall be the forfeiture of the right to earn any acreage hereunder.

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,

David N. Frye, CPL

DNF/sbp
96228
Enclosures

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Michael H. Moore
14850 Oaks North Pl.
Dallas, TX 75240

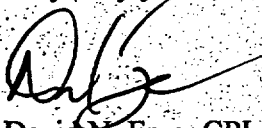
**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. Moore:

Logro Corporation hereby respectfully requests your participation in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment.

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,


David N. Frye, CPL

DNF/sbp

Enclosures

96202

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Ann D. Allison
P. O. Box 64035
Lubbock, TX 79464

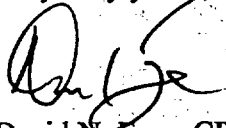
**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Ms Allison:

Logro Corporation hereby respectfully requests your participation in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Frye, CPL

DNF/sbp

Enclosures

96203

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Davis A. Coppedge
466 Goodwin Drive
Richardson, TX 75081-5549

**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. Coppedge :

Logro Corporation hereby respectfully requests your participation in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Frye, CPL

DNF/sbp

Enclosures

96205

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

James T. Coppedge
P. O. Box 43
Spencer, IN 47460

**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. Coppedge :

Logro Corporation hereby respectfully requests your participation in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Frye, CPL

DNF/sbp

Enclosures

96206

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

Brent W. McWhorter
6140 E. Voltaire
Scottsdale, AZ 85254-3851

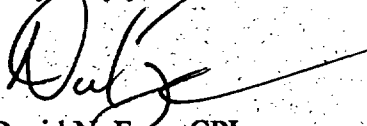
**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. McWhorter:

Logro Corporation hereby respectfully requests your participation in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Erye, CPL

DNF/sbp

Enclosures

96204

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 15, 1996

Certified Mail

L. R. Brigham
22303 Golden Canyon Circle
Chatsworth, CA 91311-1259

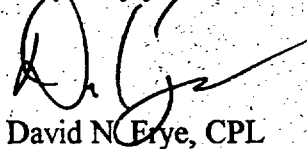
**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. Brigham:

Logro Corporation hereby respectfully request the participation of the Brigham Trust in the drilling of an 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation is willing to purchase a three year Term Assignment of your leases for \$100.00 per net acre and an 82.5% net revenue interest. This offer is subject to approval of title and a mutually agreeable form of assignment

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Erye, CPL

DNF/sbp

Enclosures

96208

LOGRO CORPORATION

P. O. BOX 261324
PLANO, TEXAS 75026-1324

May 9, 1996

TEL: (214) 964-0608
FAX: (214) 964-3319

Certified Mail

Aston Partnership
c/o Gail Cotton
First National Bank of Chicago, Agent
8150 N. Central Expressway, Suite 1211
Dallas, TX 75206

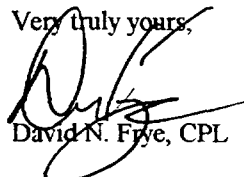
Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico

Dear Gail:

Logro Corporation hereby respectfully requests the participation of the Aston Partnership in the drilling of a 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation would entertain a farmout of your interest under the following general terms:

1. Within 180 days of formal contract, Logro will drill or cause to be drilled an 11,800' Morrow test at a lawful location upon the captioned lands.
2. Upon successful completion of the test, Logro will earn an assignment of 100% of your interest in the spacing unit for the well from the base of the deepest currently producing zone to the base of the Morrow formation.
3. Logro will have the option to continuously develop the farmout acreage under a 180 day development program.
4. You will retain an overriding royalty equal to the difference between 25% and existing lease burdens with the option to convert said override to a 25% working interest after payout or to increase said override by an additional 5% after payout.
5. All interests are subject to proportionate reduction.
6. The only penalty for failure of Logro to timely commence the above described test shall be the forfeiture of the right to earn any acreage hereunder.

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,

David N. Frye, CPL

DNF/sbp 96189

LOGRO CORPORATION

P. O. Box 261324
PLANO, TEXAS 75026-1324

May 9, 1996

TEL: (214) 964-0608
FAX: (214) 964-3319

Certified Mail

Charles A. Aston, III
Estate of Lincoln Aston
P. O. Box 457
Round Rock, TX 78681

**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Mr. Aston:

Logro Corporation hereby respectfully requests the participation of the Estate of Lincoln Aston in the drilling of a 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation would entertain a farmout of your interest under the following general terms:

1. Within 180 days of formal contract, Logro will drill or cause to be drilled an 11,800' Morrow test at a lawful location upon the captioned lands.
2. Upon successful completion of the test, Logro will earn an assignment of 100% of your interest in the spacing unit for the well from the base of the deepest currently producing zone to the base of the Morrow formation.
3. Logro will have the option to continuously develop the farmout acreage under a 180 day development program.
4. You will retain an overriding royalty equal to the difference between 25% and existing lease burdens with the option to convert said override to a 25% working interest after payout or to increase said override by an additional 5% after payout.
5. All interests are subject to proportionate reduction.
6. The only penalty for failure of Logro to timely commence the above described test shall be the forfeiture of the right to earn any acreage hereunder.

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,


David N. Frye, CPL

DNF/sbp 96188

Enclosures

LOGRO CORPORATION

Oil and Gas Exploration and Production

May 31, 1996

Certified Mail

Robert H. Watson
Read & Stevens, Inc.
P. O. Box 1518
Roswell, NM 88202

**Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico**

Dear Bob:

Logro Corporation hereby respectfully request the participation of Read & Stevens, Inc. in the drilling of a 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation would entertain a farmout of Read & Stevens' interest under the following general terms:

1. Within 180 days of formal contract, Logro will drill or cause to be drilled an 11,800' Morrow test at a lawful location upon the captioned lands.
2. Upon successful completion of the test, Logro will earn an assignment of 100% of Read & Stevens' interest in the spacing unit for the well from the base of the deepest currently producing zone to the base of the Morrow formation.
3. Logro will have the option to continuously develop the farmout acreage under a 180 day development program.
4. Read & Stevens will retain an overriding royalty equal to the difference between 25% and existing lease burdens with the option to convert said override to a 25% working interest after payout.
5. All interests are subject to proportionate reduction.
6. The only penalty for failure of Logro to timely commence the above described test shall be the forfeiture of the right to earn any acreage hereunder.

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,

David N. Frye, CPL

DNF/sbp

96227

Enclosures

P.O Box 261324 • Plano, Texas 75026-1324 • (214) 964-0608 • Fax (214) 964-3319

LOGRO CORPORATION

P. O. BOX 261324
PLANO, TEXAS 75026-1324

May 9, 1996

TEL: (214) 964-0608
FAX: (214) 964-3319

Certified Mail

Bill Shackelford
Anadarko Petroleum Corporation
P. O. Box 1330
Houston, TX 77251-1330

Re: Well Proposal
S/2 Section 31,
Township 17 South, Range 30 East
Eddy County, New Mexico

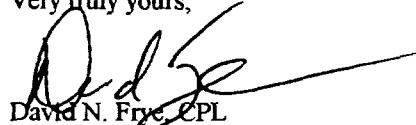
Dear Bill:

Logro Corporation hereby respectfully requests the participation of Anadarko Petroleum Corporation in the drilling of a 11,800' Morrow test to be located 2,220' FEL & 660' FSL of the captioned Section 31. The well is expected to cost \$994,500 as detailed on the attached AFE. In the alternative, Logro Corporation would entertain a farmout of your interest under the following general terms:

1. Within 180 days of formal contract, Logro will drill or cause to be drilled an 11,800' Morrow test at a lawful location upon the captioned lands.
2. Upon successful completion of the test, Logro will earn an assignment of 100% of your interest in the spacing unit for the well from the base of the deepest currently producing zone to the base of the Morrow formation.
3. Logro will have the option to continuously develop the farmout acreage under a 180 day development program.
4. You will retain an overriding royalty equal to the difference between 25% and existing lease burdens with the option to convert said override to a 25% working interest after payout or to increase said override by an additional 5% after payout.
5. All interests are subject to proportionate reduction.
6. The only penalty for failure of Logro to timely commence the above described test shall be the forfeiture of the right to earn any acreage hereunder.

We look toward to your prompt and favorable consideration of this proposal. If you have any questions, please do not hesitate to call.

Very truly yours,



David N. Frye, CPL

DNF/sbp 96187
Enclosures

P 028 405 539



Receipt for Certified Mail

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

Sent to <i>Read & Stevens, Inc</i>	
Street and No. <i>P.O. Box 1518</i>	
P.O., State and ZIP Code <i>Roswell, NM 88202</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 31 1990</i>	

P 028 405 532



Receipt for Certified Mail

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

Sent to <i>David H. Arrington, et al</i>	
Street and No. <i>P.O. Box 2071</i>	
P.O., State and ZIP Code <i>Midland, TX 79702</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 31 1990</i>	

P 028 352 826



Receipt for Certified Mail

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

Sent to <i>Phillips Petroleum Comp</i>	
Street and No. <i>4001 Penbrook</i>	
P.O., State and ZIP Code <i>Odessa, TX 79762</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 31 1990</i>	

P 028 351 485



Receipt for Certified Mail

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

Sent to <i>Charles A. Astory, III</i>	
Street and No. <i>P.O. Box 457</i>	
P.O., State and ZIP Code <i>Round Rock, TX 78681</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	1.10
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 9 1990</i>	

P 028 351 482



Receipt for Certified Mail

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

Sent to <i>Nations Bank of Texas</i>	
Street and No. <i>P.O. Box 830308</i>	
P.O., State and ZIP Code <i>Dallas, TX 75283-0308</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 9 1990</i>	

P 028 352 821



Receipt for Certified Mail

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

Sent to <i>First National Bank of</i>	
Street and No. <i>8150 N. Central Express</i>	
P.O., State and ZIP Code <i>Dallas, TX 75206</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	1.10
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 9 1990</i>	

PS Form 3800, June 1991

PS Form 3800, June 1991

PS Form 3800, June 1991

PS Form 3800, June 1991

PS Form 3800, June 1991

PS Form 3800, June 1991

P 028 352 825



Receipt for Certified Mail

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

Sent to <i>Hamilton Handy, Trustee</i>	
Street and No. <i>701 B Street, Suite 176</i>	
P.O., State and ZIP Code <i>San Diego, CA 92101-8103</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 16 1991</i>	

P 028 351 507



Receipt for Certified Mail

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

Sent to <i>Ann Mitchell Keenan</i>	
Street and No. <i>P.O. Box 248</i>	
P.O., State and ZIP Code <i>Avenal, CA 93204</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 16 1991</i>	

PS Form 3800, June 1991

P 028 352 827



Receipt for Certified Mail

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

Sent to <i>Anadarko Pet. Corp.</i>	
Street and No. <i>P.O. Box 1330</i>	
P.O., State and ZIP Code <i>Houston, TX 77251-1330</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	1.10
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 16 1991</i>	

PS Form 3800, June 1991

P 028 352 870



Receipt for Certified Mail

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

Sent to <i>Frank O. Mitchell et ux</i>	
Street and No. <i>2861 Tansley</i>	
P.O., State and ZIP Code <i>Altadena, CA 91001-1811</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 16 1991</i>	

P 028 352 828



Receipt for Certified Mail

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

Sent to <i>L.R. Brigham</i>	
Street and No. <i>22303 Golden Canyon Circle</i>	
P.O., State and ZIP Code <i>Chatsworth, CA 91311-1259</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 16 1991</i>	

PS Form 3800, June 1991

P 028 351 508



Receipt for Certified Mail

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

Sent to <i>Kathryn Nicholas</i>	
Street and No. <i>P.O. Box 18423</i>	
P.O., State and ZIP Code <i>Anaheim, CA 92812-8</i>	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date <i>MAY 16 1991</i>	

PS Form 3800, June 1991

P 028 351 483



Receipt for Certified Mail

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

Sent to Brant W. McWhorter	
Street and No. 6190 E. Voltaire	
P.O., State and ZIP Code Scottsdale, AZ 85254-3851	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date	

PS Form 3800, June 1991

P 028 352 857



Receipt for Certified Mail

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

Sent to Davis A. Coppedge	
Street and No. 466 Goodwin Drive	
P.O., State and ZIP Code Richardson, TX 75081-5549	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date	

PS Form 3800, June 1991

P 028 352 869



Receipt for Certified Mail

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

Sent to James T. Coppedge	
Street and No. P.O. Box 43	
P.O., State and ZIP Code Spencer, IN 47460	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date	

PS Form 3800, June 1991

P 028 351 493



Receipt for Certified Mail

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

Sent to Mary J. McWhorter	
Street and No. 769 Canyon Road	
P.O., State and ZIP Code Lugan, UT 84321-4316	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date	

PS Form 3800, June 1991

P 028 351 492



Receipt for Certified Mail

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

Sent to Michael H. Moore	
Street and No. 14850 Oaks Valley PL	
P.O., State and ZIP Code Dallas, TX 75240	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date	

PS Form 3800, June 1991

P 028 352 855



Receipt for Certified Mail

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

Sent to Ann O. Allison	
Street and No. P.O. Box 64035	
P.O., State and ZIP Code Lubbock, TX 79460	
Postage	\$.32
Certified Fee	1.10
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$2.52
Postmark or Date	

PS Form 3800, June 1991

P 028 352 831



Receipt for Certified Mail

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

Sent to		Raymond W. Malone	
Street and No.		P.O. Box 87	
P.O., State and ZIP Code		Roswell, NM 88202	
Postage		\$.32	
Certified Fee		1.10	
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered		1.10	
Return Receipt Showing to Whom, Date, and Addressee's Address			
TOTAL Postage & Fees		\$ 2.52	
Postmark or Date			

PS Form 3800, June 1991

P 028 351 494



Receipt for Certified Mail

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

Sent to		Edith C. Wheeler	
Street and No.		P.O. Box 64035	
P.O., State and ZIP Code		Lubbock, TX 79464-4035	
Postage		\$.32	
Certified Fee		1.10	
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered		1.10	
Return Receipt Showing to Whom, Date, and Addressee's Address			
TOTAL Postage & Fees		\$ 2.52	
Postmark or Date			

PS Form 3800, June 1991

P 028 352 833



Receipt for Certified Mail

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

Sent to		Charles F. Malone	
Street and No.		P.O. Drawer 700	
P.O., State and ZIP Code		Roswell, NM 88202	
Postage		\$.32	
Certified Fee		1.10	
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered		1.10	
Return Receipt Showing to Whom, Date, and Addressee's Address			
TOTAL Postage & Fees		\$ 2.52	
Postmark or Date			

PS Form 3800, June 1991

P 028 352 832



Receipt for Certified Mail

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

Sent to		Earl L. Malone	
Street and No.		2501 Carter Court	
P.O., State and ZIP Code		Roswell, NM 88201	
Postage		\$.32	
Certified Fee		1.10	
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt Showing to Whom & Date Delivered		1.10	
Return Receipt Showing to Whom, Date, and Addressee's Address			
TOTAL Postage & Fees		\$ 2.52	
Postmark or Date			

PS Form 3800, June 1991

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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Raynard W. Malone
P.O. Box 87
Roswell, NM 88202

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

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

4a. Article Number

P 028 352 831

4b. Service Type

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

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991

U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Earl L. Malone
2501 Cortez Court
Roswell, NM 88201

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

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

4a. Article Number

P 028 352 832

4b. Service Type

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

7. Date of Delivery

5-22-96

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991

U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Charles F. Malone
P.O. Drawer 700
Roswell, NM 88202

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

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

4a. Article Number

P 028 352 833

4b. Service Type

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

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991

U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

Edith C. Wheeler
P.O. Box 64035
Lubbock, TX 79464-4035

4a. Article Number

P 028 351 491

4b. Service Type

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

7. Date of Delivery

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

5. Signature (Addressee)

6. Signature (Agent)

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

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

David H. Arrington, et ux
P.O. Box 2071
Midland, TX 79702

4a. Article Number

P 028 405 532

4b. Service Type

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

7. Date of Delivery

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

5. Signature (Addressee)

6. Signature (Agent)

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

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

Ann O. Allison
P.O. Box 64035
Lubbock, TX 79464

4a. Article Number

P 028 352 855

4b. Service Type

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

7. Date of Delivery

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

5. Signature (Addressee)

6. Signature (Agent)

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

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

- 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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Davis A. Coppedge
466 Goodwin Drive
Richardson, TX 75081-5549

4a. Article Number

P 028 352 857

4b. Service Type

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

7. Date of Delivery

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

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991

U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

- 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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

James T. Coppedge
P.O. Box 43
Spencer, IN 47460

4a. Article Number

P 028 352 869

4b. Service Type

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

7. Date of Delivery

5/30

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

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991

U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

- 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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Brent W. McWhorter
6140 E. Voltaire
Scottsdale, AZ 85254-8851

4a. Article Number

P 028 351 483

4b. Service Type

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

7. Date of Delivery

5-18-96

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

5. Signature (Addressee)

6. Signature (Agent)

PS Form 3811, December 1991

U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

- 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.
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- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

L.R. Brigham
22303 Golden Canyon Circle
Chatsworth, CA 91311-1259

5. Signature (Addressee)

6. Signature (Agent)

4a. Article Number

P 028 352 828

4b. Service Type

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

7. Date of Delivery

5-22-96

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.

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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

First National Bank of Chicago
8150 N. Central Expressway
Suite 1211
Dallas, TX 75206

5. Signature (Addressee)

6. Signature (Agent)

4a. Article Number

P 028 352 821

4b. Service Type

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

7. Date of Delivery

5-20-96

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.

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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Charles A. Aston, III
P.O. Box 451
Round Rock, TX 78681
Charles A. Aston

5. Signature (Addressee)

6. Signature (Agent)

4a. Article Number

P 028 351 485

4b. Service Type

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

7. Date of Delivery

MAY 23 1996

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.

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.
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- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Nations Bank of Texas
P.O. Box 830308
Dallas, TX 75283-0308

4a. Article Number
P 028 351 482

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

7. Date of Delivery
5/10/96

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.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Read & Stevens, Inc.
P.O. Box 1518
Roswell, NM 88202

4a. Article Number
P 028 405 533

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

7. Date of Delivery
6-3-96

5. Signature (Addressee)

6. Signature (Agent)
Anna Seilheimer

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.

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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Adadarko Pet Corp.
P.O. Box 1330
Houston, TX 77251-1330

4a. Article Number
P 028 352 827

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

7. Date of Delivery
MAY 13 1996

5. Signature (Addressee)
CURTIS NICKERSON

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.

LOGRO CORPORATION

Oil and Gas Exploration and Production
P.O. Box 261324
Plano, Texas 75026-1324

NAME Logro RETURNED TO SENDER
1st Notice 6-18-96
2nd Notice Unclaimed
Return Unclaimed

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

CERTIFIED

P 028 351 492

MAIL

Michael H. Moore
14850 Oaks North Pl.
Dallas, TX 75240

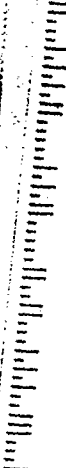


U.S. POSTAGE
PAID
PLANO, TX
MAY 18, 1996
AMOUNT
\$2.52
00026953-04

RETURN RECEIPT REQUESTED

NAME Logro
1st Notice 6-18-96

75026/1324



Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4, 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.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Phillips Petroleum Company
4001 Redbrook
Odessa, Tx 79762

Signature (Addressee)
Signature (Agent)

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

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

4a. Article Number
0028352826

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

7. Date of Delivery 5-6-96
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.

BEFORE THE
OIL CONSERVATION DIVISION

NEW MEXICO DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES

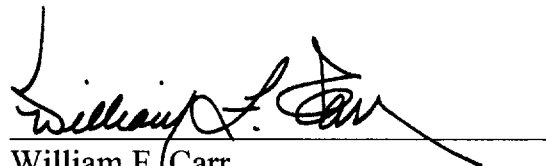
IN THE MATTER OF THE APPLICATION
OF NAUMANN OIL & GAS COMPANY
FOR COMPULSORY POOLING, AN
UNORTHODOX WELL LOCATION, AND
A NON-STANDARD PRORATION UNIT,
EDDY COUNTY, NEW MEXICO.

CASE NO. 11553

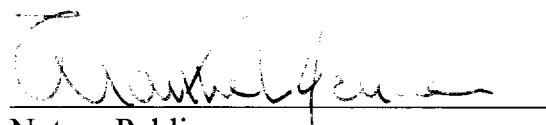
AFFIDAVIT

STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

William F. Carr, attorney in fact and authorized representative of Naumann Oil & Gas Company, the Applicant herein, being first duly sworn, upon oath, states that notice has been given to all interested persons entitled to receive notice of this application under Oil Conservation Division rules, and that notice has been given at the addresses shown on Exhibit "A" attached hereto.


William F. Carr

SUBSCRIBED AND SWORN to before me this 20th day of June, 1996.


Notary Public

My Commission Expires:

August 19, 1997

EXHIBIT A

First National Bank of Chicago, Agent
Aston Partnership
Gail Cotton, Vice President
8150 N. Central Expressway, Suite 1211
Dallas, TX 75206

NationsBank of Texas, Dallas, N.A., Trustee
Charles A. Aston, III
Valerie Kobal
Ellen Paul
Audrey Bean
Jerry L. Bridgens
Assistant Vice President
P.O. Box 830308
Dallas, TX 75283-0308

Phillips Petroleum Company
Paul D. Hall
4001 Penbrook
Odessa, TX 79762

Read & Stevens, Inc.
Robert H. Watson
P.O. Box 1518
Roswell, NM 88202

Enron Oil & Gas Company
P.O. Box 2267
Midland, TX 79702

Ann D. Allison
P.O. Box 64035
Lubbock, TX 79464

David H. Arrington, et ux
P.O. Box 2071
Midland, TX 79702

L. R. Brigham, et ux, Trustee
of the Brigham Trust
22303 Golden Canyon Circle
Chatsworth, CA 91311-1259

Davis A. Coppedge
466 Goodwin Drive
Richardson, TX 75081-5549

James T. Coppedge
P.O. Box 43
Spencer, IN 47460

Ann Mitchell Keenan
P.O. Box 248
Avenal, CA 93204

Baynard W. Malone, Trustee
Ross L. Malone Testamentary Trust
Elizabeth A. Malone Testamentary Trust
Anderson-Malone Trust
P.O. Box 87
Roswell, NM 88202

Charles F. Malone, Trustee
Charles F. Malone Living Trust
Agent for Jean A. Eaton
P.O. Box 700
Roswell, NM 88202

Earl L. Malone
2501 Cortez Court
Roswell, NM 88201

Brent W. McWhorter, Trustee
McWhorter Family Trust
6140 E. Voltaire
Scottsdale, AZ 85254-3851

Mary J. McWhorter
769 Canyon Road
Logan, UT 84321-4316

Hamilton Moody, Trustee
701 B. Street
Suite 1765
San Diego, CA 92101-8103

Michael H. Moore
14850 Oaks North Pl.
Dallas, TX 75240

Kathryn Nicholas
P.O. Box 18473
Anaheim, CA 92817-8473

Frank D. Mitchell, et ux
2861 Tanoble
Altadena, CA 91001-1811

Edith C. Wheeler
P.O. Box 64035
Lubbock, TX 79464-4035

Anadarko Petroleum Corporation
Bill Shackelford
P.O. Box 1330
Houston, TX 77251-1330

Estate of Lincoln Aston
Charles A. Aston, III
Personal Representative
P.O. Box 457
Round Rock, TX 78681

**BEFORE THE
OIL CONSERVATION DIVISION**
Santa Fe, New Mexico

Case No. 11553 Exhibit No. 5

Submitted by: Naumann Oil & Gas, Inc.

Hearing Date: June 27, 1996

CAMPBELL, CARR, BERGE
& SHERIDAN, P.A.
LAWYERS

MICHAEL B. CAMPBELL
WILLIAM F. CARR
BRADFORD C. BERGE
MARK F. SHERIDAN

MICHAEL H. FELDEWERT
TANYA M. TRUJILLO
PAUL R. OWEN

JACK M. CAMPBELL
OF COUNSEL

JEFFERSON PLACE
SUITE 1 - 110 NORTH GUADALUPE
POST OFFICE BOX 2208
SANTA FE, NEW MEXICO 87504-2208
TELEPHONE: (505) 988-4421
TELECOPIER: (505) 983-6043

June 6, 1996

CERTIFIED MAIL
RETURN RECEIPT REQUEST

**TO: TO INTEREST OWNERS IN THE S/2, SECTION 12, TOWNSHIP 22 SOUTH,
RANGE 30 EAST, N.M.P.M., EDDY COUNTY, NEW MEXICO.**

**Re: Application of Naumann Oil & Gas, Inc. for Compulsory Pooling, Eddy County,
New Mexico**

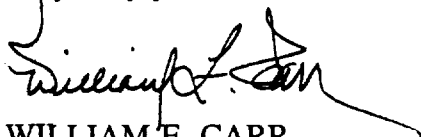
Gentlemen:

This letter is to advise you that Naumann Oil & Gas, Inc. has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling of certain mineral interests in and under the S/2 of Section 31, Township 17 South, Range 30 East, N.M.P.M., Eddy County, New Mexico. Naumann Oil & Gas, Inc. proposes to drill this well for its partner, Logro Corporation and to dedicate these pooled units to its Sand Tank Federal Com No. 1 Well to be drilled at an orthodox location 660 feet from the South line and 2,220 feet from the East line of said Section 31.

This application has been set for hearing before a Division Examiner on June 27, 1996. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases have been requested by the Division (Memorandum 2-90) to file a Prehearing Statement substantially in the form prescribed by the Division. Prehearing statements should be filed by 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,



WILLIAM F. CARR
ATTORNEY FOR NAUMANN OIL & GAS, INC.
WFC:yms
Enc.

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

First National Bank of Chicago, Agent
Aston Partnership
Gail Cotton, Vice President
8150 N. Central Expressway, Suite 1211
Dallas, TX 75206

4a. Article Number

P 176 016 842

4b. Service Type

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

7. Date of Delivery

6-11-96

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X Gail Cotton

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 176 016 842



Receipt for Certified Mail

No Insurance Coverage Provided

First National Bank of Chicago, Agent
Aston Partnership
Gail Cotton, Vice President
8150 N. Central Expressway, Suite 1211
Dallas, TX 75206

Postage	\$
Certified Fee	
Registered Fee	
Express Mail Fee	
Return Receipt Fee	
Return Receipt for Merchandise Fee	
Return Receipt for Restricted Delivery Fee	
POSTAGE & Fee	\$
Postmark or Date JUN - 6 1996	

NationsBank of Texas, Dallas, N.A.,
Trustee
Charles A. Aston, III
Valerie Kobal
Ellen Paul
Audrey Bean

P 176 016 844



Receipt for
Certified Mail

No Insurance Coverage Provided

Jerry L. Bridgens
Assistant Vice President
P.O. Box 830308
Dallas, TX 75283-0308

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt (if any)	
Return Receipt (if any) with Restricted Delivery Address	
Total Postage & Fees	\$
Postmark or Date JUN - 6 1996	

PS Form 3800, June 1991

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

SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, 4a, and 4b. NationsBank of Texas, Dallas, N.A., Trustee Charles A. Aston, III Valerie Kobal Ellen Paul Audrey Bean Jerry L. Bridgens Assistant Vice President P.O. Box 830308 Dallas, TX 75283-0308		If space does not that we can return this article number, red and the date		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
5. Received By: (Print Name) 		4a. Article Number P 176 016 844		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature: (Addressee) X Robney Medlock		7. Date of Delivery JUN 12 1996		8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
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- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

Phillips Petroleum Company
Paul D. Hall
4001 Penbrook
Odessa, TX 79762

4a. Article Number

P 106 676 263

4b. Service Type

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

7. Date of Delivery

6-10-96 gmjll

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *John M. Hall*

PS Form 3800, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 676 263

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Phillips Petroleum Company
Paul D. Hall
4001 Penbrook
Odessa, TX 79762

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date JUN - 6 1996	

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

SENDER:

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

Read & Stevens, Inc.
Robert H. Watson
P.O. Box 1518
Roswell, NM 88202

4a. Article Number

P 106 677 019

4b. Service Type

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

7. Date of Delivery

6-10-96

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)

[Signature]

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 019

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Read & Stevens, Inc.
Robert H. Watson
P.O. Box 1518
Roswell, NM 88202

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

3. Article Addressed to:

Enron Oil & Gas Company
P.O. Box 2267
Midland, TX 79702

4a. Article Number

P 106 677 020

4b. Service Type

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

7. Date of Delivery

JUN 11 1996

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X 13 301119

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 020

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

Enron Oil & Gas Company
P.O. Box 2267
Midland, TX 79702

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	JUN - 6 1996

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

3. Article Addressed to:

Ann D. Allison
P.O. Box 64035
Lubbock, TX 79464

4a. Article Number

P106677021

4b. Service Type

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

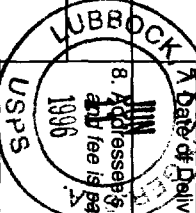
7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

Domestic Return Receipt



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

P-106 677 021

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Ann D. Allison
P.O. Box 64035
Lubbock, TX 79464

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date JUN - 6 1996	

Thank you for using Return Receipt Service.

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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:

David H. Arrington, et ux
P.O. Box 2071
Midland, TX 79702

4a. Article Number

P 106 677 022

4b. Service Type

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

Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

David H. Arrington

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

Domestic Return Receipt

P-106 677 022

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

David H. Arrington, et ux
P.O. Box 2071
Midland, TX 79702

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom Date and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	JUN - 6 1996

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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:

L. R. Brigham, et ux, Trustee
of the Brigham Trust
22303 Golden Canyon Circle
Chatsworth, CA 91311-1259

4a. Article Number

P 106 677 023

4b. Service Type

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

7. Date of Delivery

JUN 6 1996

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X

PS Form 3811 December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 023

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

L. R. Brigham, et ux, Trustee
of the Brigham Trust
22303 Golden Canyon Circle
Chatsworth, CA 91311-1259

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date JUN - 6 1996	

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

Davis A. Coppedge
466 Goodwin Drive
Richardson, TX 75081-5549

4a. Article Number

P 106 677 024

4b. Service Type

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

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Davis A. Coppedge*
 PS Form 3811, December 1994

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

Domestic Return Receipt

Thank you for using Return Receipt® Service.

P-106 677 024

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

Davis A. Coppedge
466 Goodwin Drive
Richardson, TX 75081-5549

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date JUN - 6 1995	

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

James T. Coppedge
P.O. Box 43
Spencer, IN 47460

4a. Article Number

P 106 677 025

4b. Service Type

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

7. Date of Delivery

6-10-96

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

James T. Coppedge

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 025

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

James T. Coppedge
P.O. Box 43
Spencer, IN 47460

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	JUN - 6 1006

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

Ann Mitchell Keenan
P.O. Box 248
Avenal, CA 93204

4a. Article Number

P 106 677 026

4b. Service Type

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

7. Date of Delivery

JUN 1 1996

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Ann Mitchell Keenan*

8. Addressee's Address (To whom article is delivered and fee is paid)

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 026

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Ann Mitchell Keenan
P.O. Box 248
Avenal, CA 93204

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	JUN - 6 1996

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

Baynard W. Malone, Trustee
 Ross L. Malone Testamentary Trust
 Elizabeth A. Malone Testamentary Trust
 Anderson-Malone Trust
 P.O. Box 87
 Roswell, NM 88202

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

4a. Article Number

106 677 027

4b. Service Type

- ☐ Registered
- ☐ Registered
- ☐ Express Mail
- ☐ Registered Receipt for Merchandise
- ☐ Insured
- ☐ COD

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

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 027

RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

Baynard W. Malone, Trustee
 Ross L. Malone Testamentary Trust
 Elizabeth A. Malone Testamentary Trust
 Anderson-Malone Trust
 P.O. Box 87
 Roswell, NM 88202

Postage	S
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	S
Postmark or Date	JUN - 6 1996

PS Form 3800, June 1985

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Charles F. Malone, Trustee
Charles F. Malone Living Trust
Agent for Jean A. Eaton
P.O. Box 700
Roswell, NM 88202

4a. Article Number

106 677 028

4b. Service Type

- ☐ Registered
- ☐ Express Mail
- ☒ Certified
- ☐ Insured
- ☐ COD

5. Return Receipt for Merchandise

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

10-10-96

5. Received By: (Print Name)

W. Silva

6. Signature (Addressee or Agent)

X W. Silva

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 028

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Charles F. Malone, Trustee
Charles F. Malone Living Trust
Agent for Jean A. Eaton
P.O. Box 700
Roswell, NM 88202

Postage	S
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	S
Postmark or Date JUN - 6 1996	

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Earl L. Malone
2501 Cortez Court
Roswell, NM 88201

4a. Article Number

P 106 677 029

4b. Service Type

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

7. Date of Delivery

6/10/96

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

5. Received By: (Print Name)

MRS. EARL L. MALONE

6. Signature: (Addressee or Agent)

X Mrs. Earl L. Malone

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 029

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Earl L. Malone
2501 Cortez Court
Roswell, NM 88201

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	JUN - 6 1996

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Brent W. McWhorter, Trustee
McWhorter Family Trust
6140 E. Voltaire
Scottsdale, AZ 85254-3851

4a. Article Number

P 106 677 030

4b. Service Type

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

7. Date of Delivery

6-10-96

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 030

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Brent W. McWhorter, Trustee
McWhorter Family Trust
6140 E. Voltaire
Scottsdale, AZ 85254-3851

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date JUN 10 1996	

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

Mary J. McWhorter
769 Canyon Road
Logan, UT 84321-4316

4a. Article Number

P 106 677 031

4b. Service Type

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

7. Date of Delivery

4/10/96

8

2

C

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

5. Received By: (Print Name)
6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

Domestic Return Receipt

P-106 677 031

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Mary J. McWhorter
769 Canyon Road
Logan, UT 84321-4316

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date MAY - 6 1996	

Thank you for using Return Receipt Service.

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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:

Hamilton Moody, Trustee
701 B. Street
Suite 1765
San Diego, CA 92101-8103

4a. Article Number
P 106 677 032

4b. Service Type

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

7. Date of Delivery
JUN 11

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)
X Bekir Nalle

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P-106 677 032

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Hamilton Moody, Trustee
701 B. Street
Suite 1765
San Diego, CA 92101-8103

Postage	S
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	S
Postmark or Date	JUN - 6 1996

P-106 677 033

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Michael H. Moore
14850 Oaks North Pl.
Dallas, TX 75240

PS Form 3800, June 1985

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date JUN - 6 1996	

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

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

3. Article Addressed to:

Kathryn Nicholas
P.O. Box 18473
Anaheim, CA 92817-8473

4a. Article Number

9106677034

4b. Service Type

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

7. Date of Delivery

JUN 11 1996

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

Domestic Return Receipt

P-106 677 034

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

Kathryn Nicholas
P.O. Box 18473
Anaheim, CA 92817-8473

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	JUN - 6 1996

PS Form 3800, June 1985

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Frank D. Mitchell, et ux
2861 Tanofie
Altadena, CA 91001-1811

4a. Article Number

P111 332 789

4b. Service Type

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

7. Date of Delivery

6/3/96

5. Received By (Print Name)

[Signature]

6. Signature (Addressee or Agent)

X

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

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 111 332 789



**Receipt for
Certified Mail**

No Insurance Coverage Provided

Frank D. Mitchell, et ux
2861 Tanofie
Altadena, CA 91001-1811

Postage	\$
Insured Fee	
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 JUN - 6 1996	

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Edith C. Wheeler
P.O. Box 64035
Lubbock, TX 79464-4035

4a. Article Number

P111 332 790

4b. Service Type

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

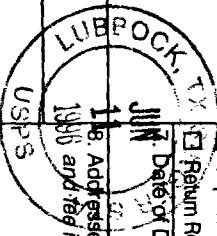
Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

Domestic Return Receipt



P 111 332 790

Receipt for Certified Mail

No Insurance Coverage Provided



Edith C. Wheeler
P.O. Box 64035
Lubbock, TX 79464-4035

Postage	\$
Restricted Fee	
Return Receipt 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	JUN 5 1996

Thank you for using Return Receipt Service.

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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:

Anadarko Petroleum Corporation
Bill Shackelford
P.O. Box 1330
Houston, TX 77251-1330

4a. Article Number

P 111 332 791

4b. Service Type

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

7. Date of Delivery

JUN 11 1996

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

P 111 332 791



**Receipt for
Certified Mail**

No Insurance Coverage Provided

Anadarko Petroleum Corporation
Bill Shackelford
P.O. Box 1330
Houston, TX 77251-1330

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt (allowing to Whom & Date of Delivery)	
Return Receipt (Signature to Whom, Date, and Addressee's Address)	
TOTAL Postage & Fees	\$
Postmark or Date	

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

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

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

- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Estate of Lincoln Aston
Charles A. Aston, III
Personal Representative
P.O. Box 457
Round Rock, TX 78681

4a. Article Number

P 111 332 792

4b. Service Type

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

7. Date of Delivery

5. Received By: (Print Name)

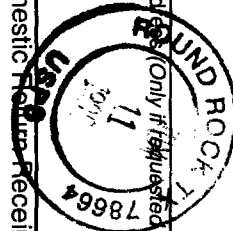
8. Addressee's Address (Only if requested and fee is paid)

6. Signature: (Addressee or Agent)

Charles A. Aston

PS Form 3811, December 1994

Domestic Return Receipt



Thank you for using Return Receipt

P 111 332 792

Receipt for Certified Mail

No Insurance Coverage Provided

Estate of Lincoln Aston
Charles A. Aston, III
Personal Representative
P.O. Box 457
Round Rock, TX 78681

Postage	\$
Handling Fee	
Return Receipt Fee	
Restricted Delivery Fee	
Return Receipt Forward to Addressee's Address	
Return Receipt Forward to Other Address and Addressee's Address	
Extra Postage & Fee	\$
Postmark or Date	JUN - 6 1996

LARGE FORMAT
EXHIBIT HAS
BEEN REMOVED
AND IS LOCATED
IN THE NEXT FILE

LARGE FORMAT
EXHIBIT HAS
BEEN REMOVED
AND IS LOCATED
IN THE NEXT FILE

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