

GONZALES 31 FEDERAL #6Y

SAGA PETROLEUM
415 S. WALL, STE. 835
MIDLAND, TX 79701

P 329 365 309 5-6-98

MATADOR PETROL.
415 W. WALL, STE. 1101
MIDLAND, TX 79701

P 329 365 310 5-6-98

ANNETTE O. MARTIN TRUST
8516 STONE HARBOR CT.
LAS VEGAS, NV. 89129

P 329 365 272 5-6-98

OCD – HOBBS
PO BOX 1980
HOBBS, NM 88240

P 329 365 292 5-19-98

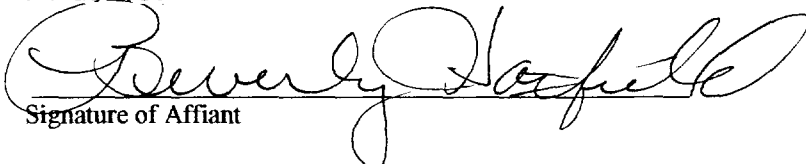
OCD – SANTA FE
2040 S. PACHECO
SANTA FE, NM 87505

P 329 365 291 5-19-98

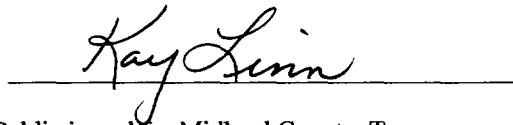
BLM – HOBBS
414 W. TAYLOR
HOBBS, NM 88240

P 329 365 279 8-14-98

A complete Application For Authorization to Inject on the **GONZALES 31 FEDERAL #6Y** was mailed to the above.

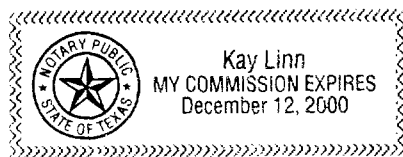

Signature of Affiant

Subscribed and sworn to before me this day of August 17, 1998.



Notary Public in and for Midland County, Texas.

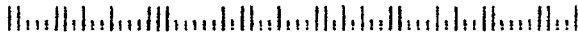
My Commission Expires



• Print your name, address, and ZIP Code in this box •

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



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:

SAGA PETROLEUM
415 S. WALL, STE. 835
MIDLAND, TX 79701

4a. Article Number

P329365309

4b. Service Type

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

7. Date of Delivery

5-7-98

5. Received By: (Print Name)

Jean Marchbanks

6. Signature: (Addressee or Agent)

X Jean Marchbanks

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

Thank you for using Return Receipt Service.

is your RETURN ADDRESS completed on the reverse side?

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 - 2. ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

SAGA PETROLEUM
415 S. WALL, STE. 835
MIDLAND, TX 79701

4a. Article Number

1329365309

4b. Service Type

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

7. Date of Delivery

3 7 98

5. Received By: (Print Name)

Jan Marchbanks

6. Signature: (Addressee or Agent)

Jan Marchbanks

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

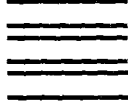
PS Form 3811, December 1994

102545, 97 E-0179

Domestic Return Receipt

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE

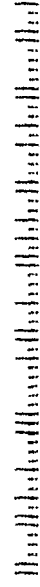


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USPS
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SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



UNITED STATES POSTAL SERVICE

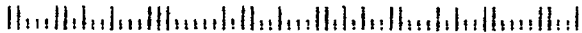


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P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



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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:

MATADOR PETROLEUM CORP.
415 W. WALL ST. STE. 1101
MIDLAND, TX 79701

4a. Article Number

P329365310

4b. Service Type

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

7. Date of Delivery

5-8-94

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Cherry Cooker

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

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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SENDER:

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 2. ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

MATADOR PETROLEUM CORP.
415 W. WALL ST., STE. 1101
MIDLAND, TX 79701

4a. Article Number

P329365310

4b. Service Type

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

7. Date of Delivery

5-8-98

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)

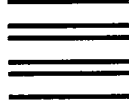
X Cherry Cooker

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

UNITED STATES POSTAL SERVICE



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- Print your name, address, and ZIP Code in this box •

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P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



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Permit No. G-10

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SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



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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:

Annette O. Martin Trust
8516 Stone Harbor Ct.
Las Vegas, NV 89129

4a. Article Number

P329365272

4b. Service Type

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

7. Date of Delivery

6-10-98

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

X Annette Martin

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

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

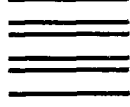
SENDER: <ul style="list-style-type: none">■ Complete items 1 and/or 2 for additional services.■ Complete items 3, 4a, and 4b.■ Print your name and address on the reverse of this form so that we can return this card to you.■ Attach this form to the front of the mailpiece, or on the back if space does 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: <i>Anne He O. Martin Trust</i>		4a. Article Number <i>8329365272</i>	
<i>8516 Stone Harbor Ct.</i> <i>Las Vegas, NV 89129</i>		4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
		7. Date of Delivery <i>6-2-16</i>	
5. Received By: (Print Name)		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature (Addressee only) <i>X Anne He O Martin</i>			

PS Form 3811, December 1994

102595-9/H-0179

Domestic Return Receipt

UNITED STATES POSTAL SERVICE

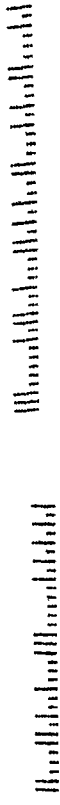


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P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



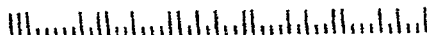


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MIDLAND, TEXAS 79702

Beverly Hatfield

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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:

OCD
P. O. BOX 1980
HOBBS, NM 88240

4a. Article Number

4b. Service Type

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

7. Date of Delivery

21
1999

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X. J. Martinez

PS Form 3811, December 1994

102595-97-B-G179

Domestic Return Receipt

Thank you for using Return Receipt Service.

ALL RETURN ADDRESSES COMPLETED ON THE REVERSE SIDE

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
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 2. ☐ Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

OCD
P. O. BOX 1980
HOBBS, NM 88240

4a. Article Number

4b. Service Type

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

7. Date of Delivery

21

1994

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *g. martinez*

PS Form 3811, December 1994

102595-97-B 0179

Domestic Return Receipt



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Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

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P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield

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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:

OCD - DISTRICT IV
2040 S. PACHECO
SANTA FE, NM 87505

4a. Article Number

4b. Service Type

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

7. Date of Delivery

5-21-98

5. Received By: (Print Name)

GARY W. WINK

6. Signature: (Addressee or Agent)

X Gary W. Wink

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

Thank you for using Return Receipt Service.

Return Address completed on the reverse side?

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OCD - DISTRICT IV
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SANTA FE, NM 87505

4a. Article Number

4b. Service Type

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

7. Date of Delivery

5-21-98

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

5. Received By: (Print Name)

ARCY M. WILK

6. Signature: (Addressee or Agent)

X *Aracy M. Wilk*

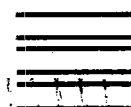
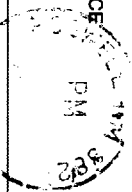
PS Form 3811, December 1994

102595-97 B-0179

Domestic Return Receipt

Thank you for...

UNITED STATES POSTAL SERVICE



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USPS
Permit No. G-10

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SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield

