

PMX 6/8/98

#12022

APPLICATION FOR AUTHORIZATION TO INJECT

I. Purpose: Secondary Recovery Pressure Maintenance Disposal Storage
Application qualifies for administrative approval? yes no

II. Operator: SOUTHWEST ROYALTIES, INC.

Address: P.O. DRAWER MIDLAND, TX 79702

Contact party: JAMES BLAUNT Phone: _____

III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.

IV. Is this an expansion of an existing project? yes no
If yes, give the Division order number authorizing the project SWD-623

V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.

* VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging details.

VII. Attach data on the proposed operation, including:

1. Proposed average and maximum daily rate and volume of fluids to be injected;
2. Whether the system is open or closed;
3. Proposed average and maximum injection pressure;
4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).

MAY 22 1998
CONSERVATION DIVISION

* VIII. — Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.

IX. Describe the proposed stimulation program, if any.

* X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)

* XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.

XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.

XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.

XIV. Certification

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: JAMES BLAUNT Title AREA SUPERVISOR

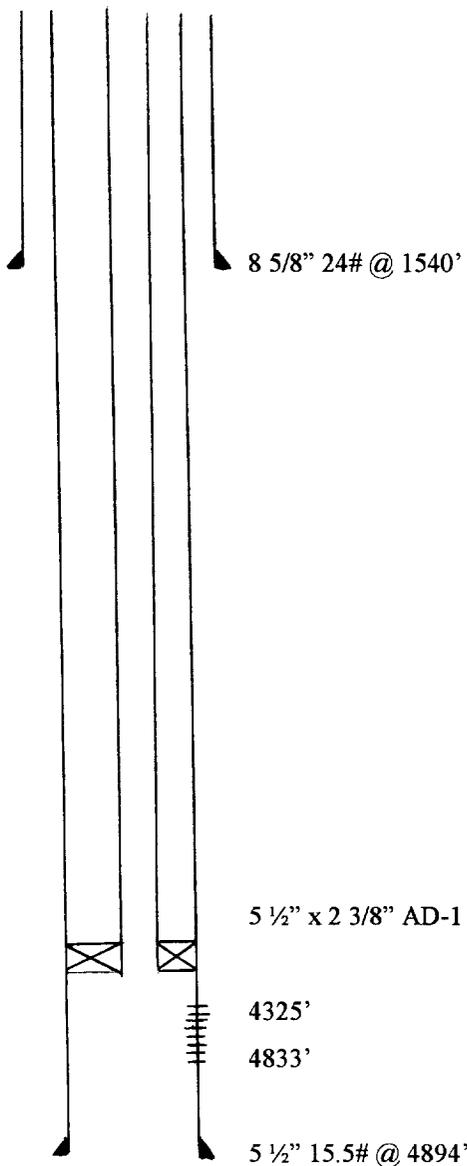
Signature: James Blaunt Date: 5-6-98

* If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal.

INJECTION WELL DATA SHEET

OPERATOR		LEASE		
Southwest Royalties, Inc.		Eilliams Federal		
WELL NO.	FOOTAGE LOCATION	SECTION	TOWNSHIP	RANGE
14	1650' FNL & 1980' FEL	34	17S	33E

Schematic



Tabular Data

Surface Casing
 Size 8 5/8 " Cemented with 750 sx.
 TOC Surface feet determined by circulation
 Hole size 11"

Intermediate Casing
 Size _____ " Cemented with _____ sx.
 TOC _____ feet determined by _____
 Hole size _____

Long string
 Size 5 1/2 " Cemented with 815 sx.
 TOC 750 feet determined by CBL
 Hole size 7 7/8"
 Total depth 4894'
 Injection interval
4325 feet to 4833 feet
 (perforated or open-hole, indicate which)

Tubing size 2 3/8" 4.7# lined with Internal Plastic coating set in a
Baker Model AD-1 packer at 4250 feet.

Other Data

- Name of the injection formation Grayburg/San Andres
- Name of Field or Pool (if applicable) Maljamar
- Is this a new well drilled for injection? Yes No
 If no, for what purpose was the well originally drilled? Oil production
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used)
No
- Give the depth to and name of any overlying and/or underlying oil and gas zones (pools) in this area.
Queen @ 3776' Abo @ 8129'

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- IV. Is this an expansion of an existing project? yes no
If yes, give the Division order number authorizing the project _____.
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- * VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. — Attach appropriate geological data on the injection zone including appropriate hydrologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- * X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)
- * XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: _____ Title _____

Signature: _____ Date: _____

- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal.

III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; location by Section, Township, and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

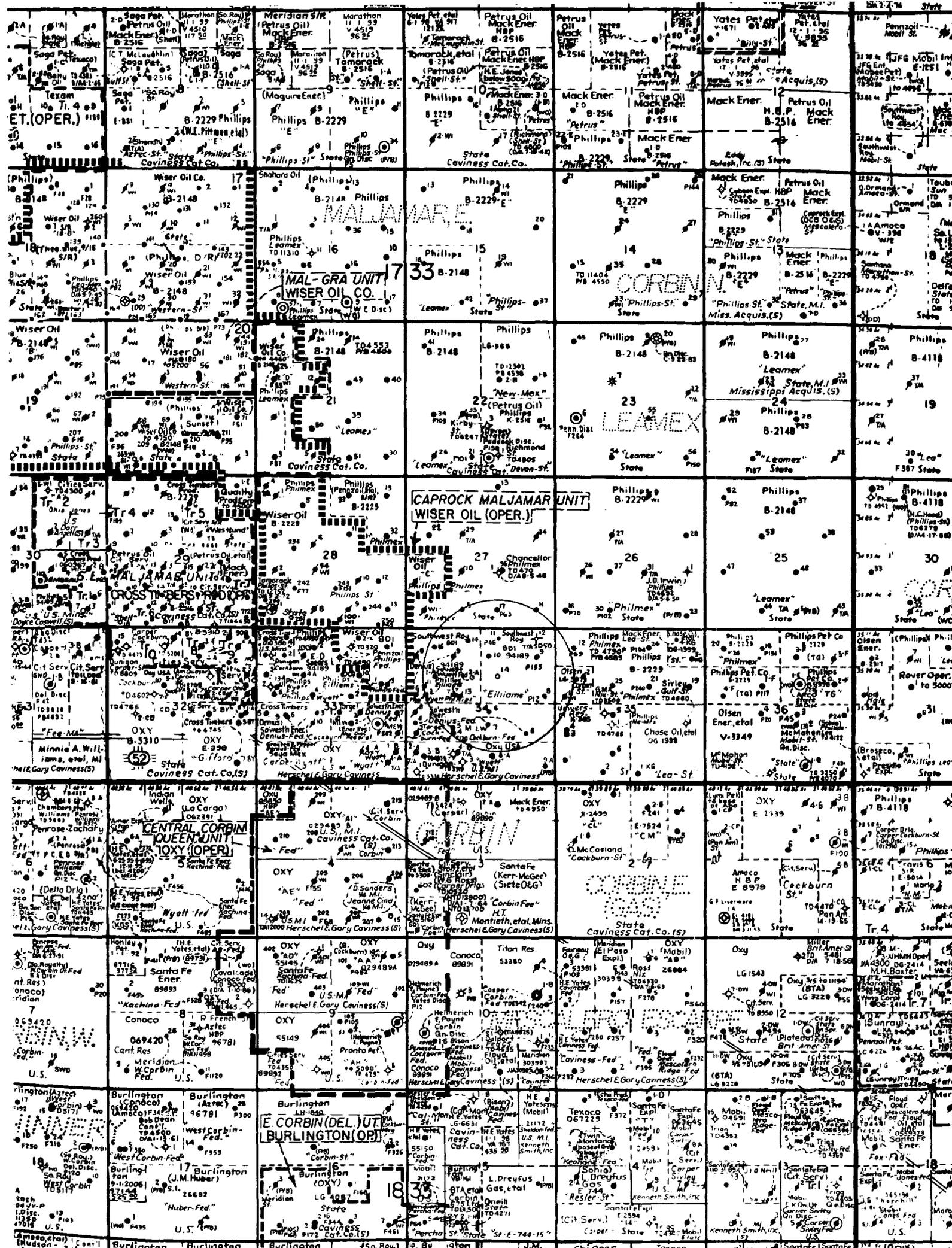
All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;
- (3) the formation name and depth with expected maximum injection rates and pressures; and
- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.



Wells in Area of Review
Application for Authorization to Inject
Southwest Royalties, Inc.

Philmex #5

Location: 660' FSL & 1980' FWL

Type: Oil

Sec 27, T17S, R33E

Date Drilled: 12/55

Total Depth: 4570'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1473'	1085
5 1/2"	4460'	585

Completion:

1/56 OH 4460-4570'. Acidized well w/500 gal acid.

1/56 Frac'ed w/10000 gal + sand.

Philmex #11

Location: 660' FSL & 660' FEL

Type: Oil

Sec 27, T17S, R33E

Date Drilled: 8/70

Total Depth: 4702'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	360'	300
4 1/2"	4702'	275

Completion:

9/70 Perf 4604-4664'.

9/70 Acidized well w/15000 gal acid. Put well on pump.

Philmex #17

Location: 660' FSL & 1980' FEL

Type: Oil

Sec 27, T17S, R33E

Date Drilled: 4/82

Total Depth: 6200'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1457'	750
4 1/2"	6198'	1550

Completion:

7/82 Perf 6138-48'. Acidized w/1000 gals. Plugged off.

7/82 Perf 4258-4614'. Acidized w/7500 gals.

8/82 Frac 4258-4466 w/54,000# sand. Put well on pump.

Wells in Area of Review
Application for Authorization to Inject
Southwest Royalties, Inc.

Wyatt Phillips Fed #14

Location: 467' FNL & 2173' FWL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 2/94

Total Depth: 4880'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1468'	735
5 1/2"	4880'	400

Completion:

3/94 Perf 4692-4730'. Acidized w/4000 gal. Put well on pump.
12/97 Perf 4452-4672'. Acidized w/5000 gal. Put well on pump.

Wyatt Phillips Fed #15

Location: 660' FNL & 990' FWL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 3/94

Total Depth: 4884'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1492'	760
5 1/2"	4884'	350

Completion:

4/94 Perf 4712-4758'.
4/94 Acidized well w/6750 gal acid. Put well on pump.

Eilliams Fed #12

Location: 330' FNL & 660' FEL

Type: SWD

Sec 34, T17S, R33E

Date Drilled: 9/95

Total Depth: 5050'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1465'	720
5 1/2"	5047'	550

Completion:

10/95 Perf 4290-4833'. Acidized w/13000 gal.
10/95 Frac'ed w/112,000# sand. Swab tested mostly water.
1/96 Converted to SWD/Injection.

Wells in Area of Review
Application for Authorization to Inject
Southwest Royalties, Inc.

Eilliams Fed #11

Location: 330' FNL & 1980' FEL
Type: Oil

Sec 34, T17S, R33E
Date Drilled: 9/95
Total Depth: 5167'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1487'	770
5 1/2"	5167'	600

Completion:

10/95 Perf 4712-4804'. Acidized w/10,000 gal.
12/95 Perf 4289-4488'. Acidized w/3000 gal.
12/95 Frac'ed w/4289-4488' w/94,000#. Put well on pump.

Eilliams Fed #9

Location: 989' FNL & 660' FEL
Type: Oil

Sec 34, T17S, R33E
Date Drilled: 2/90
Total Depth: 4750'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1519'	1000
5 1/2"	4750'	1000

Completion:

3/90 Perf 4590-4642'. Acidized w/3600 gal.
4/90 Perf 4301-4564'. Acidized w/9000 gal.
5/90 Frac'ed w/4301-4518' w/176,400#. Put well on pump.

Eilliams Fed #10

Location: 990' FNL & 2310' FEL
Type: Oil

Sec 34, T17S, R33E
Date Drilled: 12/90
Total Depth: 4780'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1515'	1000
5 1/2"	4780'	1500

Completion:

1/91 Perf 4609-4650'. Acidized w/3700 gal.
1/91 Perf 4338-4572'. Acidized w/7100 gal.
2/91 Frac'ed w/4338-4572' w/136,500#. Put well on pump.

Wells in Area of Review
Application for Authorization to Inject
Southwest Royalties, Inc.

Wyatt 'A' Fed #1

Location: 1650' FNL & 990' FWL
Type: Oil

Sec 34, T17S, R33E
Date Drilled: 10/96
Total Depth: 4833'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1536'	750
5 1/2"	4833'	780

Completion:

12/96 Perf 4422-4662'. Acidized w/8500 gal.
2/97 Perf 4187-4382'. Frac'ed w/135,000#. Put well on pump.

Wyatt Phillips Fed #9

Location: 990' FNL & 1650' FWL
Type: Oil

Sec 34, T17S, R33E
Date Drilled: 11/54
Total Depth: 3892'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1453'	50
7"	3787'	100

Completion:

2/55 Perf 3772-3787'.
2/55 Acidized well w/10000 gal acid. Put well on pump.

Eilliams Fed #3

Location: 2308' FNL & 660' FWL
Type: Oil

Sec 34, T17S, R33E
Date Drilled: 12/60
Total Depth: 8829'

Casing Record:

Size	Depth	Sacks Cement
13 3/8"	350'	350
8 5/8"	4598'	722
5 1/2"	8829'	349

Completion:

1/61 Perf 8662-8776'. Acidized w/1000 gal.

Wells in Area of Review
Application for Authorization to Inject
Southwest Royalties, Inc.

Wyatt Phillips Fed #7

Location: 2310' FNL & 1650' FWL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 2/54

Total Depth: 3830'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1440'	50
7"	3816'	100

Completion:

4/54 Perf 3792-3830'. Frac w/3000 gal. Put well on pump.

Eilliams Fed #7

Location: 2310' FNL & 1720' FWL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 4/76

Total Depth: 8910'

Casing Record:

Size	Depth	Sacks Cement
13 3/8"	351'	350
8 5/8"	4614'	550
5 1/2"	8910'	850

Completion:

5/76 Perf 8680-8758'. Acidized w/8000 gal. Put well on pump.

Eilliams Fed #8

Location: 2310' FNL & 330' FEL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 1/79

Total Depth: 4850'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	444'	300
4 1/2"	4850'	1200

Completion:

2/79 Perf 4629-4709'. Acidized w/12,000 gal. Put well on pump.

6/79 Perf 4552-4596'. Acidized w/2500 gal.

7/79 Frac w/43,500#. Put well on pump.

Wells in Area of Review
Application for Authorization to Inject
Southwest Royalties, Inc.

Cockburn Fed #4

Location: 1650' FSL & 1650' FWL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 8/53

Total Depth: 3931'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1460'	50
7"	3903'	100

Completion:

9/53 Perf 3903-3931'. Put well on pump.

Denius Fed #8

Location: 1650' FSL & 990' FEL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 8/61

Total Depth: 8845'

Casing Record:

Size	Depth	Sacks Cement
11 3/4"	303'	275
8 5/8"	3064'	1050
7"	5885'	100
4 1/2"	8845'	725

Completion:

9/61 Perf 8837-8845'. Put well on pump.

Denius Fed #7

Location: 1980' FSL & 2310' FEL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 6/61

Total Depth: 9015'

Casing Record:

Size	Depth	Sacks Cement
11 3/4"	304'	275
8 5/8"	3064'	850
4 1/2"	9014'	1500

Completion:

7/61 Perf 8658-8700'.

7/61 Acidized well w/1000 gal acid. Put well on pump.

Wells in Area of Review
Application for Authorization to Inject
Southwest Royalties, Inc.

Cockburn Fed #6

Location: 2310' FSL & 2310' FEL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 11/54

Total Depth: 3848'

Casing Record:

Size	Depth	Sacks Cement
8 5/8"	1480'	50
7"	3848'	100

Completion:

4/55 Perf 3815-3848'. Acidized w/10000 gal.

Denius Fed #5

Location: 1750' FSL & 1650' FWL

Type: Oil

Sec 34, T17S, R33E

Date Drilled: 10/60

Total Depth: 8877'

Casing Record:

Size	Depth	Sacks Cement
13 3/8"	312'	340
8 5/8"	4215'	1680
4 1/2"	8877'	1200

Completion:

11/60 Perf 8706-8730'.

11/60 Acidized well w/500 gal acid. Put well on pump.

Corbin '35' State #1

Location: 2310' FNL & 330' FWL

Type: Oil

Sec 35, T17S, R33E

Date Drilled: 5/78

Total Depth: 9000'

Casing Record:

Size	Depth	Sacks Cement
13 3/8"	292'	350
8 5/8"	2780'	1200
4 1/2"	4100'	485

Completion:

6/78 Perf 3856-3877'.

6/78 Acidized well w/4500 gal acid. Put well on pump

SOUTHWEST ROYALTIES

PROJECT WYATT PHILLIPS #11
1980' FNL + 660' FWL

PAGE _____ OF _____
BY _____ DATE _____

Sec 34, T17S, R33E

SPUD: 10/55

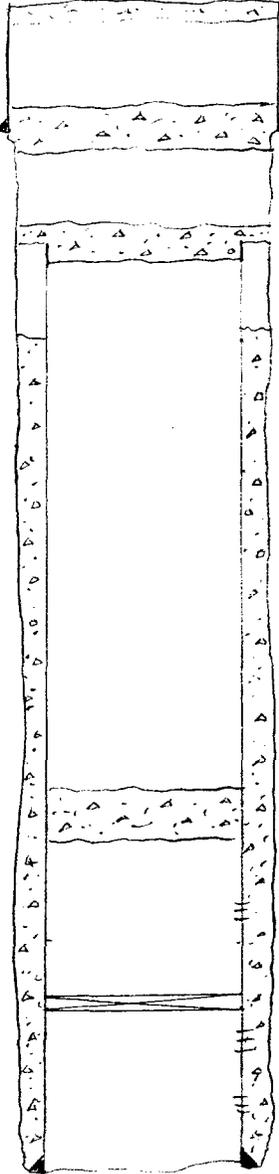
P+A'd: 4/74

10 SX SURF PLUG

65 SX CMT PLUG @ 270'

35 SX CMT PLUG @ 682'

25 SX CMT PLUG @ 3020'



8 5/8" @ 217' CMTD w/ 75 SX

5 1/2" CUT OFF @ 650'

PERFS: 3750-58'

PERFS: 4400-20'

PERFS: 4741-47'

5 1/2" @ 5041' CMTD w/ 700 SX

SOUTHWEST ROYALTIES

PROJECT WYATT PHILLIPS #13
2310' FNL + 1879' FWL

PAGE _____ OF _____
BY _____ DATE _____

SEC 34, T17S, R33E

SPUD: 4/61
P+Ad: 4/75

10 SK SURF PLUG

55 SK CMT PLUG @ 300'

45 SK CMT PLUG @ 750'

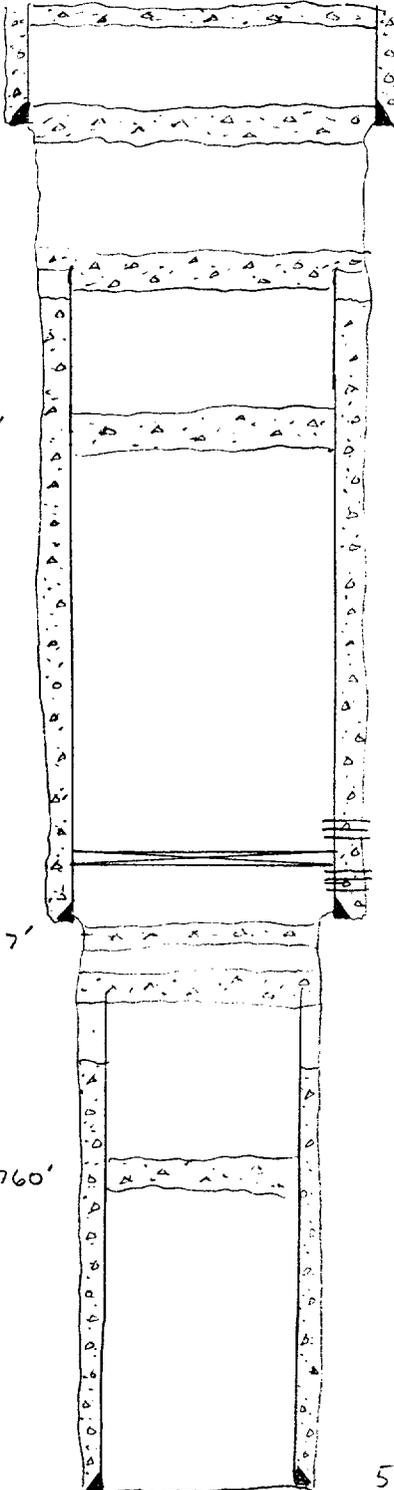
35 SK CMT PLUG 1640'-1860'

CIBP @ 4500'

CMT PLUG 4685-4817'

CMT PLUG @ 5145'

CMT PLUG 6650-6760'



13 3/8" @ 320' CMTD TO SURF

8 5/8" CUT OFF @ 700'
TOC @ 800'

PERES: 4474-96'
PERFS: 4506-64'
8 5/8" @ 4593'

5 1/2" CUT OFF @ 5198'

TOC @ 5800'

5 1/2" @ 8871' CMTD w/ 420 cu ft 200 SK 177 SK

TD @ 8871'

VII. Proposed Operation

This well will be used to inject produced water from other wells in the Maljamar (San Andres/Grayburg) Field via a closed system. The anticipated average injection rate and pressure is 500 BWPD @ 1200 psi. The anticipated maximum rate and pressure is 1000 BWPD @ 1935 psi.

VIII. Geological Data

The produced water will be injected into the San Andres/Grayburg formations from 4325' to 4833'. The San Andres consists of dolomite and the Grayburg consists of sandstone.

No known source of underground drinking water in the area.

VIII. Proposed Stimulation

None anticipated. Well was previously acidized and frac'ed.

XI. No water wells were observed on a Topographics Survey Map of the area.

XII. I have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the injection zone and any underground source of drinking water.

OFFSET OPERATORS
EILLIAMS 34 FEDERAL #14

. PHILLIPS
4001 PENBROOK
ODESSA, TX 79762

. OXY USA
BOX 50250
MIDLAND, TEXAS 79710

OLSEN
16414 SAN PEDRO, STE 470
SAN ANTONIO, TX 78232

MW OF LOVINGTON
BOX 922
LOVINGTON, NM 88260

UNIVERSAL RESOURCES CORP.
5800 CALIFORNIA AVE.
ODESSA, TX. 79762

SOUTHWESTERN ENERGY PRODUCTION CO.
5151 SAN FELIPE, STE. 700
HOUSTON, TX. 77056

SURFACE OWNER:

GARY CAVINESS
CAVINESS CATTLE CO.
EAST STAR ROUTE
MALJAMAR, NEW MEXICO 88264

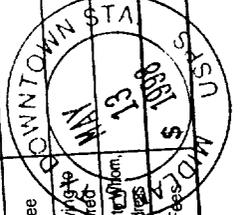
P 329 365 287

US Postal Service
Receipt for Certified Mail

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

Sent to
GARY CAVINESS
CAVINESS CATTLE CO.
EAST STAR ROUTE
MALJAMAR, NEW MEXICO 88264

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 1.00
Postmark or Date	MAY 13 1998



UNITED STATES POSTAL SERVICE

PS Form 3800, April 1995

1

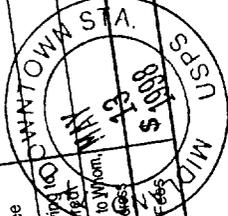
P 329 365 286

US Postal Service
Receipt for Certified Mail

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

Sent to
UNIVERSAL RESOURCES CORP.
5800 CALIFORNIA AVE.
ODESSA, TX. 79762

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 1.00
Postmark or Date	MAY 13 1998



UNITED STATES POSTAL SERVICE

PS Form 3800, April 1995

1

P 329 365 288

US Postal Service
Receipt for Certified Mail

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

Sent to
MW OF LOVINGTON
BOX 922
LOVINGTON, NM 88260

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 1.00
Postmark or Date	MAY 13 1998



UNITED STATES POSTAL SERVICE

PS Form 3800, April 1995

PS Form 3811, December 1994 102595-97-B-0179 Domestic Return Receipt

3. Article Addressed to:
SOUTHWESTERN ENERGY PRODUCTION CO.
5151 SAN FELIPE, STE. 700
HOUSTON, TX. 77056

5. Received By: (Print Name) Hilshia Benson
6. Signature: (Address or Agent) [Signature]

7. Date of Delivery 05-18-98
8. Addressee's Address (Only if requested and fee is paid) _____

4a. Article Number 33935287
4b. Service Type
 Certified
 Registered
 Express Mail
 Return Receipt for Merchandise
 COD

1. Addressee's Address following services (for an extra fee):
2. Restricted Delivery
Consult postmaster for fee.

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.

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form 3811, December 1994 102595-97-B-0179 Domestic Return Receipt

3. Article Addressed to:
UNIVERSAL RESOURCES CORP.
5800 CALIFORNIA AVE.
ODESSA, TX. 79762

5. Received By: (Print Name) Leon Charles
6. Signature: (Address or Agent) [Signature]

7. Date of Delivery _____
8. Addressee's Address (Only if requested and fee is paid) _____

4a. Article Number 12936528
4b. Service Type
 Certified
 Registered
 Express Mail
 Return Receipt for Merchandise
 COD

1. Addressee's Address following services (for an extra fee):
2. Restricted Delivery
Consult postmaster for fee.

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.

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

PS Form 3811, December 1994 102595-97-B-0179 Domestic Return Receipt

3. Article Addressed to:
GARY CAVINESS
CAVINESS CATTLE CO.
EAST STAR ROUTE
MALJAMAR, NEW MEXICO 88264

5. Received By: (Print Name) Charles Caviness
6. Signature: (Address or Agent) [Signature]

7. Date of Delivery 5-15-98
8. Addressee's Address (Only if requested and fee is paid) _____

4a. Article Number 339365287
4b. Service Type
 Certified
 Registered
 Express Mail
 Return Receipt for Merchandise
 COD

1. Addressee's Address following services (for an extra fee):
2. Restricted Delivery
Consult postmaster for fee.

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.

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Postage Paid

P 329 365 284

US Postal Service
Receipt for Certified Mail

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

Sent to
Street & Number
PHILLIPS
4001 PENBROOK
Post Office, State
ODESSA, TX 79762

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 7.35
Postmark or Date	MAY 13 1998 DOWNTOWN STA. USPS

Mail Fees Paid

G-10

P 329 365 290

US Postal Service
Receipt for Certified Mail

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

Sent to
Street & Number
OXY USA
BOX 50250
Post Office, State
MIDLAND, TEXAS 79710

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 1.35
Postmark or Date	MAY 13 1998 DOWNTOWN STA. USPS

Envelope to

First Class Mail

P 329 365 289

US Postal Service
Receipt for Certified Mail

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

Sent to
Street & Number
OLSEN
16414 SAN PEDRO, STE 470
Post Office, State
SAN ANTONIO, TX 78232

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 1.00
Postmark or Date	MAY 13 1998 DOWNTOWN STA. USPS

US Postal Service

582 59E B2E D

SOUTHWESTERN ENERGY PRODUCTION CO.
700 SAN FELIPE, STE. 700
HOUSTON, TX. 77056

Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date Delivered	
Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	MAY 13 1998 MIDLAND TX 08 DOWNTOWN STA. USPS

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:
 PHILLIPS
 4001 PENBROOK
 ODESSA, TX 79762

4a. Article Number
 P 329365284

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

7. Date of Delivery
 5/14/98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
 X Kathy Thom

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?

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:
 OXY USA
 BOX 50250
 MIDLAND, TEXAS 79710

4a. Article Number
 P 329365290

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

7. Date of Delivery
 5-14

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
 X [Signature]

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?

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:
 OLSEN
 16414 SAN PEDRO, STE 470
 SAN ANTONIO, TX 78232

4a. Article Number
 P 329365289

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

7. Date of Delivery
 MAY 15 1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
 X [Signature]

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.

P 329 365 285

US Postal Service Certified Mail

SOUTHWESTERN ENERGY PRODUCTION CO.
 5151 SAN FELIPE, STE. 700
 HOUSTON, TX. 77056

Post Office, State, & ZIP Code

Postage

Certified Fee

Special Delivery Fee

Restricted Delivery Fee

Return Receipt Showing to Whom & Date Delivered

Return Receipt Showing to Whom, Date, & Addressee's Address

TOTAL Postage & Fees

Postmark or Date

PS Form 3800, April 1995

MIDLAND TX 79701
 MAY 13 1998
 USPS