

BEFORE THE

OIL CONSERVATION DIVISION

NEW MEXICO DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES

APPLICATION OF GP II ENERGY, INC.
FOR APPROVAL OF A WATERFLOOD PROJECT,
EDDY COUNTY, NEW MEXICO.

CASE NO. 12112

APPLICATION OF GP II ENERGY, INC.
FOR STATUTORY UNITIZATION,
EDDY COUNTY, NEW MEXICO.

CASE NO. 12113

AFFIDAVIT

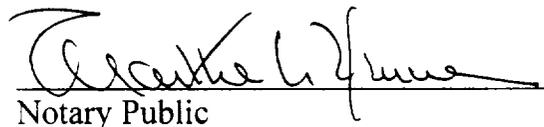
STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

William F. Carr, attorney in fact and authorized representative of GP II Energy, Inc., 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 3rd day of February, 1999.



Notary Public

My Commission Expires:

August 19, 1999

EXHIBIT A

Square Lake Partners, LLC
Post Office Box 50682
Midland, TX 79710

R. Mace Holman, Jr.
Post Office Box 1414
Dothan, AL 36302

K. M. Jones Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

J. L. Smith Co., Inc.
4204 S. Park Ave.
Dothan, AL 36301

Staples Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

Lathrop Diamond Bit
5080 Spectrum Dr., LB 51
Dallas, TX 75248-4621

Max W. Coll, II
Rt. 9, Box 72F
Santa Fe, NM 87505

Rachel Lyman
Post Office Box 3726
Midland, TX 79702

Jon F. Coll
Post Office Box 1818
Roswell, NM 88202

C.V. Lyman Testamentary Trust
Post Office Box 3726
Midland, TX 79702

Charles H. Coll
Post Office Box 1818
Roswell, NM 88202

Pride Energy Co.
Post Office Box 701602
Tulsa, OK 74170

Borland, Inc.
#9 Westwood
Dothan, AL 36303

RBP Land Company
Post Office Box 10392
Midland, TX 79702

C. Y. Production, LLC
Post Office Box 563
Boerne, TX 78006

SE Com & Equip. Co.
Post Office Box 1646
Dothan, AL 36302

GBN, Inc.
2503 Elmwood Circle North
Wichita Falls, TX 76308

W. Watson, Inc.
Post Office Box 2253
Midland, TX 79702

Chase Oil Corp.
Post Office Box 1767
Artesia, NM 88211

Marbob Energy Corp.
Post Office Drawer 217
Artesia, NM 88210

Bulldog Energy Corp.
Post Office Box 668
Artesia, NM 88211

David C. Collier
3400 West 8th Street
Roswell, NM 88201

Robert S. Gleason
Post Office Box 798
Artesia, NM 88211

BHW, LLC.
101 South 4th Street
Artesia, NM 88210

B & H Properties
2410 Auburn Place
Midland, TX 79705

Logan Royalties, Ltd.
Post Office Box 804
Midland, TX 79702

Rocky Mountain Resources
Post Office Box 7405
Midland, TX 79708

Victor J. Sirgo
3300 North "A" Street
Bldg. 2, Suite 104
Midland, TX 79705

Selma E. Andrews #518801
c/o NationsBank Trust
Post Office Box 840738
Dallas, TX 75284

James N. Coll
Post Office Box 1818
Roswell, NM 88202

Columbine II Ltd. Partnership
Post Office Box 22066
Denver, CO 80222

Vera Cox Haefs
9909 Glenrio Lane
Dallas, TX 75220

James Petroleum Trust
Post Office Box 4648
Tulsa, OK 74159

Tommye June Robinson
5809 Wedgeworth Rd.
Fort Worth, TX 76133

Ward Investment, Ltd.
101 South 4th Street
Artesia, NM 88210

Carl Brininstool
201 Blackberry
Midland, TX 79707

Pogar Petroleum, Ltd.
Post Office Box 10095
Midland, TX 79702

Gertrude McDorman, Trustee
511 Centre Avenue
Artesia, NM 88210

William J. and Margaret Colby
901 W. 6th Street
Silver City, NM 88061

Robert E. Boling
305 South 5th Street
Artesia, NM 88210

OXY USA, Inc.
Post Office Box 841735
Dallas, TX 75284-1735

Therylene K. Helm
4401 Edmonson
Dallas, TX 75205

Braille Institute of America
Oil & Gas Trust NCNB
Post Office Box 840738
Dallas, TX 75284

Mrs. T. B. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

Max W. Coll
Post Office Box 1818
Roswell, NM 88202

Bert H. Murphy
Post Office Drawer 2164
Roswell, NM 88201

Rose M. Cottingham
1119 Montedito
San Angelo, TX 76901

Lillie Mabel Bates
Post Office Box 840
Artesia, NM 88211-0840

Higgins Trust, Inc.
Post Office Box 2421
Gainesville, GA 30505

Wendell W. Iverson 1990 Trust
Post Office Box 10508
Midland, TX 79702

Marshall & Winston, Inc.
Post Office Box 50880
Midland, TX 79710

PIP Trust
Post Office Box 10508
Midland, TX 79702

Josephine Smith Trust
Wells Fargo Bank
Post Office Box 5825
Denver, CO 80217

John Ashby Yates
105 South 4th Street
Artesia, NM 88210

Tonya W. Malliard
135 Van Winkle Drive
San Anselmo, CA 94960

SJI, Jr. 1990 Trust
Post Office Box 10508
Midland, TX 79702

Mae Chang Plasch
3883 Turtle Creek Blvd., #1004
Dallas, TX 75219-4429

Harvey E. Yates
Post Office Box 1933
Roswell, NM 88208-1933

Sharbro Oil Ltd., Co.
Post Office Box 840
Artesia, NM 88211-0840

Lynne Wildman Chapman
1324 Old Gulph Rd.
Villanova, PA 19085

Charles Deguigne
1001 Chelsea Way
Redwood City, CA 94061-3665

S. P. Yates
207 Fourth Street
Artesia, NM 88210-2193

Siegfried J. Iverson, Jr.
2518 Sinclair
Midland, TX 79705-8422

John & Peggy Yates Estate
105 South 4th Street
Artesia, NM 88210

Ray and Karen Westall
Post Office Box 4
Loco Hills, NM 88255-0004

Robert N. Avery Martial Trust
74133 El Paseo, Suite E
Palm Desert, CA 92260-4123

Jack D. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

Roger D. Lapham, Jr.
Post Office Box 721
Pebble Beach, CA 93953-0721

Texacal Oil & Gas, Inc.
4299 McCarthur Blvd., Suite 207
Newport Beach, CA 92660

Lloyd McGhee
Post Office Box 16399
Fort Worth, Tx 76162-0399

Hal C. Porter
Post Office Box 17004
Fountain Hills, AZ 85269-7004

Phoebe Shelton
Post Office Box 430
Amarillo, TX 79105-0430

Wendell W. Iverson
Post Office Box 1343
Midland, TX 79702

Christian DeGuigue
Post Office Box 1739
San Mateo, CA 94401-0920

Summit Overseas Exploration
Irongate 3, Suite 201
7775 Wadsworth Blvd.
Lakewood, CO 80226

Jacqueline Dickerson
3901 Innwood Road
Fort Worth, TX 76109

Vicky Moser
Post Office Box 67
Stephenville, TX 76401

Bernard D. Alpern
400 Jericho Tpke #205
Jericho, NY 11753

C. Beal Family Trust for
Barry Beal
104 South Pecos
Midland, TX 79701

Harvey M. Black Trust
Post Office Box 22900
Rochester, NY 14692

Cerri Family Trust
9561 Borba Circle
Huntington Beach, CA 92646

Patsy Ann Iverson Page
1155 Maurlands Vista Way
La Jolla, CA 92037-6210

Flora Whittington
7709 E. Glenroso Ave., Apt. 202
Scottsdale, AZ 85251-4047

Colby Revocable Living Trust
901 West 6th Street
Silver City, NM 88061-4505

Frank Darden
1619 Pennsylvania Ave.
Fort Worth, TX 76104

Carole Gauntt
Post Office Box 7275
Carmel, CA 93921

Peggy Runyan
Post Office Box 869
Kapaa, HI 96746

C. Beal Family Trust for
Carlton Beal, Jr.
104 South Pecos
Midland, TX 79701

C. Beal Family Trust for
Spencer Beal
104 South Pecos
Midland, TX 79701

C. Beal Family Trust for
Karleen Geuber
104 South Pecos
Midland, TX 79701

Carol Brookman Acct: 637602
Post Office Box 840738
Dallas, TX 75284

D. Flugstad
#1112000 NationsBank
Post Office Box 840738
Dallas, TX 75284

M. B. Foreman
Bank NA f/b/o M.B. Foreman
One Lincoln Square
Rochester, NY 14643

Robert L. Halverson
Post Office Box 3713
Midland, TX 79702

Thomas F. Lugaric
14 Lerape Trail
Cedar Grove, NJ 70009

Stephen McNall
NationsBank #1112001
Post Office Box 840738
Dallas, TX 75284

Florence Joyce Miller
109 Caversham Woods
Pottsford, NY 14534

Elizabeth Wolff Murov
Cedar Swamp Road
Old Brookville, NY 11545

Zachary Murov
999 Brush Hollow Road
Westbury, NY 11590

Ellen Palma Trust
Chase Lincoln First Bank
Post Office Box 1412
Rochester, NY 14643

Nadine Parr
1217 Georgina Avenue
Santa Monica, CA 90402

Morris Radman
999 Brush Hollow Road
Westbury, NY 11590

Patricia Ann Wolff Schaen
11 E. 86th Street, #2-A
New York, NY 10028

Melba V. Trobaugh
4305 N. Garfield, Suite 233
Midland, TX 79705

Gerald N. Frank Estate
Morgan Guaranty Trust
New York, NY 10019

William Horton
NationsBank #637603
Post Office Box 840738
Dallas, TX 75284

Samuel Luks
648 Broadway, Suite 505
New York, NY 10012-2314

William H. McNall
NationsBank #:1112001
Post Office Box 840738
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Erica Murov
999 Brush Hollow Road
Westbury, NY 11590

Robert W. Page
74874 Via Royale
Palm Desert, CA 92260

Ellen Palma
1471 Long Pond Road, Apt. 142
Rochester, NY 14626

Bernice L. Rosenthal, Trustee
2195 East Avenue
Rochester, NY 14610

Morris & Babette Goldman Radman
999 Brush Hollow Road
Westbury, NY 11590

Judith Franklin Smith
401 El Cielito Road
Santa Barbara, CA 93105

Harvey H. Wachtel
24 Clover Lane
Roslyn Heights, NY 11577

Carole Winter Estate
c/o William Crandall
161 East 72nd St.
New York, NY 10021

Yates Employees 87 Ltd.
105 South 4th Street
Artesia, NM 88210

Calvin E. Staples
5121 McKinney Avenue
Dallas, TX 75205-3321

John Boyle Trust
NationsBank #1071005
Post Office Box 840738
Dallas, TX 75283

Dorothy Foster Rev. Trust
First National Bank of Artesia
Post Office Box AA
Artesia, NM 88211-7526

Ruth W. Taylor
NationsBank #1071003
Post Office Box 840738
Dallas, TX 75283

Leland Price, Inc.
2701 Clayton
Artesia, NM 88210

Enterloc Resources, Inc.
Post Office Box 1375
Roswell, NM 88202-1375

Jack Halbert
Post Office Box 6990
Tyler, TX 75711

Giebel Petroleum Ltd.
130 Spring Park, Suite 100
Midland, TX 79705

Florence M. Major
279 W. Strickland Drive
Del Rio, TX 78840-5729

Nancy Winter
c/o Elsa Riess
15 West 72nd Street, #3N
New York, NY 10023

Warren Sallee
107 Rocket
Austin, TX 78734-3814

E. T. Boyle Trust
NationsBank #1071004
Post Office Box 840738
Dallas, TX 75283

James T. Wood
1917 Rosewood Lane
Huntsville, TX 77340-4938

W. R. Phillips
1120 Ridgecrest
Gallup, NM 87301

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NationsBank #1071001
Post Office Box 840738
Dallas, TX 75283

Conoco, Inc.
Post Office Box 951063
Dallas, TX 75395

Marathon Oil Company
Post Office Box 890882
Dallas, TX 75389-0882

Louis Dreyfus Natural Gas
Post Office Box 960116
Oklahoma City, OK 73196-0116

Kimberly Kay Combs
Rt. 3, Box 140
Nonona, TX 76255

Patricia Cherry Stewart
Post Office Box 578
Nonona, TX 76225-0578

George A. Chase
1908 Briscoe Ave.
Artesia, NM 88210

Titan Resources
500 W. Texas Ave.
Midland, TX 79701

Amoco
200 N. Loraine St.
Midland, TX 79701

OXY USA
Post Office Box 50250
Midland, TX 79710

BTA
104 South Pecos
Midland, TX 79701

Paul Slayton
Post Office Box 1936
Roswell, NM 88202

Ray Westall
Post Office Box 4
Loco Hills, NM 88255-0004

Fred Allison
201 W. Wall Avenue
Midland, TX 79701

Shell Oil Co.
200 N. Loraine Street
Midland, TX 79701

Merit Energy
12222 Merit Drive, Suite 1500
Dallas, TX 75251-3206

Burk Royalty Co.
1000 Petroleum Building
Post Office Box BRC
Wichita Falls, TX 76307-7507

J.C. Thompson
325 N. Saint Paul, Suite 4500
Dallas, TX 75201-3828

Exxon
No. 25 Desta Drive
Midland, TX 79705

B & W Oil Company
5944 Luther Ln., Suite 709
Dallas, TX 75225-5919

Ryder Scott Management
1100 Louisiana, Suite 3800
Houston, TX 77002

Windfohr Oil Co.
Post Office Box 188
Loco Hills, NM 88255-0188

Burnett Oil Co., Inc.
801 Cherry Street, Suite 1500
Interfirst Tower
Fort Worth, TX 76102-6815

Armer Oil Co.
159 N. Riverside Dr.
Fort Worth, TX 76111-3911

Lobo Resources
2000 S. Dairy Ashford, Suite 410
Houston, TX 77077-5727

J & G Enterprises Ltd. Co.
Post Office Box 100
Artesia, NM 88211-0100

Devon Energy Corp.
20 N. Broadway, Suite 1500
Oklahoma City, OK 73102-8260

Cima Capitan Cima Energy
1111 Fannin, Suite 1490
Houston, TX 77002

Yates Petroleum Corp.
105 South 4th Street
Artesia, NM 88210

Mack Energy Corporation
Post Office Box 960
Artesia, NM 88211-0960

Rodney Webb
Post Office Box 1125
Artesia, NM 88211-1125

Texaco Exploration & Production
Post Office Box 3109
Midland, TX 79702

C. Beal Family Trust for
Kelly Beal
104 South Pecos
Midland, TX 79701

Donald B. Anderson
409 E. College Blvd.
Roswell, NM 88202

Kennedy Oil Company
Artesia, NM 88210

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

MICHAEL B. CAMPBELL
WILLIAM F. CARR
BRADFORD C. BERGE
MARK F. SHERIDAN
MICHAEL H. FELDEWERT
ANTHONY F. MEDEIROS
PAUL R. OWEN
KATHERINE M. MOSS

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
FACSIMILE: (505) 983-6043
E-MAIL: ccbspa@ix.netcom.com

December 17, 1998

CERTIFIED MAIL -
RETURN RECEIPT REQUESTED

TO ALL OPERATORS AND UNLEASED MINERAL OWNERS IN THE SQUARE LAKE UNIT AREA; ALL UNLEASED OPERATORS WITHIN ONE-HALF MILE OF THE PROPOSED UNIT WATERFLOOD PROJECT AREA AND TO THE OWNERS OF THE SURFACE OF THE LAND ON WHICH INJECTION WELLS WILL BE LOCATED IN THE WATERFLOOD PROJECT AREA

Re: *Applications of GP II Energy, Inc. for Statutory Unitization and Approval of a Waterflood Project, Eddy County, New Mexico*

Gentlemen:

This letter is to advise you that GP II Energy, Inc. has filed an application with the New Mexico Oil Conservation Division seeking an order statutorily unitizing for the purpose of establishing a secondary recovery project, all mineral interests in the Grayburg and San Andres formations, Square lake-Grayburg-San Andres Pool underlying 6120 acres, more or less, of Federal and State lands in portions of Township 16 South, Ranges 30 and 31 East. Said unit is to be designated the Square Lake Unit. Among the matters to be considered at the hearing will be the necessity of unit operations; the designation of a unit operator; the determination of the horizontal and vertical limits of the unit area; the determination of the fair, reasonable, and equitable allocation of production and costs of production, including capital investment, to each of the various tracts in the unit area; the determination of credits and charges to be made among the various owners in the unit area for their investment in wells and equipment; and such other matters as may be necessary and appropriate for carrying on efficient unit operations; including but not limited to, unit voting procedures, selection, removal or substitution of unit operator, and time of commencement and termination of unit operations. Applicant also requests that any such order issued in this case include a provision for carrying and nonconsenting working interest owner within the unit area upon such terms and conditions to be determined by the Division as just and reasonable. Attached hereto as Exhibit A is a description of the lands to be included in the proposed unit.

December 17, 1998

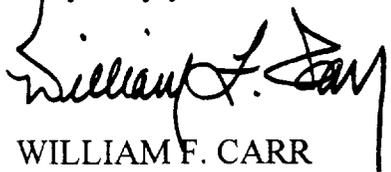
Page 2

GP II Energy, Inc. has also filed an application seeking authority to implement secondary recovery operations in this unit by means of waterflooding, a copy of this application (OCD Form C-108) is enclosed for your information.

These applications have been set for hearing before a Division Examiner on January 7, 1999. You are not required to attend this hearing but, as the owner of an interest that may be affected by these applications, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging these matters at a later date.

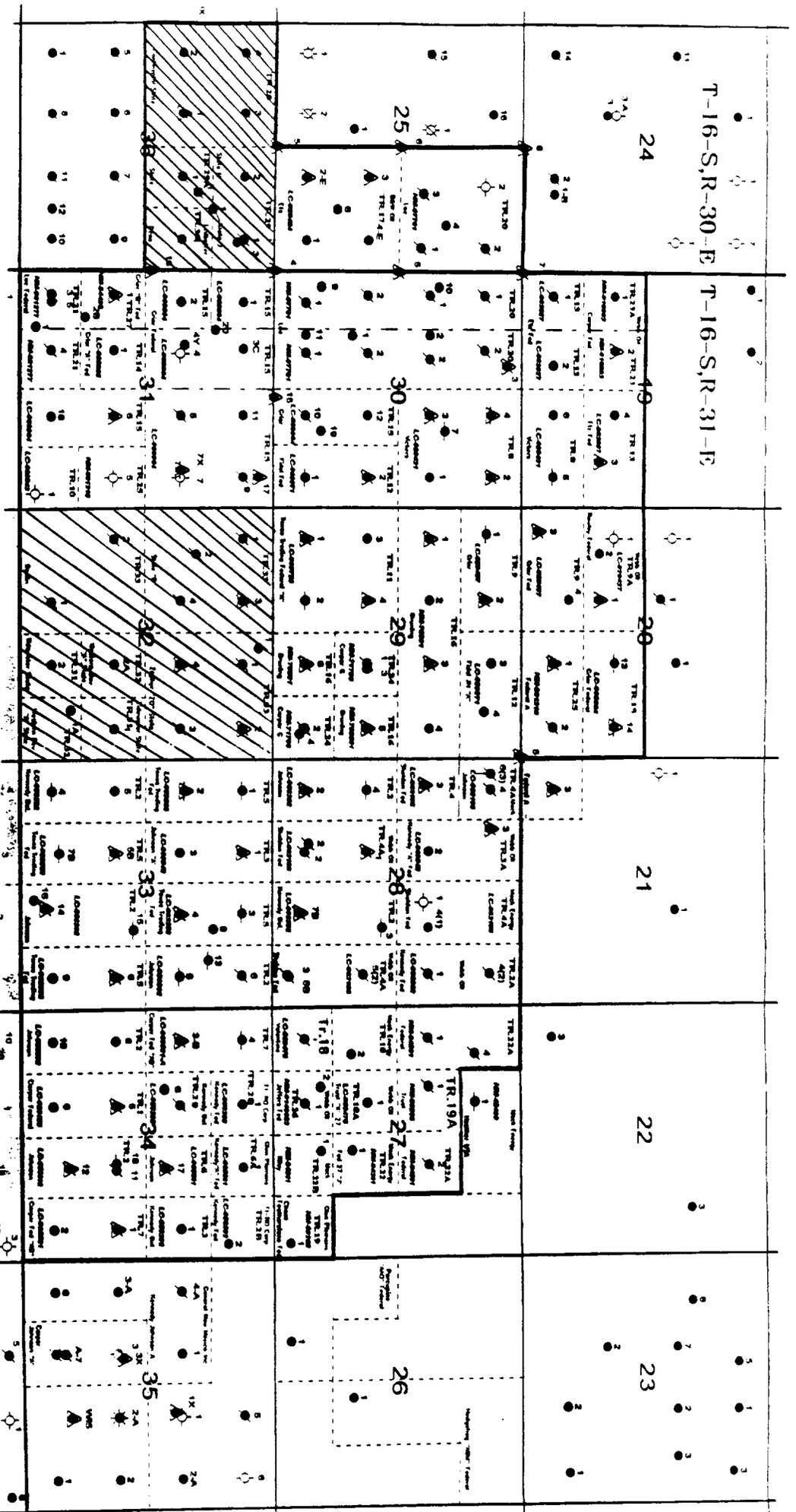
Parties appear in cases have been requested by the Division (Memorandum 2-90) to file a Pre-Hearing Statement substantially in the form prescribed by the Division. Pre-Hearing Statements should be filed by 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,

A handwritten signature in black ink, appearing to read "William F. Carr". The signature is written in a cursive style with a large, stylized initial "W".

WILLIAM F. CARR
ATTORNEY FOR GP II ENERGY, INC.

WFC:mlh
Enclosures



Scale 1:24000.

- LEGEND**
- Active (N) Well
 - Abandoned (N) Well
 - ▲ Active Injector Well
 - △ Abandoned Injector Well
 - FEDERAL LANDS
 - ▨ STATE LANDS

GP II ENERGY, INC.

NORTH SQUARE LAKE UNIT
EDDY COUNTY, NEW MEXICO

MAP SHEET: 111788

SCALE: 1:24000

EXHIBIT A

APPLICATION FOR AUTHORIZATION TO INJECT

98 OCT 15 PM 4:05
OIL CONSERVATION DIV.

- I. PURPOSE: Secondary Recovery Pressure Maintenance Disposal Storage
Application qualifies for administrative approval? Yes No
- II. OPERATOR: GP II Energy
ADDRESS: P. O. Box 50682 Midland, Tx. 79710
CONTACT PARTY: Robert Lee PHONE: (915)- 682-1251
- III. WELL DATA: Complete the data required on the reverse side of this form for each well processed 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 R-2977, R-2920, R-3217 & R-1112
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well within 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 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 sources 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 drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certifications: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

NAME: Robert Lee

TITLE: Consulting Engineer

SIGNATURE: Robert Lee

DATE: 12/8/98

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

Z 559 572 086

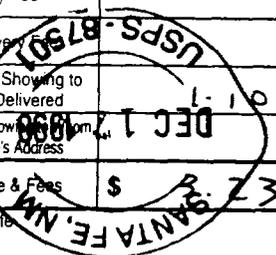
US Postal Service

Receipt for Certified Mail

Square Lake Partners, LLC
Post Office Box 50682
Midland, TX 79710

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	1.10
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	DEC 1 1998

PS Form 3800 April 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):

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

3. Article Addressed to:

Square Lake Partners, LLC
Post Office Box 50682
Midland, TX 79710

4a. Article Number

Z 559 572 086

4b. Service type

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

7. Date of Delivery

DEC 23 1998

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Z 559 572 087

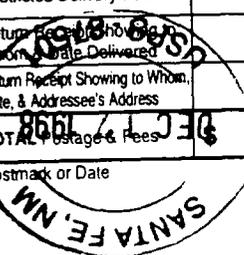
US Postal Service

Receipt for Certified Mail

K. M. Jones Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	1.10
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	DEC 23 1998

PS Form 3800 April 1995



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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:

K. M. Jones Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

4a. Article Number

Z 559 572 087

4b. Service type

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

7. Date of Delivery

12 2 1998

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

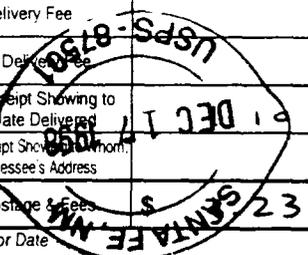
Z 559 572 088

US Postal Service
Receipt for Certified Mail

Staples Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

Postage	\$.78
Certified Fee	1.35
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	3.23
Postmark or Date	DEC 17 1994

PS Form 3800 April 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:
Staples Oil Co.
5121 McKinney Ave.
Dallas, TX 75205

4a. Article Number
Z 559 572 088

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

7. Date of Delivery
122 1994

5. Received By: (Print Name)
X Phyllis Rae

6. Signature: (Addressee or Agent)
X Phyllis Rae

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

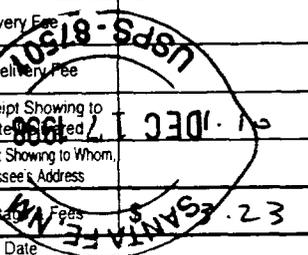
Z 559 572 089

US Postal Service
Receipt for Certified Mail

Max W. Coll, II
Rt. 9, Box 72F
Santa Fe, NM 87505

Postage	\$.78
Certified Fee	1.35
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	3.23
Postmark or Date	DEC 17 1994

PS Form 3800 April 1995



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:
Max W. Coll, II
Rt. 9, Box 72F
Santa Fe, NM 87505

4a. Article Number
Z 559 572 089

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

7. Date of Delivery
12/18/94

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X Max W. Coll

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 090

US Postal Service
Receipt for Certified Mail

Jon F. Coll
Post Office Box 1818
Roswell, NM 88202

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
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:

Jon F. Coll
Post Office Box 1818
Roswell, NM 88202

4a. Article Number
Z 559 572 090

4b. Service type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery

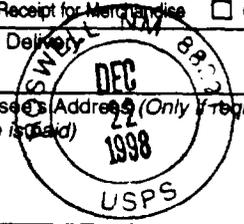
5. Received By: (Print Name)

Jon F. Coll

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

6. Signature: (Addressee or Agent)

X *Jon F. Coll*



Thank you for using Return Receipt Service.

Z 559 572 091

US Postal Service
Receipt for Certified Mail

Charles H. Coll
Post Office Box 1818
Roswell, NM 88202

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
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:

Charles H. Coll
Post Office Box 1818
Roswell, NM 88202

4a. Article Number
Z 559 572 091

4b. Service type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery

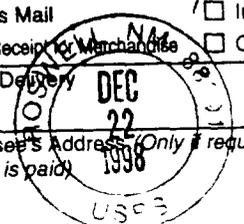
5. Received By: (Print Name)

Charles H. Coll

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

6. Signature: (Addressee or Agent)

X *Charles H. Coll*



Thank you for using Return Receipt Service.

Z 559 572 092

US Postal Service
Receipt for Certified Mail

Borland, Inc.
#9 Westwood
Dothan, AL 36303

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	1.00
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Borland, Inc.
#9 Westwood
Dothan, AL 36303

5. Received By: (Print Name)
Robert Borland

6. Signature: (Addressee or Agent)
X

4a. Article Number
Z 559 572 092

4b. Service Type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery
DEC 22 1998

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 093

US Postal Service
Receipt for Certified Mail

C. Y. Production, LLC
Post Office Box 563
Boerne, TX 78006

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	1.00
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

C. Y. Production, LLC
Post Office Box 563
Boerne, TX 78006

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
Bette Post

4a. Article Number
Z 559 572 093

4b. Service Type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery
12-28-98 (KS)

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 094

US Postal Service
Receipt for Certified Mail

GBN, Inc.
2503 Elmwood Circle North
Wichita Falls, TX 76308

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 1995
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.13
Postmark or Date	SANTA FE, NM

PS Form 3800, April 1995

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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
GBN, Inc.
2503 Elmwood Circle North
Wichita Falls, TX 76308

4a. Article Number
Z 559 572 094

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

7. Date of Delivery
12-26-95

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 102595-98-B-0229 Domestic Return Receipt

is your RETURN ADDRESS completed on the reverse side?

Z 559 572 095

US Postal Service
Receipt for Certified Mail

R. Mace Holman, Jr.
Post Office Box 1414
Dothan, AL 36302

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 1995
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.13
Postmark or Date	SANTA FE, NM

PS Form 3800, April 1995

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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
R. Mace Holman, Jr.
Post Office Box 1414
Dothan, AL 36302

4a. Article Number
Z 559 572 095

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

7. Date of Delivery
12-21-95

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 102595-98-B-0229 Domestic Return Receipt

is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Z 559 572 096

US Postal Service
Receipt for Certified Mail

J. L. Smith Co., Inc.
4204 S. Park Ave.
Dothan, AL 36301

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.

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1 DEC 1 1994
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	2.13
Postmark or Date	

3. Article Addressed to:

J. L. Smith Co., Inc.
4204 S. Park Ave.
Dothan, AL 36301

4a. Article Number

Z 559 572 096

4b. Service type

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

7. Date of Delivery

12-22-94

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102596-98-8-0229

Domestic Return Receipt

PS Form 3800, April 1995

Thank you for using Return Receipt Service.

Z 559 572 098

US Postal Service
Receipt for Certified Mail

Rachel Lyman
Post Office Box 3726
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
Postmark or Date	

PS Form 3800, April 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):

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

3. Article Addressed to:

Rachel Lyman
Post Office Box 3726
Midland, TX 79702

4a. Article Number

Z 559 572 098

4b. Service type

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

7. Date of Delivery

12-23-98

5. Received By: (Print Name)

ANNE L. BRADY

6. Signature: (Addressee or Agent)

[Signature]

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 099

US Postal Service
Receipt for Certified Mail

C.V. Lyman Testamentary Trust
Post Office Box 3726
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	3.23
Postmark or Date	

PS Form 3800, April 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):

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

3. Article Addressed to:

C.V. Lyman Testamentary Trust
Post Office Box 3726
Midland, TX 79702

4a. Article Number

Z 559 572 099

4b. Service type

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

7. Date of Delivery

12-23-98

5. Received By: (Print Name)

ANNE L. BRADY

6. Signature: (Addressee or Agent)

[Signature]

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 100

US Postal Service

Receipt for Certified Mail

Pride Energy Co.
Post Office Box 701602
Tulsa, OK 74170

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	DEC 1 1998 SANTA FE, NM

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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Pride Energy Co.
Post Office Box 701602
Tulsa, OK 74170

4a. Article Number

Z 559 572 100

4b. Service type

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

7. Date of Delivery

DEC 23 1998

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *Matthew L. ...*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 101

US Postal Service

Receipt for Certified Mail

RBP Land Company
Post Office Box 10392
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
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	\$ 3.23
Postmark or Date	DEC 1 1998 SANTA FE, NM

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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

RBP Land Company
Post Office Box 10392
Midland, TX 79702

4a. Article Number

Z 559 572 101

4b. Service type

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

7. Date of Delivery

DEC 1 1998

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *William ...*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 102

US Postal Service
Receipt for Certified Mail

SE Com & Equip. Co.
Post Office Box 1646
Dothan, AL 36302

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 10
Return Receipt Showing to Whom, Date, & Addressee's Address	DEC 10
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	DOETHAN AL 10 DEC 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:
SE Com & Equip. Co.
Post Office Box 1646
Dothan, AL 36302

4a. Article Number
Z 559 572 102

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

7. Date of Delivery
12-21-95

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X Kattie Denton

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 103

US Postal Service
Receipt for Certified Mail

W. Watson, Inc.
Post Office Box 2253
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 10
Return Receipt Showing to Whom, Date, & Addressee's Address	DEC 10
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	MIDLAND TX 10 DEC 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:
W. Watson, Inc.
Post Office Box 2253
Midland, TX 79702

4a. Article Number
Z 559 572 103

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 W. Watson

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 104

US Postal Service
Receipt for Certified Mail

Chase Oil Corp.
Post Office Box 1767
Artesia, NM 88211

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	030 1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 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:

Chase Oil Corp.
Post Office Box 1767
Artesia, NM 88211

4a. Article Number

Z 559 572 104

4b. Service type

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

7. Date of Delivery

12-21-96

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 106

US Postal Service
Receipt for Certified Mail

Bulldog Energy Corp.
Post Office Box 668
Artesia, NM 88211

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-21-98
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bulldog Energy Corp.
Post Office Box 668
Artesia, NM 88211

4a. Article Number

Z 559 572 106

4b. Service type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Sylvia Housley

6. Signature: (Addressee or Agent)

X *[Signature]*

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 107

US Postal Service
Receipt for Certified Mail

David C. Collier
3400 West 8th Street
Roswell, NM 88201

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-21-98
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

David C. Collier
3400 West 8th Street
Roswell, NM 88201

4a. Article Number

Z 559 572 107

4b. Service type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

[Signature]

6. Signature: (Addressee or Agent)

X *[Signature]*

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail

Marbob Energy Corp.
Post Office Drawer 217
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.75
Special Delivery Fee	
Registered Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date & Business Address	
TOTAL Postage & Fees	\$ 2.53
Postman's Initials	

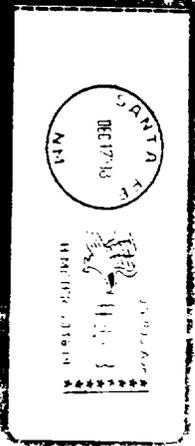
9441 0085

CERTIFIED MAIL
Z 559 572 105

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:
Marbob Energy Corp.
Post Office Drawer 217
Artesia, NM 88210

FIRST CLASS MAIL



ILLEGIBLE

Postage	\$	78
Certified Fee		1.35
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to Whom & Date Delivered		1.0
Return Receipt Showing at Whom Delivered & Address		
TOTAL Charges & Fees	\$	7.23
Postmark or Date		

PS Form 3800 April 1995

7 554 572 104
MAIL

RECEIVED
DEC 8 0 05 PM '93
CAMPBELL, CARR, BERGE & SHERIDAN, P.A.

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:
Robert S. Gleason
Post Office Box 798
Artesia, NM 88211

FIRST CLASS MAIL

SANTA FE
DEC 17 '93
0 2 11
FINE LINE 5075819

ILLEGIBLE

2 559 572 109

US Postal Service
Receipt for Certified Mail

BHW, LLC.
101 South 4th Street
Artesia, NM 88210

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	3-23-98
Return Receipt Showing to Whom, Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BHW, LLC.
101 South 4th Street
Artesia, NM 88210

4a. Article Number
Z 559 572 109

4b. Service type

Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
12-19-98

5. Received By: (Print Name)

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

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

Thank you for using Return Receipt Service.

Z 559 572 110

US Postal Service
Receipt for Certified Mail

B & H Properties
2410 Auburn Place
Midland, TX 79705

Postage	\$.78
Certified Fee	1.35
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	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

B & H Properties
2410 Auburn Place
Midland, TX 79705

4a. Article Number

Z 559 572 110

4b. Service type

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

7. Date of Delivery

DEC 23 1994

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 111

US Postal Service
Receipt for Certified Mail

Logan Royalties, Ltd.
Post Office Box 804
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
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	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Logan Royalties, Ltd.
Post Office Box 804
Midland, TX 79702

4a. Article Number

Z 559 572 111

4b. Service type

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

7. Date of Delivery

5. Received By: (Print Name)

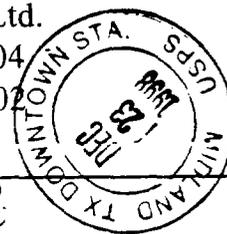
6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt



Thank you for using Return Receipt Service.

Z 559 572 112

US Postal Service
Receipt for Certified Mail

Rocky Mountain Resources
Post Office Box 7405
Midland, TX 79708

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	7.00
TOTAL Postage & Fees	\$ 3.23
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:

Rocky Mountain Resources
Post Office Box 7405
Midland, TX 79708

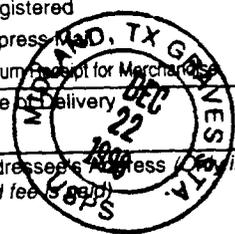
4a. Article Number

Z 559 572 112

4b. Service type

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

7. Date of Delivery



5. Received By: (Print Name)

Michael G. Mooney

6. Signature: (Addressee or Agent)

[Signature]

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 113

US Postal Service
Receipt for Certified Mail

Victor J. Sirgo
3300 North "A" Street
Bldg. 2, Suite 104
Midland, TX 79705

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	7.00
TOTAL Postage & Fees	\$ 3.23
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:

Victor J. Sirgo
3300 North "A" Street
Bldg. 2, Suite 104
Midland, TX 79705

4a. Article Number

Z 559 572 113

4b. Service type

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

7. Date of Delivery

12-23-95

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

[Signature]

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 114

US Postal Service

Receipt for Certified Mail

Selma E. Andrews #518801
c/o NationsBank Trust
Post Office Box 840738
Dallas, TX 75284

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	0501-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Selma E. Andrews #518801
c/o NationsBank Trust
Post Office Box 840738
Dallas, TX 75284

4a. Article Number

Z 559 572 114

4b. Service type

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

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)

X

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 115

US Postal Service

Receipt for Certified Mail

James N. Coll
Post Office Box 1818
Roswell, NM 88202

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	4-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

James N. Coll
Post Office Box 1818
Roswell, NM 88202

4a. Article Number

Z 559 572 115

4b. Service type

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

7. Date of Delivery

DEC 22 1998
USPS

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

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 116

US Postal Service
Receipt for Certified Mail

Columbine II Ltd. Partnership
Post Office Box 22066
Denver, CO 80222

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Columbine II Ltd. Partnership
Post Office Box 22066
Denver, CO 80222

4a. Article Number

Z 559 572 116

4b. Service Type

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

7. Date of Delivery

5. Received By: (Print Name)

X *[Signature]*

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

PS Form 3811, December 1994

10-595-08-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 117

US Postal Service
Receipt for Certified Mail

Vera Cox Haefs
9909 Glenrio Lane
Dallas, TX 75220

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 118

US Postal Service

Receipt for Certified Mail

James Petroleum Trust
Post Office Box 4648
Tulsa, OK 74159

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1 1995
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 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 Petroleum Trust
Post Office Box 4648
Tulsa, OK 74159

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

4a. Article Number

Z 559 572 118

4b. Service type

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

7. Date of Delivery

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Receipt for Certified Mail

Tommye June Robinson
5809 Wedgeworth Rd.
Fort Worth, TX 76133

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Cleared	1.10
From Package Showing to Whom & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark of Origin	

PS Form 3800 April 1995

RECEIVED
DEC 30 1998

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

Z 559 572 119
MAIL

TO:
Tommye June Robinson
5809 Wedgeworth Rd.
Fort Worth, TX 76133

FIRST CLASS MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

UNDELIVERABLE
NO FORWARDING

SANTA FE
DEC 17 '98
N.M.
153 00
HIMSELF 501616

ILLEGIBLE

Z 559 572 120

US Postal Service
Receipt for Certified Mail

Ward Investment, Ltd.
101 South 4th Street
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-19-98
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ward Investment, Ltd.
101 South 4th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 120

4b. Service type

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

7. Date of Delivery

12-19-98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *Optim Knight*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 121

US Postal Service
Receipt for Certified Mail

Carl Brininstool
201 Blackberry
Midland, TX 79707

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Carl Brininstool
201 Blackberry
Midland, TX 79707

4a. Article Number

Z 559 572 121

4b. Service type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *Carl Brininstool*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 122

US Postal Service
Receipt for Certified Mail

Pogar petroleum, Ltd.
Post Office Box 10095
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Pogar petroleum, Ltd.
Post Office Box 10095
Midland, TX 79702

4a. Article Number

Z 559 572 122

4b. Service type

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

7. Date of Delivery

12/22/98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X Pogar Ltd TX

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt



Thank you for using Return Receipt Service.

Z 559 572 123

US Postal Service
Receipt for Certified Mail

William J. and Margaret Colby
901 W. 6th Street
Silver City, NM 88061

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

William J. and Margaret Colby
901 W. 6th Street
Silver City, NM 88061

4a. Article Number

Z 559 572 123

4b. Service type

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

7. Date of Delivery

12/22/98

5. Received By: (Print Name)

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

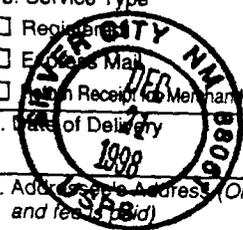
6. Signature: (Addressee or Agent)

X W J Colby

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt



Thank you for using Return Receipt Service.

Z 559 572 124

US Postal Service
Receipt for Certified Mail

OXY USA, Inc.
Post Office Box 841735
Dallas, TX 75284-1735

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark on 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:
OXY USA, Inc.
Post Office Box 841735
Dallas, TX 75284-1735

4a. Article Number
Z 559 572 124

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

7. Date of Delivery
12-22-98

5. Received By: (Print Name)
C. Jackson

6. Signature: (Addressee or Agent)
X Jackson

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

PS Form 3811, December 1994 102595-98-8-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 125

US Postal Service
Receipt for Certified Mail

Braille Institute of America
Oil & Gas Trust NCNB
Post Office Box 840738
Dallas, TX 75284

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark on 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:
Braille Institute of America
Oil & Gas Trust NCNB
Post Office Box 840738
Dallas, TX 75284

4a. Article Number
Z 559 572 125

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

7. Date of Delivery
12-22-98

5. Received By: (Print Name)
C. Jackson

6. Signature: (Addressee or Agent)
X Jackson

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

PS Form 3811, December 1994 102595-98-8-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 126

US Postal Service
Receipt for Certified Mail

Max W. Coll
Post Office Box 1818
Roswell, NM 88202

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-19
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Max W. Coll
Post Office Box 1818
Roswell, NM 88202

4a. Article Number
Z 559 572 126

4b. Service type

Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

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)
X *Max W. Coll*

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 127

US Postal Service
Receipt for Certified Mail

Rose M. Cottingham
1119 Montedito
San Angelo, TX 76901

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Rose M. Cottingham
1119 Montedito
San Angelo, TX 76901

4a. Article Number
Z 559 572 127

4b. Service type

Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By: (Print Name)
Rose M. Cottingham

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

6. Signature: (Addressee or Agent)
X *Rose M. Cottingham*

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 128

US Postal Service
Receipt for Certified Mail

Higgins Trust, Inc.
Post Office Box 2421
Gainesville, GA 30505

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Higgins Trust, Inc.
Post Office Box 2421
Gainesville, GA 30505

4a. Article Number

Z 559 572 128

4b. Service Type

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

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Kathleen Edwards

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 129

US Postal Service
Receipt for Certified Mail

Marshall & Winston, Inc.
Post Office Box 50880
Midland, TX 79710

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Marshall & Winston, Inc.
Post Office Box 50880
Midland, TX 79710

4a. Article Number

Z 559 572 129

4b. Service Type

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

7. Date of Delivery

DEC 23 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

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 130

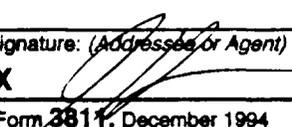
US Postal Service
Receipt for Certified Mail

Josephine Smith Trust
Wells Fargo Bank
Post Office Box 5825
Denver, CO 80217

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-78
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
3. Article Addressed to: Josephine Smith Trust Wells Fargo Bank Post Office Box 5825 Denver, CO 80217	4a. Article Number Z 559 572 130	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
5. Received By: (Print Name)	7. Date of Delivery 12/21	8. Addressee's Address (Only if requested and fee is paid)
6. Signature: (Addressee or Agent) X 		

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail

Gertrude McDorman, Trustee
 511 Centre Avenue
 Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Fee, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

MAIL
 2 559 572 131

TO:

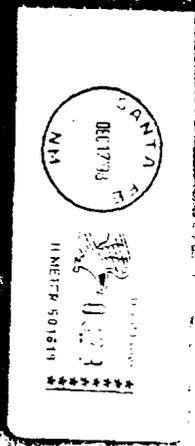
CAMPBELL, CARR, BEGGE & SHERIDAN, P.A.
 110 NORTH GUADALUPE STREET
 P.O. BOX 2208
 SANTA FE, NEW MEXICO 87504-2208

Gertrude McDorman, Trustee
 511 Centre Avenue
 Artesia, NM 8

FIRST CI

082102003 1097 02 12/21/99
 FORWARD TIME EXE
 MCDORMAN, GERTRUDE
 501 W CENTRE AVE
 ARTESIA NM 88210-2716

RETURN TO SENDER



ILLEGIBLE

Z 559 572 132

US Postal Service
Receipt for Certified Mail

Robert E. Boling
305 South 5th Street
Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-21-98
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Robert E. Boling
305 South 5th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 132

4b. Service type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Like Boling

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

6. Signature: (Addressee or Agent)

X Robert E. Boling

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 133

US Postal Service
Receipt for Certified Mail

Therylene K. Helm
4401 Edmonson
Dallas, TX 75205

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-21-98
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Therylene K. Helm
4401 Edmonson
Dallas, TX 75205

4a. Article Number

Z 559 572 133

4b. Service type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

X Therylene K. Helm

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 134

US Postal Service
Receipt for Certified Mail

Mrs. T. B. Knox
300 Crescent Court, Suite 162
Dallas, TX 75021

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mrs. T. B. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

4a. Article Number

Z 559 572 134

4b. Service type

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

7. Date of Delivery

DEC 22 1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

[Signature]

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 135

US Postal Service
Receipt for Certified Mail

Bert H. Murphy
Post Office Drawer 2164
Roswell, NM 88201

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bert H. Murphy
Post Office Drawer 2164
Roswell, NM 88201

4a. Article Number

Z 559 572 135

4b. Service type

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

7. Date of Delivery

12-22-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

[Signature]

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 136

US Postal Service
Receipt for Certified Mail

Lillie Mabel Bates
Post Office Box 840
Artesia, NM 88211-0840

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	-
Restricted Delivery Fee	-
Return Receipt Showing to Whom & Date Delivered:	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	1-10
TOTAL Postage & Fees	\$ 3.23
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:

Lillie Mabel Bates
Post Office Box 840
Artesia, NM 88211-0840

4a. Article Number

Z 559 572 136

4b. Service type

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

7. Date of Delivery

12-21-94

5. Received By: (Print Name)

Toni Hamilton

6. Signature: (Addressee or Agent)

X Toni Hamilton

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 137

US Postal Service
Receipt for Certified Mail

Wendell W. Iverson 1990 Trust
Post Office Box 10508
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	-
Restricted Delivery Fee	-
Return Receipt Showing to Whom & Date Delivered:	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	1-10
TOTAL Postage & Fees	\$ 3.23
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:

Wendell W. Iverson 1990 Trust
Post Office Box 10508
Midland, TX 79702

4a. Article Number

Z 559 572 137

4b. Service type

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

7. Date of Delivery

5. Received By: (Print Name)

X Pamela Bullock

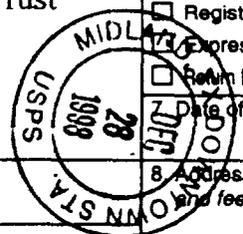
6. Signature: (Addressee or Agent)

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt



Z 559 572 138

US Postal Service
Receipt for Certified Mail

PIP Trust
Post Office Box 10508
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1/10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
PIP Trust
Post Office Box 10508
Midland, TX 79702

4a. Article Number
Z 559 572 138

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

7. Date of Delivery

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

5. Received By: (Print Name)
6. Signature: (Addressee or Agent)
X *Tam Burke*

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Z 559 572 139

US Postal Service
Receipt for Certified Mail

John Ashby Yates
105 South 4th Street
Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1/10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
John Ashby Yates
105 South 4th Street
Artesia, NM 88210

4a. Article Number
Z 559 572 139

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

7. Date of Delivery

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

5. Received By: (Print Name)
JOANN GRIGGS

6. Signature: (Addressee or Agent)
X *Joann Griggs*

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 140

US Postal Service
Receipt for Certified Mail

Tonya W. Malliard
135 Van Winkle Drive
San Anselmo, CA 94960

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Tonya W. Malliard
135 Van Winkle Drive
San Anselmo, CA 94960

4a. Article Number

Z 559 572 140

4b. Service Type

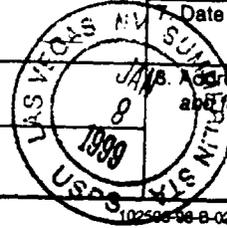
- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Tonya Malliard*



PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 141

US Postal Service
Receipt for Certified Mail

Mae Chang Plasch
3883 Turtle Creek Blvd., #1004
Dallas, TX 75219-4429

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mae Chang Plasch
3883 Turtle Creek Blvd., #1004
Dallas, TX 75219-4429

4a. Article Number

Z 559 572 141

4b. Service Type

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

7. Date of Delivery

DEC 23 1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Mae Plasch*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 142

US Postal Service

Receipt for Certified Mail

Sharbro Oil Ltd., Co.
Post Office Box 840
Artesia, NM 88211-0840

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Sharbro Oil Ltd., Co.
Post Office Box 840
Artesia, NM 88211-0840

4a. Article Number

Z 559 572 142

4b. Service Type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Toni Hamilton

6. Signature: (Addressee or Agent)

X Toni Hamilton

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 143

US Postal Service

Receipt for Certified Mail

Charles Deguigne
1001 Chelsea Way
Redwood City, CA 94061-3665

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	0331-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Charles Deguigne
1001 Chelsea Way
Redwood City, CA 94061-3665

4a. Article Number

Z 559 572 143

4b. Service Type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Charles Deguigne

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 144

US Postal Service
Receipt for Certified Mail

Siegfried J. Iverson, Jr.
2518 Sinclair
Midland, TX 79705-8422

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Siegfried J. Iverson, Jr.
2518 Sinclair
Midland, TX 79705-8422

4a. Article Number

Z 559 572 144

4b. Service type

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

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

102595-08-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 145

US Postal Service
Receipt for Certified Mail

Ray and Karen Westall
Post Office Box 4
Loco Hills, NM 88255-0004

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ray and Karen Westall
Post Office Box 4
Loco Hills, NM 88255-0004

4a. Article Number

Z 559 572 145

4b. Service type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Judy Bernole

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 146

US Postal Service
Receipt for Certified Mail

Jack D. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Jack D. Knox
300 Crescent Court, Suite 1620
Dallas, TX 75021

4a. Article Number
Z 559 572 146

4b. Service type

Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
DEC 22 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

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 147

US Postal Service
Receipt for Certified Mail

Texacal Oil & Gas, Inc.
4299 McCarthur Blvd., Suite 207
Newport Beach, CA 92660

PS Form 3800, April 1995

Postage	\$.71
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Texacal Oil & Gas, Inc.
4299 McCarthur Blvd., Suite 207
Newport Beach, CA 92660

4a. Article Number
Z 559 572 147

4b. Service type

Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
12-21-98

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

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 148

US Postal Service
Receipt for Certified Mail

Hal C. Porter
Post Office Box 17004
Fountain Hills, AZ 85269-7004

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

2/23/98

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES

Z 559 572 148
MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:
Hal C. Porter
Post Office Box 17004
Fountain Hills, AZ 85269-7004

FIRST CLASS MAIL
PORT004 852691214 IN 45 12/24/98
RETURN TO SENDER
NO FORWARD ORDER ON FILE
UNABLE TO FORWARD
RETURN TO SENDER



ILLEGIBLE

Z 559 572 149

US Postal Service
Receipt for Certified Mail

Wendell W. Iverson
Post Office Box 1343
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	4-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23

PS Form 3800, April 1995

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:

Wendell W. Iverson
Post Office Box 1343
Midland, TX 79702

4a. Article Number

Z 559 572 149

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)

X *Tom Burke*



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

PS Form 3811, December 1994

102505-08-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 150

US Postal Service
Receipt for Certified Mail

SJI, Jr. 1990 Trust
Post Office Box 10508
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
SJI, Jr. 1990 Trust
Post Office Box 10508
Midland, TX 79702

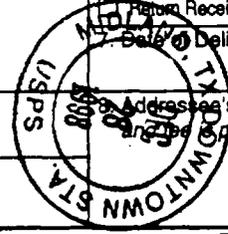
4a. Article Number
Z 559 572 150

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

5. Received By: (Print Name)
[Signature]

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt



Thank you for using Return Receipt Service.

Z 559 572 151

US Postal Service
Receipt for Certified Mail

Harvey E. Yates
Post Office Box 1933
Roswell, NM 88208-1933

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-22-98
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Harvey E. Yates
Post Office Box 1933
Roswell, NM 88208-1933

4a. Article Number
Z 559 572 151

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

7. Date of Delivery
12-22-98

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

5. Received By: (Print Name)
[Signature]

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 152

US Postal Service

Receipt for Certified Mail

Lynne Wildman Chapman
1324 Old Gulph Rd.
Villanova, PA 19085

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Lynne Wildman Chapman
1324 Old Gulph Rd.
Villanova, PA 19085

4a. Article Number

Z 559 572 152

4b. Service type

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

7. Date of Delivery

11/23/98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Lynne Wildman Chapman*

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

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 153

US Postal Service

Receipt for Certified Mail

S. P. Yates
207 Fourth Street
Artesia, NM 88210-2193

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

S. P. Yates
207 Fourth Street
Artesia, NM 88210-2193

4a. Article Number

Z 559 572 153

4b. Service type

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

7. Date of Delivery

5. Received By: (Print Name)

JOANN GRIGGS

6. Signature: (Addressee or Agent)

X *Joann Griggs*

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

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 154

US Postal Service

Receipt for Certified Mail

John & Peggy Yates Estate
105 South 4th Street
Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
 John & Peggy Yates Estate
 105 South 4th Street
 Artesia, NM 88210

4a. Article Number
 Z 559 572 154

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

7. Date of Delivery

5. Received By: (Print Name)
 JOANN GRIGGS

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

6. Signature: (Addressee or Agent)
 Jo Ann Griggs

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 155

US Postal Service

Receipt for Certified Mail

Robert N. Avery Martial Trust
74133 El Paseo, Suite E
Palm Desert, CA 92260-4123

PS Form 3800, April 1995

Postage	\$.72
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
 Robert N. Avery Martial Trust
 74133 El Paseo, Suite E
 Palm Desert, CA 92260-4123

4a. Article Number
 Z 559 572 155

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

7. Date of Delivery
 12-24-98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)
 R. N. Avery

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 156

US Postal Service
Receipt for Certified Mail

Roger D. Lapham, Jr.
Post Office Box 721
Pebble Beach, CA 93953-072

Postage	\$ 1.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:
Roger D. Lapham, Jr.
Post Office Box 721
Pebble Beach, CA 93953-0721

4a. Article Number
Z 559 572 156

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

7. Date of Delivery
12-23-98

5. Received By: (Print Name)

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

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

PS Form 3811, December 1994

102595-08-B-0229 Domestic Return Receipt

Z 559 572 157

US Postal Service
Receipt for Certified Mail

Lloyd McGhee
Post Office Box 16399
Fort Worth, Tx 76162-039

Postage	\$.71
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:
Lloyd McGhee
Post Office Box 16399
Fort Worth, Tx 76162-0399

4a. Article Number
Z 559 572 157

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

7. Date of Delivery
12-23-98

5. Received By: (Print Name)

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

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

PS Form 3811, December 1994

102595-08-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 158

US Postal Service
Receipt for Certified Mail
Phoebe Shelton
Post Office Box 430
Amarillo, TX 79105-0430

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Phoebe Shelton
Post Office Box 430
Amarillo, TX 79105-0430

4a. Article Number
Z 559 572 158

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

7. Date of Delivery
8/8

5. Received By: (Print Name)
Verita Silvertooth

6. Signature: (Addressee or Agent)
Verita Silvertooth

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

Thank you for using Return Receipt Service.

Z 559 572 159

US Postal Service
Receipt for Certified Mail
Christian DeGuigue
Post Office Box 1739
San Mateo, CA 94401-0920

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.40
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Christian DeGuigue
Post Office Box 1739
San Mateo, CA 94401-0920

4a. Article Number
Z 559 572 159

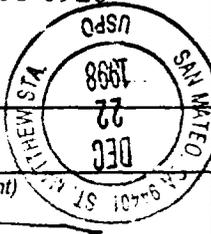
4b. Service Type
 Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X

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



Thank you for using Return Receipt Service.

Z 559 572 160

US Postal Service
Receipt for Certified Mail

Summit Overseas Exploration
Irongate 3, Suite 201
7775 Wadsworth Blvd.
Lakewood, CO 80226

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

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

3. Article Addressed to:

Summit Overseas Exploration
Irongate 3, Suite 201
7775 Wadsworth Blvd.
Lakewood, CO 80226

4a. Article Number

Z 559 572 160

4b. Service Type

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

7. Date of Delivery

5. Received By: (Print Name)

GARY N. DAVIS

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

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-08-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 161

US Postal Service
Receipt for Certified Mail

Jacqueline Dickerson
3901 Innwood Road
Fort Worth, TX 76109

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

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

3. Article Addressed to:

Jacqueline Dickerson
3901 Innwood Road
Fort Worth, TX 76109

4a. Article Number

Z 559 572 161

4b. Service Type

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

7. Date of Delivery

12/24/90

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

X Frances Thomas

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

PS Form 3811, December 1994

102595-08-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 162

US Postal Service
Receipt for Certified Mail

Vicky Moser
Post Office Box 67
Stephenville, TX 76401

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Vicky Moser
Post Office Box 67
Stephenville, TX 76401

4a. Article Number

Z 559 572 162

4b. Service Type

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

7. Date of Delivery

DEC 23 1998

5. Received By: (Print Name)

Charles E Moser

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

6. Signature: (Addressee or Agent)

X Charles E Moser

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 163

US Postal Service
Receipt for Certified Mail

Bernard D. Alpern
400 Jericho Tpke #205
Jericho, NY 11753

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Bernard D. Alpern
400 Jericho Tpke #205
Jericho, NY 11753

4a. Article Number

Z 559 572 163

4b. Service Type

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

7. Date of Delivery

5. Received By: (Print Name)

Bernard D. Alpern

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

6. Signature: (Addressee or Agent)

X Bernard D. Alpern

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 164

US Postal Service

Receipt for Certified Mail

C. Beal Family Trust for
Barry Beal
104 South Pecos
Midland, TX 79701

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

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

3. Article Addressed to:

C. Beal Family Trust for
Barry Beal
104 South Pecos
Midland, TX 79701

4a. Article Number

Z 559 572 164

4b. Service Type

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

7. Date of Delivery

DEC 22 1998

5. Received By: (Print Name)

K. Tuttle

6. Signature: (Addressee or Agent)

X [Signature]

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 165

US Postal Service

Receipt for Certified Mail

Harvey M. Black Trust
Post Office Box 22900
Rochester, NY 14692

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

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

3. Article Addressed to:

Harvey M. Black Trust
Post Office Box 22900
Rochester, NY 14692

4a. Article Number

Z 559 572 165

4b. Service Type

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

7. Date of Delivery

DEC 28 1998

5. Received By: (Print Name)

DUANE MAULT

6. Signature: (Addressee or Agent)

X [Signature]

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 166

Cerri Family Trust
9561 Borba Circle
Huntington Beach, CA 92646

PS Form 3800 April 1995

Post Office, State, & ZIP Code	
Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Z 559 572 167

US Postal Service
Receipt for Certified Mail

Patsy Ann Iverson Page
1155 Maurlands Vista Way
La Jolla, CA 92037-6210

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Patsy Ann Iverson Page
1155 Maurlands Vista Way
La Jolla, CA 92037-6210

4a. Article Number

Z 559 572 167

4b. Service type

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

7. Date Delivered
APR 2 1995

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)

X Patsy Iverson

Thank you for using Return Receipt Service.

Z 559 572 168

US Postal Service
Receipt for Certified Mail

Flora Whittington
7709 E. Glenroso Ave., Apt. 202
Scottsdale, AZ 85251-4047

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

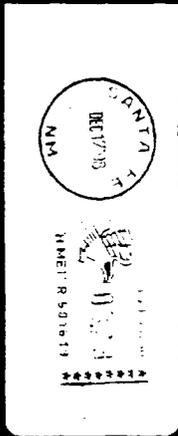
TO:

Flora Whittington
7709 E. Glenroso Ave., Apt. 202
SCOTTSDALE, AZ 85251-4047

FIRST CLASS MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

Z 559 572 168
MAIL



ILLEGIBLE

Z 559 572 169

US Postal Service

Receipt for Certified Mail

Colby Revocable Living Trust
901 West 6th Street
Silver City, NM 88061-4505

Postage	\$.79
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	12-21-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Colby Revocable Living Trust
901 West 6th Street
Silver City, NM 88061-4505

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

4a. Article Number

Z 559 572 169

4b. Service Type

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

7. Date of Delivery



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

Thank you for using Return Receipt Service.

Z 559 572 170

US Postal Service
Receipt for Certified Mail

Frank Darden
1619 Pennsylvania Ave.
Fort Worth, TX 76104

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
**Frank Darden
1619 Pennsylvania Ave.
Fort Worth, TX 76104**

4a. Article Number
Z 559 572 170

4b. Service type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery
2-21-98

5. Received By: (Print Name)
STEVE LEARACK

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

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

PS Form 3811, December 1994

102595-98-6-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 171

US Postal Service
Receipt for Certified Mail

Carole Gauntt
Post Office Box 7275
Carmel, CA 93921

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
**Carole Gauntt
Post Office Box 7275
Carmel, CA 93921**

4a. Article Number
Z 559 572 171

4b. Service type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery
DEC 21 1998

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)
x Carole Gauntt

PS Form 3811, December 1994

102595-98-6-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 172

US Postal Service
Receipt for Certified Mail

Peggy Runyan
Post Office Box 869
Kapaa, HI 96746

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Peggy Runyan
Post Office Box 869
Kapaa, HI 96746

4a. Article Number

Z 559 572 172

4b. Service Type

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

7. Date of Delivery

12/22

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Tom E. Runyan

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 173

US Postal Service
Receipt for Certified Mail

C. Beal Family Trust for
Carlton Beal, Jr.
104 South Pecos
Midland, TX 79701

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

C. Beal Family Trust for
Carlton Beal, Jr.
104 South Pecos
Midland, TX 79701

4a. Article Number

Z 559 572 173

4b. Service Type

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

7. Date of Delivery

DEC 22 1994

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 174

US Postal Service
Receipt for Certified Mail

C. Beal Family Trust for
Spencer Beal
104 South Pecos
Midland, TX 79701

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
C. Beal Family Trust for
Spencer Beal
104 South Pecos
Midland, TX 79701

4a. Article Number
Z 559 572 174

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

7. Date of Delivery
DEC 22 1998

5. Received By: (Print Name)
S. Howell

6. Signature: (Addressee or Agent)
X S. Howell

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Z 559 572 175

US Postal Service
Receipt for Certified Mail

C. Beal Family Trust for
Karleen Geuber
104 South Pecos
Midland, TX 79701

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
C. Beal Family Trust for
Karleen Geuber
104 South Pecos
Midland, TX 79701

4a. Article Number
Z 559 572 175

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

7. Date of Delivery
DEC 22 1998

5. Received By: (Print Name)
S. Howell

6. Signature: (Addressee or Agent)
X S. Howell

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Z 559 572 176

US Postal Service

Receipt for Certified Mail

Carol Brookman Acct: 637602
Post Office Box 840738
Dallas, TX 75284

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Carol Brookman Acct: 637602
Post Office Box 840738
Dallas, TX 75284

4a. Article Number
Z 559 572 176

4b. Service type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery
DEC 20 1998

5. Received By: (Print Name)
Kenneth Phelps

6. Signature: (Addressee or Agent)
Kenneth Phelps
X

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 177

US Postal Service

Receipt for Certified Mail

D. Flugstad
#1112000 NationsBank
Post Office Box 840738
Dallas, TX 75284

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	DEC 19
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
D. Flugstad
#1112000 NationsBank
Post Office Box 840738
Dallas, TX 75284

4a. Article Number
Z 559 572 177

4b. Service type

Registered Certified

Express Mail Insured

Return Receipt for Merchandise COD

7. Date of Delivery
DEC 20 1998

5. Received By: (Print Name)
Kenneth Phelps

6. Signature: (Addressee or Agent)
Kenneth Phelps
X

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 178

US Postal Service
Receipt for Certified Mail

M. B. Foreman
Bank NA f/b/o M.B. Foreman
One Lincoln Square
Rochester, NY 14643

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

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

3. Article Addressed to:

M. B. Foreman
Bank NA f/b/o M.B. Foreman
One Lincoln Square
Rochester, NY 14643

4a. Article Number

Z 559 572 178

4b. Service type

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

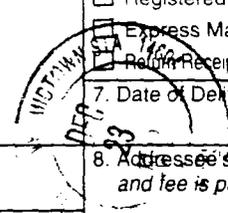
7. Date of Delivery

5. Received By: (Print Name)

Scotin Allen

6. Signature: (Addressee or Agent)

X Scotin Allen



PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Z 559 572 179

US Postal Service
Receipt for Certified Mail

Robert L. Halverson
Post Office Box 3713
Midland, TX 79702

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

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

3. Article Addressed to:

Robert L. Halverson
Post Office Box 3713
Midland, TX 79702

4a. Article Number

Z 559 572 179

4b. Service type

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

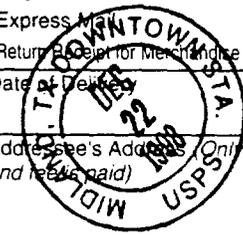
7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Robert Halverson

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



PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 180

US Postal Service
Receipt for Certified Mail

Thomas F. Lugaric
14 Lerape Trail
Cedar Grove, NJ 70009

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Thomas F. Lugaric
14 Lerape Trail
Cedar Grove, NJ 70009

4a. Article Number

Z 559 572 180

4b. Service type

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

7. Date of Delivery

12/28/98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

Z 559 572 181

US Postal Service
Receipt for Certified Mail

Stephen McNall
NationsBank #1112001
Post Office Box 840738
Dallas, TX 75284

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 182

US Postal Service

Receipt for Certified Mail

Florence Joyce Miller
109 Caversham Woods
Pottsford, NY 14534

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

Florence Joyce Miller
109 Caversham Woods
Pottsford, NY 14534

4a. Article Number

Z 559 572 182

4b. Service type

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

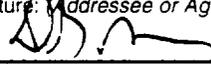
7. Date of Delivery

12/23/98 JJ

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

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 183

US Postal Service

Receipt for Certified Mail

Elizabeth Wolff Murov
Cedar Swamp Road
Old Brookville, NY 11545

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 184

US Postal Service
Receipt for Certified Mail

Zachary Murov
999 Brush Hollow Road
Westbury, NY 11590

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Zachary Murov
999 Brush Hollow Road
Westbury, NY 11590

5. Received By: (Print Name)
[Signature]

6. Signature: (Addressee or Agent)
X

4a. Article Number
Z 559 572 184

4b. Service Type

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

7. Date of Delivery

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 185

US Postal Service
Receipt for Certified Mail

Ellen Palma Trust
Chase Lincoln First Bank
Post Office Box 1412
Rochester, NY 14643

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

2 559 572 186

US Postal Service
Receipt for Certified Mail

Nadine Parr
1217 Georgina Avenue
Santa Monica, CA 90402

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	✓ PD
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

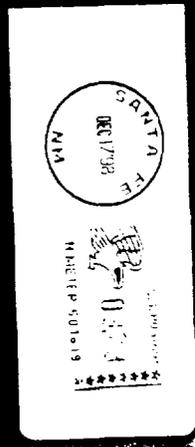
PS Form 3800, April 1995

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
 110 NORTH GUADALUPE STREET
 P.O. BOX 2208
 SANTA FE, NEW MEXICO 87504-2208

TO:
 Nadine Parr
 1217 Georgina Avenue
 Santa Monica, CA 90402

FIRST CLASS MAIL

2 559 572 186
MAIL



Z 559 572 187

US Postal Service
Receipt for Certified Mail

Morris Radman
999 Brush Hollow Road
Westbury, NY 11590

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
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	\$ 3.23
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:

Morris Radman
999 Brush Hollow Road
Westbury, NY 11590

4a. Article Number

Z 559 572 187

4b. Service type

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

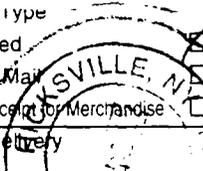
7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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



Thank you for using Return Receipt Service.

Z 559 572 188

US Postal Service
Receipt for Certified Mail

Patricia Ann Wolff Schaen
11 E. 86th Street, #2-A
New York, NY 10028

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Patricia Ann Wolff Schaen
11 E. 86th Street, #2-A
New York, NY 10028

4a. Article Number

Z 559 572 188

4b. Service Type

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

7. Date of Delivery

12/21

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

[Handwritten Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 189

US Postal Service
Receipt for Certified Mail

Melba V. Trobaugh
4305 N. Garfield, Suite 233
Midland, TX 79705

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Melba V. Trobaugh
4305 N. Garfield, Suite 233
Midland, TX 79705

4a. Article Number

Z 559 572 189

4b. Service Type

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

7. Date of Delivery

12-21-98 PM

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

[Handwritten Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail

Gerald N. Frank Estate
Morgan Guaranty Trust
New York, NY 10019

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

2 559 572 190
MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:
Gerald N. Frank Estate
Morgan Guaranty Trust
New York, NY 10019

FIRST CLASS MAIL

SANTA FE
CERTIFIED MAIL
APR 19 1995
110 NORTH GUADALUPE STREET
SANTA FE, NM 87504-2208

2 559 572 191

US Postal Service

Receipt for Certified Mail

William Horton
NationsBank #637603
Post Office Box 840738
Dallas, TX 75284

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

Z 559 572 192

US Postal Service
Receipt for Certified Mail

Samuel Luks
648 Broadway, Suite 505
New York, NY 10012-2314

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

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:

Samuel Luks
648 Broadway, Suite 505
New York, NY 10012-2314

5. Received By: (Print Name)
MARC GLICK

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

4a. Article Number
Z 559 572 192

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

7. Date of Delivery
12/21/94

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

Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 193

US Postal Service
Receipt for Certified Mail

William H. McNall
NationsBank #: 1112001
Post Office Box 840738
Dallas, TX 75284

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

William H. McNall
NationsBank #: 1112001
Post Office Box 840738
Dallas, TX 75284

5. Received By: (Print Name)
Kenneth Phelps

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

4a. Article Number
Z 559 572 193

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

7. Date of Delivery
12/21/94

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 194

US Postal Service

Receipt for Certified Mail

Erica Murov
999 Brush Hollow Road
Westbury, NY 11590

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Erica Murov
999 Brush Hollow Road
Westbury, NY 11590

4a. Article Number

Z 559 572 194

4b. Service type

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

7. Date of Delivery

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

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 195

US Postal Service

Receipt for Certified Mail

Robert W. Page
74874 Via Royale
Palm Desert, CA 92260

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Robert W. Page
74874 Via Royale
Palm Desert, CA 92260

4a. Article Number

Z 559 572 195

4b. Service type

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

7. Date of Delivery

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

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 176

US Postal Service
Receipt for Certified Mail

Ellen Palma
1471 Long Pond Road, Apt. 142
Rochester, NY 14626

Postage	\$ 78
Certified Fee	1 35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1 00
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3 23
Postmark or Date	

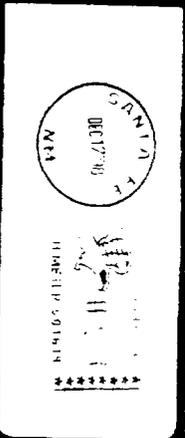
PS Form 3800, April 1995

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:
Ellen Palma
1471 Long Pond Road, Apt. 142
Rochester, NY 14626

FIRST CLASS MAIL

Z 559 572 176
MAIL



Z 559 572 197

US Postal Service
Receipt for Certified Mail

Bernice L. Rosenthal, Trustee
2195 East Avenue
Rochester, NY 14610

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Bernice L. Rosenthal, Trustee
2195 East Avenue
Rochester, NY 14610

4a. Article Number

Z 559 572 197

4b. Service type

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

7. Date of Delivery

12/23

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X Bernice L. Rosenthal, Jr

Z 559 572 198

US Postal Service
Receipt for Certified Mail

Morris & Babette Goldman Radman
999 Brush Hollow Road
Westbury, NY 11590

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

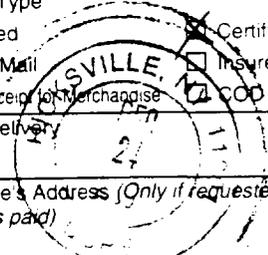
Morris & Babette Goldman Radman
999 Brush Hollow Road
Westbury, NY 11590

4a. Article Number
Z 559 572 198

4b. Service type

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

7. Date of Delivery



5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 199

US Postal Service
Receipt for Certified Mail

Judith Franklin Smith
401 El Cielito Road
Santa Barbara, CA 93105

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

Judith Franklin Smith
401 El Cielito Road
Santa Barbara, CA 93105

4a. Article Number
Z 559 572 199

4b. Service type

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

7. Date of Delivery

DEC 22 1998

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X Judith Franklin Smith

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Z 559 572 200

US Postal Service
Receipt for Certified Mail

Harvey H. Wachtel
24 Clover Lane
Roslyn Heights, NY 11577

PS Form 3800, April 1995

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	2-18
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Harvey H. Wachtel
24 Clover Lane
Roslyn Heights, NY 11577

4a. Article Number

Z 559 572 200

4b. Service type

- Registered
- Express Mail
- Certified
- Insured
- COD

7. Date of Delivery



5. Received By: (Print Name)

x H. Wachtel

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

US Postal Service
Receipt for Certified Mail

Carole Winter Estate
c/o William Crandall
161 East 72nd St.
New York, NY 10021

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

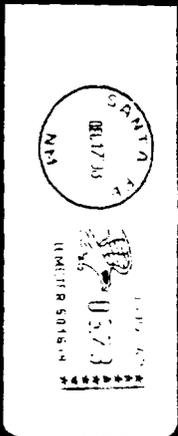
PS Form 3800 April 1995

CAMPBELL, CARB, BERGE & SERRIDAN, P.A.
110 NORTH CLADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:
 Carole Winter Estate
 c/o William Crandall
 161 East 72nd St.
 New York, NY 10021

FIRST CLASS MAIL

MAIL
Z 559 572 201



Z 559 572 202

US Postal Service
Receipt for Certified Mail

Yates Employees 87 Ltd.
105 South 4th Street
Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Yates Employees 87 Ltd.
105 South 4th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 202

4b. Service type

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

7. Date of Delivery

5. Received By: (Print Name)

JOANN GRIGGS

6. Signature: (Addressee or Agent)

Joann Griggs

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 203

US Postal Service
Receipt for Certified Mail

Calvin E. Staples
5121 McKinney Avenue
Dallas, TX 75205-3321

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Calvin E. Staples
5121 McKinney Avenue
Dallas, TX 75205-3321

4a. Article Number

Z 559 572 203

4b. Service type

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

7. Date of Delivery

12/22/95

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

x Vick Osborn

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 204

US Postal Service
Receipt for Certified Mail

John Boyle Trust
NationsBank #1071005
Post Office Box 840738
Dallas, TX 75283

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
John Boyle Trust
NationsBank #1071005
Post Office Box 840738
Dallas, TX 75283

4a. Article Number
Z 559 572 204

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

7. Date of Delivery
DEC 20 1996

5. Received By: (Print Name)
Chad Miller

6. Signature: (Addressee or Agent)
Chad Miller

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 205

US Postal Service
Receipt for Certified Mail

Dorothy Foster Rev. Trust
First National Bank of Artesia
Post Office Box AA
Artesia, NM 88211-7526

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Dorothy Foster Rev. Trust
First National Bank of Artesia
Post Office Box AA
Artesia, NM 88211-7526

4a. Article Number
Z 559 572 205

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

7. Date of Delivery
12-21-96

5. Received By: (Print Name)
D. Miller (Agent)

6. Signature: (Addressee or Agent)
D. Miller

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

NATIONSBANK
 PO BOX 830126
 DALLAS TX 75283-0126

Z 559 572 206

US Postal Service
Receipt for Certified Mail

Ruth W. Taylor
 NationsBank #1071003
 Post Office Box 840738
 Dallas, TX 75283

Postage	\$.78
Certified Fee	1.31
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showed to Whom & Date Delivered	J.J. 0
Return Receipt Shown to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23

PS Form 3800, April 1996

SIR/MADAM:

THIS CORRESPONDENCE IS BEING RETURNED DUE TO AN INSUFFICIENT ADDRESS AND/OR IMPROPER INFORMATION FOR US TO PROCESS.

PLEASE CONTACT NATIONSBANK AND ACQUIRE AN ASSOCIATE'S NAME AND INTERNAL MAIL CODE IN THE DEPARTMENT YOU WISH TO MAIL TO AND INCLUDE THE NAME AND MAIL CODE ON YOUR NEXT MAILING ENVELOPE.

THANK YOU.

JUL 22 5 55 /

<p>SENDER:</p> <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. 	<p>I also wish to receive the following services (for an extra fee):</p> <p>1 <input type="checkbox"/> Addressee's Address</p> <p>2 <input type="checkbox"/> Restricted Delivery</p> <p>Consult postmaster for fee</p>
	<p>3. Article Addressed to</p> <p>Ruth W. Taylor NationsBank #1071003 Post Office Box 840738 Dallas, TX 75283</p>
<p>5. Received By: (Print Name)</p>	<p>8. Addressee's Address (Only if requested and fee is paid)</p>
<p>6. Signature: (Addressee or Agent)</p> <p><i>x Yelva Coleman</i></p>	

PS Form 3811, December 1994 102595-36-8-0229 Domestic Return Receipt

Thank you for using Return Receipt Service

12/11/98

Z 559 572 207

US Postal Service
Receipt for Certified Mail

Leland Price, Inc.
2701 Clayton
Artesia, NM 88210

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

INSTRUCTIONS:

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.

Article Addressed to:

Leland Price, Inc.
2701 Clayton
Artesia, NM 88210

Received By: (Print Name)

Melissa Loya
Signature: (Addressee or Agent)

X Melissa Loya

4a. Article Number

Z 559 572 207

4b. Service Type

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

7. Date of Delivery

12-21-98

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

Z 559 572 208

US Postal Service
Receipt for Certified Mail

Enterloc Resources, Inc.
Post Office Box 1375
Roswell, NM 88202-1375

PS Form 3800, April 1995

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Enterloc Resources, Inc.
Post Office Box 1375
Roswell, NM 88202-1375

4a. Article Number
Z 559 572 208

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

7. Date of Delivery
12-21-98

5. Received By: (Print Name)
Tom Boyd

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

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 209

US Postal Service
Receipt for Certified Mail

Jack Halbert
Post Office Box 6990
Tyler, TX 75711

PS Form 3800, April 1995

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Jack Halbert
Post Office Box 6990
Tyler, TX 75711

4a. Article Number
Z 559 572 209

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

7. Date of Delivery
DEC 21 1998

5. Received By: (Print Name)
Jack Halbert

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

8. Addressee's Address (Only if requested and fee is paid)
DEC 21 1998

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 210

US Postal Service
Receipt for Certified Mail

Giebel Petroleum Ltd.
130 Spring Park, Suite 100
Midland, TX 79705

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Giebel Petroleum Ltd.
130 Spring Park, Suite 100
Midland, TX 79705

4a. Article Number

Z 559 572 210

4b. Service type

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

7. Date of Delivery

12-22-98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 211

US Postal Service
Receipt for Certified Mail

Florence M. Major
279 W. Strickland Drive
Del Rio, TX 78840-5729

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Florence M. Major
279 W. Strickland Drive
Del Rio, TX 78840-5729

4a. Article Number

Z 559 572 211

4b. Service type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X [Signature]

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 212

US Postal Service
Receipt for Certified Mail

Nancy Winter
c/o Elsa Riess
15 West 72nd Street, #3N
New York, NY 10023

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Nancy Winter
c/o Elsa Riess
15 West 72nd Street, #3N
New York, NY 10023

4a. Article Number
Z 559 572 212

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

7. Date of Delivery
12/21/98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X MARKIN AGBAYARI

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 213

US Postal Service
Receipt for Certified Mail

Warren Sallee
107 Rocket
Austin, TX 78734-3814

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Warren Sallee
107 Rocket
Austin, TX 78734-3814

4a. Article Number
Z 559 572 213

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

7. Date of Delivery
12-21-98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X Warren Sallee

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 214

US Postal Service

Receipt for Certified Mail

E. T. Boyle Trust
NationsBank #1071004
Post Office Box 840738
Dallas, TX 75283

PS Form 3800 April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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 4c
- 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:

E. T. Boyle Trust
NationsBank #1071004
Post Office Box 840738
Dallas, TX 75283

4a. Article Number

Z 559 572 214

4b. Service type

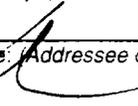
- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

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)

X 

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

CERTIFIED

Z 559 572 215

MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:

James T. Wood
1917 Rosewood Lane
Huntsville, TX

FIRST CLASS MAIL



U.S. POSTAGE
0323
HUNTSVILLE, TX 77319

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23

James T. Wood
1917 Rosewood Lane
Huntsville, TX 77340-4938

US Postal Service
Receipt for Certified Mail

Z 559 572 215

PS Form 3800, April 1995

Z 559 572 216

US Postal Service
Receipt for Certified Mail

W. R. Phillips
1120 Ridgcrest
Gallup, NM 87301

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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:

W. R. Phillips
1120 Ridgcrest
Gallup, NM 87301

4a. Article Number

Z 559 572 216

4b. Service Type

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

7. Date of Delivery

12-19-98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *W. R. Phillips*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 217

US Postal Service
Receipt for Certified Mail

R. L. Taylor, Jr.
NationsBank #1071001
Post Office Box 840738
Dallas, TX 75283

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 1995

Z 559 572 218

US Postal Service
Receipt for Certified Mail

Conoco, Inc.
Post Office Box 951063
Dallas, TX 75395

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Conoco, Inc.
Post Office Box 951063
Dallas, TX 75395

4a. Article Number
Z 559 572 218

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

7. Date of Delivery

5. Received By: (Print Name)
[Signature]

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

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 219

US Postal Service
Receipt for Certified Mail

Marathon Oil Company
Post Office Box 890882
Dallas, TX 75389-0882

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Marathon Oil Company
Post Office Box 890882
Dallas, TX 75389-0882

4a. Article Number
Z 559 572 219

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

7. Date of Delivery

5. Received By: (Print Name)
Robbie Johnson

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

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 220

US Postal Service
Receipt for Certified Mail

Louis Dreyfus Natural Gas
Post Office Box 960116
Oklahoma City, OK 73196-0116

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	4-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Louis Dreyfus Natural Gas
Post Office Box 960116
Oklahoma City, OK 73196-0116

4a. Article Number

Z 559 572 220

4b. Service Type

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

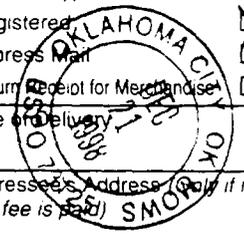
7. Date of Delivery

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *[Signature]*



PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 221

US Postal Service
Receipt for Certified Mail

Kimberly Kay Combs
Rt. 3, Box 140
Nonona, TX 76255

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Kimberly Kay Combs
Rt. 3, Box 140
Nonona, TX 76255

4a. Article Number

Z 559 572 221

4b. Service Type

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

7. Date of Delivery

DEC 22 1994

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 222

US Postal Service
Receipt for Certified Mail

Patricia Cherry Stewart
Post Office Box 578
Nonona, TX 76225-0578

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Patricia Cherry Stewart
Post Office Box 578
Nonona, TX 76225-0578

4a. Article Number

Z 559 572 222

4b. Service Type

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

7. Date of Delivery

DEC 22

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *Patricia Stewart*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 223

US Postal Service
Receipt for Certified Mail

George A. Chase
1908 Briscoe Ave.
Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

George A. Chase
1908 Briscoe Ave.
Artesia, NM 88210

4a. Article Number

Z 559 572 223

4b. Service Type

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

7. Date of Delivery

12-21-95

5. Received By: (Print Name)

✓ *George Chase*

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

6. Signature: (Addressee or Agent)

X ✓ *George Chase*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 224

US Postal Service

Receipt for Certified Mail

Titan Resources
500 W. Texas Ave.
Midland, TX 79701

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Titan Resources
500 W. Texas Ave.
Midland, TX 79701

4a. Article Number

Z 559 572 224

4b. Service Type

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

7. Date of Delivery

12-21-58

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

[Handwritten Signature]
PS Form 3800, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 225

US Postal Service

Receipt for Certified Mail

Amoco
200 N. Loraine St.
Midland, TX 79701

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Amoco
200 N. Loraine St.
Midland, TX 79701

4a. Article Number

Z 559 572 225

4b. Service Type

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

7. Date of Delivery

12-28

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

[Handwritten Signature]
PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 226

US Postal Service
Receipt for Certified Mail

OXY USA
Post Office Box 50250
Midland, TX 79710

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10-94
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee

3. Article Addressed to:

OXY USA
Post Office Box 50250
Midland, TX 79710

4a. Article Number

Z 559 572 226

4b. Service Type

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

7. Date of Delivery

12-21-90

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

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 227

US Postal Service
Receipt for Certified Mail

BTA
104 South Pecos
Midland, TX 79701

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

BTA
104 South Pecos
Midland, TX 79701

4a. Article Number

Z 559 572 227

4b. Service Type

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

7. Date of Delivery

DEC 22 1990

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

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 228

US Postal Service
Receipt for Certified Mail

Paul Slayton
Post Office Box 1936
Roswell, NM 88202

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Paul Slayton
Post Office Box 1936
Roswell, NM 88202

4a. Article Number

Z 559 572 228

4b. Service Type

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

7. Date of Delivery

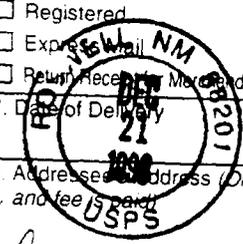
8. Addressee's Address (Only if requested and fee is paid)

5. Received By: (Print Name)

Ruby Wickertshaw

6. Signature: (Addressee or Agent)

X Ruby Wickertshaw



PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 229

US Postal Service
Receipt for Certified Mail

Ray Westall
Post Office Box 4
Loco Hills, NM 88255-0004

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ray Westall
Post Office Box 4
Loco Hills, NM 88255-0004

4a. Article Number

Z 559 572 229

4b. Service Type

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

7. Date of Delivery

12-21-98

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

5. Received By: (Print Name)

Judy Benoit

6. Signature: (Addressee or Agent)

X Judy Benoit

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

2 559 572 230

US Postal Service
Receipt for Certified Mail

Fred Allison
201 W. Wall Avenue
Midland, TX 79701

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Ret. Receipt Showing to Whom Date & Address / Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

2 559 572 230
MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
 110 NORTH GUADALUPE STREET
 P.O. BOX 2288
 SANTA FE, NEW MEXICO 87504-2208

TO:
 Fred Allison
 201 W. Wall Avenue
 Midland, TX 79701

FIRST CLASS MAIL

ATTEMPTED DELIVERY NOT KNOWN



Z 559 572 231

US Postal Service
Receipt for Certified Mail

Shell Oil Co.
200 N. Loraine Street
Midland, TX 79701

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-16
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Shell Oil Co.
200 N. Loraine Street
Midland, TX 79701

4a. Article Number

Z 559 572 231

4b. Service Type

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

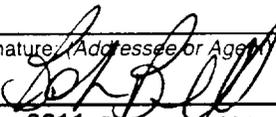
7. Date of Delivery

2 2 1994

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

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 232

US Postal Service
Receipt for Certified Mail

Merit Energy
12222 Merit Drive, Suite 1500
Dallas, TX 75251-3206

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Merit Energy
12222 Merit Drive, Suite 1500
Dallas, TX 75251-3206

4a. Article Number

Z 559 572 232

4b. Service Type

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

7. Date of Delivery

12-22-98

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *[Signature]*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 233

US Postal Service
Receipt for Certified Mail

Burk Royalty Co.
1000 Petroleum Building
Post Office Box BRC
Wichita Falls, TX 76307-7507

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Burk Royalty Co.
1000 Petroleum Building
Post Office Box BRC
Wichita Falls, TX 76307-7507

4a. Article Number

Z 559 572 233

4b. Service Type

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

7. Date of Delivery

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

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *DUSTAN MATHEWS*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 234

US Postal Service
Receipt for Certified Mail

J.C. Thompson
325 N. Saint Paul, Suite 4500
Dallas, TX 75201-3828

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and 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: J.C. Thompson 325 N. Saint Paul, Suite 4500 Dallas, TX 75201-3828	4a. Article Number Z 559 572 234
5. Received By: (Print Name)	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"/> CCD
	7. Date of Delivery 12 22 94
6. Signature: (Addressee or Agent) <i>X J.C. Thompson</i>	8. Addressee's Address (Only if requested and fee is paid)

PS Form 3800, April 1995

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 235

US Postal Service
Receipt for Certified Mail

Exxon
No. 25 Desta Drive
Midland, TX 79705

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom Date & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 1995

TO:

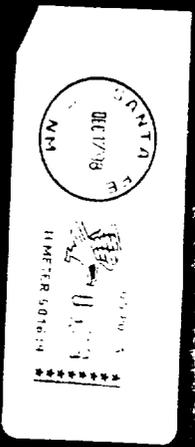
Exxon
No. 25 Desta Drive
Midland, TX 79705

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

FIRST CLASS MAIL

UNDELIVERED
CONTRACT NO. 87-10-100-0000
09/25/95

7 559 572 235
MAIL



Z 559 572 236

US Postal Service

Receipt for Certified Mail

B & W Oil Company
5944 Luther Ln., Suite 709
Dallas, TX 75225-5919

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

Z 559 572 237

US Postal Service

Receipt for Certified Mail

Ryder Scott Management
1100 Louisiana, Suite 3800
Houston, TX 77002

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Ryder Scott Management
1100 Louisiana, Suite 3800
Houston, TX 77002

4a. Article Number:

Z 559 572 237

4b. Service Type

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

7. Date of Delivery

12-22

5. Received By: (Print Name)

KEVIN DEAN

6. Signature: (Addressee or Agent)

Kevin Dean

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

Z 559 572 238

US Postal Service
Receipt for Certified Mail

Windfohr Oil Co.
Post Office Box 188
Loco Hills, NM 88255-0188

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Windfohr Oil Co.
Post Office Box 188
Loco Hills, NM 88255-0188

4a. Article Number

Z 559 572 238

4b. Service Type

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

7. Date of Delivery

12-21-98

5. Received By: (Print Name)

Bobby Claborn

6. Signature (Addressee or Agent)

Bobby Claborn

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Z 559 572 239

US Postal Service
Receipt for Certified Mail

Burnett Oil Co., Inc.
801 Cherry Street, Suite 1500
Interfirst Tower
Fort Worth, TX 76102-6815

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Burnett Oil Co., Inc.
801 Cherry Street, Suite 1500
Interfirst Tower
Fort Worth, TX 76102-6815

4a. Article Number

Z 559 572 239

4b. Service Type

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

7. Date of Delivery

DEC 2 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

102595-98-B-0229

Domestic Return Receipt

Z 559 572 240

US Postal Service
Receipt for Certified Mail

Armer Oil Co.
159 N. Riverside Dr.
Fort Worth, TX 76111-3911

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Armer Oil Co.
159 N. Riverside Dr.
Fort Worth, TX 76111-3911

4a. Article Number

Z 559 572 240

4b. Service type

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

7. Date of Delivery

JAN 6 1999

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *[Handwritten Signature]*

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 241

US Postal Service
Receipt for Certified Mail

Lobo Resources
2000 S. Dairy Ashford, Suite 41
Houston, TX 77077-5727

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Lobo Resources
2000 S. Dairy Ashford, Suite 410
Houston, TX 77077-5727

4a. Article Number

Z 559 572 241

4b. Service type

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

7. Date of Delivery

12/23/98

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *[Handwritten Signature]*

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 242

US Postal Service
Receipt for Certified Mail

J & G Enterprises Ltd. Co.
Post Office Box 100
Artesia, NM 88211-0100

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-19
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

J & G Enterprises Ltd. Co.
Post Office Box 100
Artesia, NM 88211-0100

4a. Article Number

Z 559 572 242

4b. Service Type

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

7. Date of Delivery

10-27-98

5. Received By: (Print Name)

JAMES E. GUY

6. Signature: (Addressee or Agent)

X James E. Guy

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 243

US Postal Service
Receipt for Certified Mail

Devon Energy Corp.
20 N. Broadway, Suite 1500
Oklahoma City, OK 73102-82

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1-19
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Devon Energy Corp.
20 N. Broadway, Suite 1500
Oklahoma City, OK 73102-8260

4a. Article Number

Z 559 572 243

4b. Service Type

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

7. Date of Delivery

12-18

5. Received By: (Print Name)

X Karen Acker

6. Signature: (Addressee or Agent)

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 244

US Postal Service
Receipt for Certified Mail

Cima Capitan Cima Energy
1111 Fannin, Suite 1490
Houston, TX 77002

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Cima Capitan Cima Energy
1111 Fannin, Suite 1490
Houston, TX 77002

4a. Article Number

Z 559 572 244

4b. Service Type

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

7. Date of Delivery

5. Received By: (Print Name)

John Codrington

6. Signature: (Addressee or Agent)

X *[Signature]*

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 572 245

US Postal Service
Receipt for Certified Mail

Yates Petroleum Corp.
105 South 4th Street
Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Yates Petroleum Corp.
105 South 4th Street
Artesia, NM 88210

4a. Article Number

Z 559 572 245

4b. Service Type

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

7. Date of Delivery

5. Received By: (Print Name)

JOANN GRIGGS

6. Signature: (Addressee or Agent)

X *[Signature]*

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 181 567 412

US Postal Service
Receipt for Certified Mail

Mack Energy Corporation
Post Office Box 960
Artesia, NM 88211-0960

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:
Mack Energy Corporation
Post Office Box 960
Artesia, NM 88211-0960

4a. Article Number
Z 181 567 412

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

7. Date of Delivery
12-21-98

5. Received By: (Print Name)
Lyle Hensley

6. Signature: (Addressee or Agent)
X *Lyle Hensley*

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 181 567 413

US Postal Service
Receipt for Certified Mail

Rodney Webb
Post Office Box 1125
Artesia, NM 88211-1125

PS Form 3800, April 1995

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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:

Rodney Webb
Post Office Box 1125
Artesia, NM 88211-1125

4a. Article Number

2181 567 413

4b. Service Type

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

7. Date of Delivery

12-21-9

5. Received By: (Print Name)

Sue Webb

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

6. Signature: (Addressee or Agent)

X Sue Webb

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 181 567 414

US Postal Service

Receipt for Certified Mail

Texaco Exploration & Production
Post Office Box 3109
Midland, TX 79702

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800 April 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:

Texaco Exploration & Production
Post Office Box 3109
Midland, TX 79702

4a. Article Number

2 181 567 414

4b. Service Type

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

7. Date of Delivery

APR 2 1995

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

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 181 567 419
 US Postal Service
Receipt for Certified Mail

C. Beal Family Trust for
 Kelly Beal
 104 South Pecos
 Midland, TX 79701

PS Form 3800, April 1995

Postage	\$ 78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
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):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

C. Beal Family Trust for
 Kelly Beal
 104 South Pecos
 Midland, TX 79701

4a. Article Number
 Z 181 567 419

4b. Service Type

Registered Certified
 Express Mail Insured
 Return Receipt for Merchandise COD

7. Date of Delivery
 DEC 23 1995

5. Received By: (Print Name)
 S. H. H. H.

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

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

PS Form 3811, December 1994

102595-98-B-0229 Domestic Return Receipt

PS Form 3800, April 1995

Z 181 567 420
 US Postal Service
Receipt for Certified Mail

Donald B. Anderson
 409 E. College Blvd.
 Roswell, NM 88202

Postage	\$.78
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 3.23
Postmark or Date	

PS Form 3800, April 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
3. Article Addressed to: Donald B. Anderson 409 E. College Blvd. Roswell, NM 88202	4a. Article Number Z 181 567 420	
	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 12-21-98	
5. Received By: (Print Name) MARINA MATHAN	8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) X Marina Mathan		

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service

2 181 567 277
US Postal Service
Receipt for Certified Mail

Kennedy Oil Co.

Artesia, NM 88210

PS Form 3800, April 1995

Postage	\$	74
Certified Fee		1.35
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to Whom & Date Delivered		1.10
Return Receipt Showing to Whom, Date, Address & Address		
TOTAL Postage & Fees	\$	3.23
Postmark or Date		

2 181 567 277
MAIL

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
110 NORTH GUADALUPE STREET
P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208

TO:

Kennedy Oil Co.
Artesia, NM 88210

FIRST CLASS MAIL

SANTA FE
DEC 17 1998
NM

SANTA FE
DEC 17 1998
NM

0021

1161119 501819

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

Case Nos. 12112 and 12113 Exhibit No. 8

Submitted by: GP II Energy, Inc.

Hearing Date: February 4, 1999

