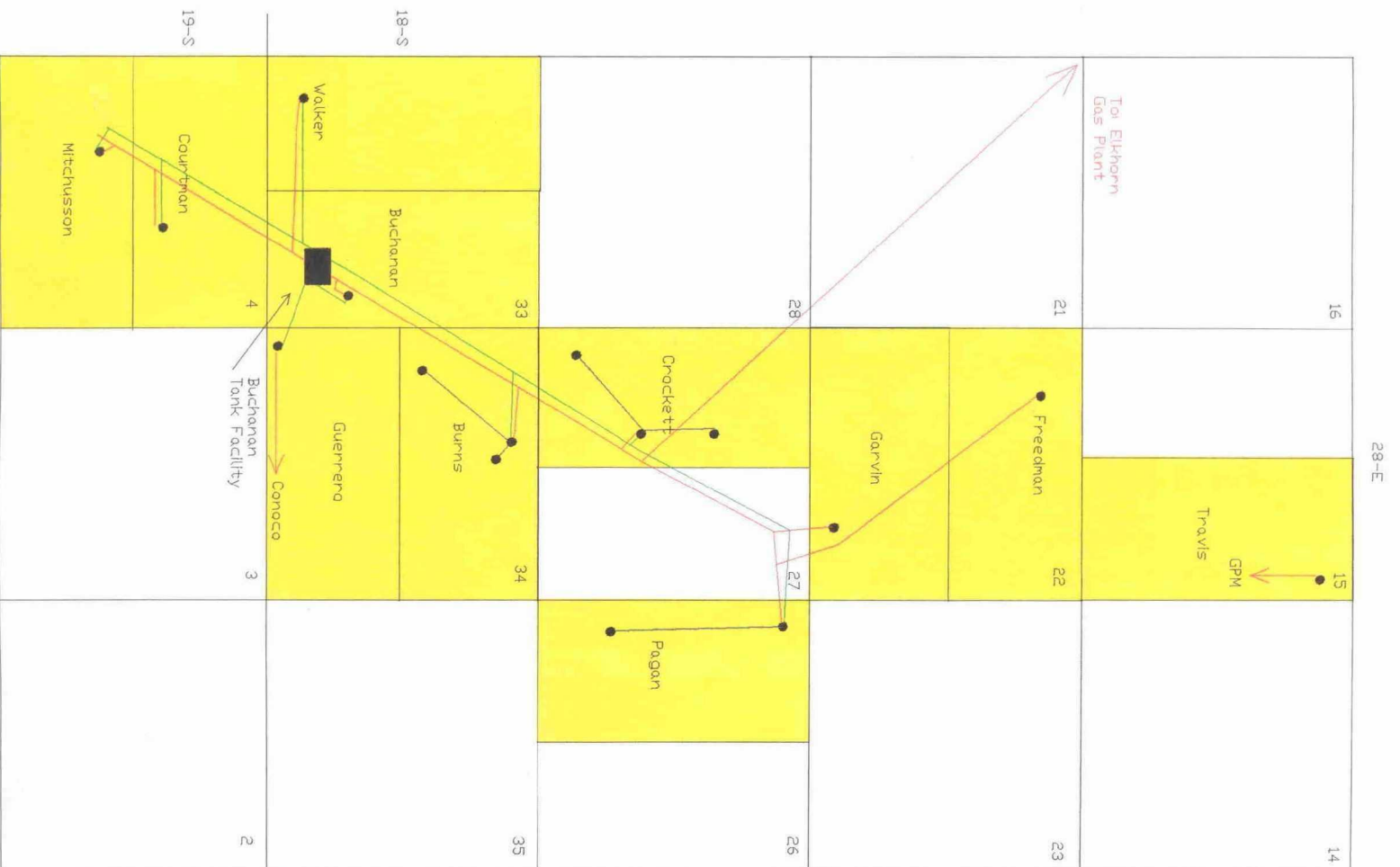


Marathon Oil Company Gathering Systems

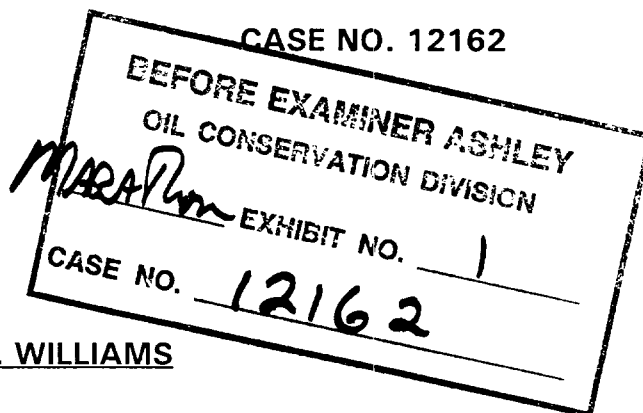


- Marathon Central Battery Liquid Trunk Line
- Marathon Lease Gathering System
- ARCO Gas Line

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

IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION
FOR THE PURPOSE OF CONSIDERING:

APPLICATION OF MARATHON OIL COMPANY
TO AMEND ORDER R-1112 WHICH PROVIDES
FOR SURFACE COMMINGLING
EDDY COUNTY, NEW MEXICO



AFFIDAVIT OF BRYAN L. WILLIAMS

STATE OF TEXAS §
 § ss.
COUNTY OF MIDLAND §

Before me, the undersigned authority, personally appeared **Bryan L. Williams**, who, being duly sworn, stated:

- A. My name is Bryan L. Williams. I am over the age of majority and am competent to make this Affidavit.
- B. My qualifications as an expert Petroleum Engineer are as follows:
 - 1. Education: B.S. in engineering from Texas A&M University, in 1995.
 - 2. Experience:
 - a. As a Petroleum Engineer employed by Marathon Oil Company ("Marathon"), I have been responsible for and involved in preparing the necessary documents for submittal to the New Mexico Oil Conservation Division for this case.

- b. I am personally knowledgeable and familiar with the facts and circumstances of this case and the following factual statements.
- C. My expert opinions are based on the following facts and events:

Chronological Summary of Significant Events

- 1. Marathon operates its Buchanan Gathering System which is a centralized facility comprising of 2,880 acres, more or less, utilizing a centralized tank battery located in Unit I of Section 33, T18S, R28E, which was approved by Division Order R-11112 entered December 15, 1998.
- 2. Marathon has drilled its Walker State Well No. 1 on its Walker "33" State Lease in the W/2 of Section 33, T18S, R28E, and desires to amend Order R-11112 so that production from this lease can be commingled with previous approved production from other leases which shall be stored at its centralized facility located in Unit I, Section 33, T18S, R28E, after lease measurement. See Exhibit "A."
- 3. The ownership in the W/2 of Section 33 is not identical with the ownership of the other commingled production because working interest and royalty ownership are not uniform.
- 4. Applicant also seeks the adoption of an administrative procedure to add and subtract existing and future wells to this facility without the requirement of notice and hearing.
- 5. In accordance with Division Rule 1207, Marathon has sent a copy of this application and notice for hearing to be held on April 15, 1999, to all the proper parties entitled to said notice.

Supporting Exhibits

- D. Attached are the following exhibit in support of this case:
 - 1. Exhibit "A" - Map outlining the wells and project area
 - 2. Exhibit "B" - Ownership plat/tabulation
 - 3. Exhibit "C" - Notice to affected parties

Recommendations

- E. I recommend that an order be entered which provides for approval of this operational change.

Opinions and Conclusions

- F. I have formed the following opinions based upon my expertise and upon the foregoing chronology of events:

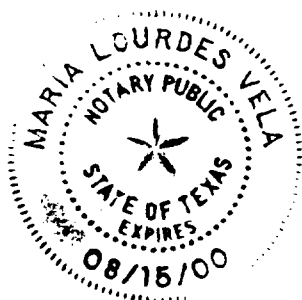
1. That approval of Marathon Oil Company's Application in Division Case 12162 is necessary in order to reduce the operational costs for these leases.

FURTHER AFFIANT SAITH NOT:


Bryan L. Williams

STATE OF TEXAS §
 § ss.
COUNTY OF MIDLAND §

SUBSCRIBED AND SWORN TO BEFORE ME this 23rd day of April, 1999, by Bryan L. Williams.



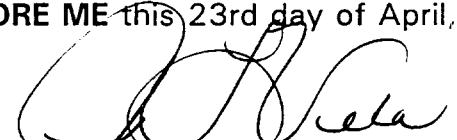

Notary Public: Maria Lourdes Vela
My commission expires: 08/15/00

EXHIBIT "A"

Marathon Oil Company Gathering Systems

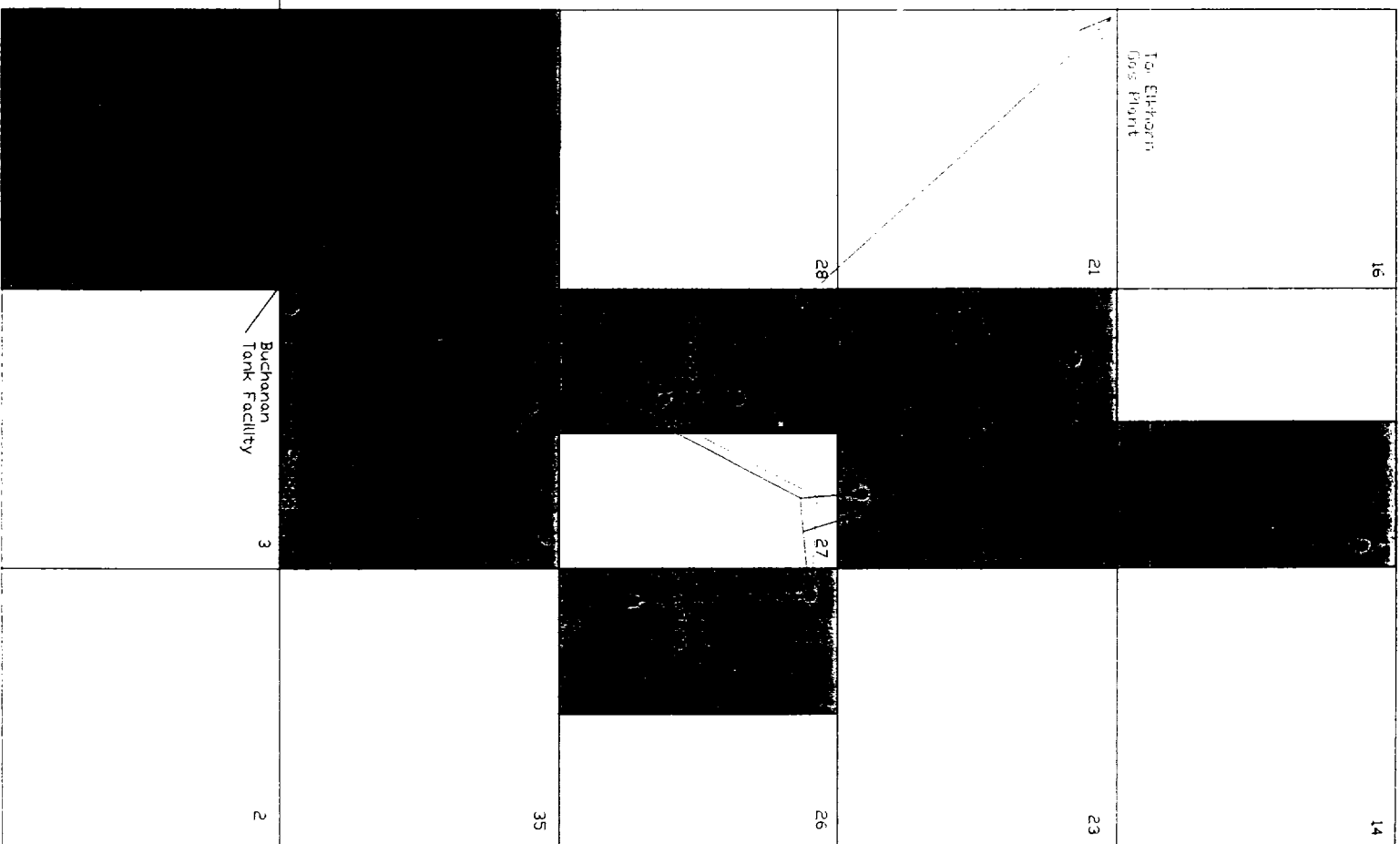


EXHIBIT "B"

to the

AFFIDAVIT

of

BRYAN L. WILLIAMS

(NMOCD Case No. 12162)

DAVID CROCKETT 27 STATE #1, 2, 3

<u>Owner Name</u>	<u>Interest Type</u>
Atlantic Richfield Company	ORI
Yates Brothers, a Partnership	ORI
Yates Petroleum Corporation	WI
State of New Mexico	RI
Marathon Oil Company	RI

BUCHANAN 33, STATE #1 & 2

<u>Owner Name</u>	<u>Interest Type</u>
Atlantic Richfield Company	ORI
Robert G. and Nancy S. Hanagan	ORI
Hugh E. Hanagan	ORI
Elk Oil Company	ORI
Joseph J. Kelly	ORI
Esther L. Kelly	ORI
John M. Kelly	ORI
Patricia Kelly Kyle	ORI
Mary Ann Twitty	ORI
Elizabeth A. Malone, Testamentary Trust	ORI
Ross L. Malone	ORI
Earl L. Malone, M.D.	ORI
New Mexico Western Minerals, Inc.	ORI
Cheryl White Derrick	ORI
Gretchen S. White	ORI
Theodore P. White	ORI
J. Phelps White, III	ORI
J. Phelps White, IV	ORI
Elizabeth White Nelson	ORI
Harvard Petroleum Corporation	ORI
Gilbert J. Eaton	ORI
Charles F. Malone Living Trust	ORI
Andersen-Malone Trust Dated 12/5/91	ORI
The Beveridge Company	ORI
Bravo I Limited Liability Co	ORI
LRW Corporation	ORI
Constance White	ORI
Elizabeth Eaton	ORI
Bean Family Limited Company	ORI
Dan M. Leonard	ORI
Robert K. Leonard	ORI
Lisa L. Durban	ORI
Gretchen S. White, Theodore White	ORI
Cheryl W. Derrick	
Enron Oil & Gas Company	WI
Roy G. Barton, Sr. & Opal Barton REVTR	WI
Yates Petroleum Corporation	WI
Read & Stevens, Inc.	WI
State of New Mexico	RI
Marathon Oil Company	

HENRY COURTMAN 4 STATE COM

<u>Owner Name</u>	<u>Interest Type</u>
L. R. French, Jr.	ORI
Lowe Partners LP	ORI
Robert G. & Nancy S. Hanagan	ORI
Hugh E. Hanagan	ORI
Elk Oil Company	ORI
Joseph J. Kelly	ORI
Esther L. Kelly	ORI
John M. Kelly	ORI
Patricia Kelly Kyle	ORI
Mary Ann Twitty	ORI
Elizabeth A. Malone, Testamentary Trust	ORI
Ross L. Malone, Testamentary Trust	ORI
Earl L. Malone, M.D.	ORI
New Mexico Western Minerals, Inc.	ORI
Cheryl White Derrick	ORI
Gretchen S. White	ORI
Theodore P. White	ORI
J. Phelps White, III	ORI
J. Phelps White, IV	ORI
Elizabeth White Nelson	ORI
Harvard Petroleum Corporation	ORI
Gilbert J. Eaton	ORI
Charles F. Malone Living Trust	ORI
Andersen-Malone Trust Dtd 12/5/91	ORI
The Beveridge Company	ORI
Bravo I Limited Liability Co	ORI
LRW Corporation	ORI
Constance White	ORI
Elizabeth Eaton	ORI
Bean Family Limited Company	ORI
Dan M. Leonard	ORI
Robert K. Leonard	ORI
Lisa L. Durban	ORI
Gretchen S. White, Theodore White, Cheryl W. Derrick	ORI
John Thoma	ORI
Enron Oil & Gas Company	WI
Roy G. Barton, Sr. & Opal Barton REVTR	WI
Yates Petroleum Corporation	WI
Read & Stevens, Inc.	WI
State of New Mexico	RI
Marathon Oil Company	RI

G. PAGAN 26 STATE #1 & #2

<u>Owner Name</u>	<u>Interest Type</u>
Faulconer 1996 Tx Lmt Liability Co	ORI
Dorothy H. Peterson	ORI
John W. Peterson	ORI
Robert L. Spears	ORI
State of New Mexico	RI
Marathon Oil Company	WI

SAMUEL BURNS 34 STATE #1, #2 & #3

<u>Owner Name</u>	<u>Interest Type</u>
Louis Dreyfus Natural Gas Corp.	ORI
Atlantic Richfield Company	ORI
KCS Medallion Resources, Inc.	ORI
Robert G. & Nancy S. Hanagan	ORI
Hugh E. Hanagan	ORI
Elk Oil Company	ORI
Joseph J. Kelly	ORI
Esther L. Kelly	ORI
John M. Kelly	ORI
Patricia Kelly Kyle	ORI
Mary Ann Twitry	ORI
Elizabeth A. Malone, Testamentary Trust c/o Baynard W. Malone	ORI
Ross L. Malone, Testamentary Trust c/o Baynard W. Malone	ORI
Earl L. Malone, M.D.	ORI
New Mexico Western Minerals, Inc.	ORI
Cheryl White Derrick	ORI
Gretchen S. White	ORI
Theodore P. White	ORI
J. Phelps White, III	ORI
J. Phelps White, IV	ORI
Elizabeth White Nelson	ORI
Harvard Petroleum Corporation	ORI
Gilbert J. Eaton	ORI
Charles F. Malone Living Trust	ORI
Andersen-Malone Trust Dtd 12/5/91	ORI
The Beveridge Company	ORI
Bravo I Limited Liability Co.	ORI
LRW Corporation	ORI
Constance White	ORI
Elizabeth Eaton	ORI
Bean Family Limited Company	ORI
Dan M. Leonard	ORI
Robert K. Leonard	ORI
Lisa L. Durban	ORI
Gretchen S. White, Theodore White	ORI
Cheryl W. Derrick	
Enron Oil & Gas Company	WI
Roy G. Barton, Sr. & Opal Barton REVTR	WI

SAMUEL BURNS 34 STATE #1, #2 & #3 - Cont'd

<u>Owner Name</u>	<u>Interest Type</u>
Read & Stevens, Inc.	WI
Yates Petroleum Corporation	WI
State of New Mexico	RI
Marathon Oil Company	WI

W. B. TRAVIS 15 STATE COM #1

<u>Owner Name</u>	<u>Interest Type</u>
Louis Dreyfus Gas Holdings, Inc.	ORI
Exxon Corporation	ORI
Atlantic Richfield Company	ORI
Devon Energy Corporation (Nevada)	ORI
Yates Brother A Partnership	ORI
Yates Petroleum Corporation	WI
State of New Mexico	RI
Marathon Oil Company	WI

GUERRERO #1

<u>Owner Name</u>	<u>Interest Type</u>
Louis Dreyfus Natural Gas Corp	ORI
Robert G. & Nancy S. Hanagan	ORI
Hugh E. Hanagan	ORI
Elk Oil Company	ORI
Joseph J. Kelly	ORI
Esther L. Kelly	ORI
John M. Kelly	ORI
Patricia Kelly Kyle	ORI
Mary Ann Twitty	ORI
Elizabeth A. Malone, Testamentary Trust c/o Baynard W. Malone	ORI
Ross L. Malone, Testamentary Trust c/o Baynard W. Malone	ORI
Earl L. Malone, M.D.	ORI
New Mexico Western Minerals, Inc.	ORI
Cheryl White Derrick	ORI
Gretchen S. White	ORI
Theodore P. White	ORI
J. Phelps White, III	ORI
J. Phelps White, IV	ORI
Elizabeth White Nelson	ORI
Harvard Petroleum Corporation	ORI
Gilbert J. Eaton	ORI
Charles F. Malone Living Trust	ORI
Andersen-Malone Trust Dtd 12/5/91	ORI
The Beveridge Company	ORI
Bravo I Limited Liability Co.	ORI
LRW Corporation	ORI
Constance White	ORI
Charles F. Malone	ORI
Bean Family Limited Company	ORI
Dan M. Leonard	ORI
Robert K. Leonard	ORI
Lisa L. Durban	ORI
State of New Mexico	RI
Enron Oil & Gas Company	WI
Atlantic Richfield Company	WI
Roy G. Barton, Sr. & Opal Barton REVTR	WI
Altura Energy, Ltd	WI
Read & Stevens, Inc.	WI
Yates Petroleum Corporation	WI

GUERRERO #1 - Cont'd

<u>Owner Name</u>	<u>Interest Type</u>
Harvey E. Yates Company	WI
Yates Energy Corporation	WI
S. P. Yates	WI
Cibola Energy Corporation	WI
Jalapeño Corporation	WI
Lillie M. Yates Estate	WI
Shabro Oil Ltd Co.	WI
Richard M. Yates	WI
St. Clair Yates, Jr. c/o Yates Petroleum Corp.	WI
SP & Estelle N. Yates 1976 Tst	WI
Marico Exploration, Inc.	WI
c/o Yates Petroleum Corp.	
Marathon Oil Company	WI

E MITCHUSSON 4 STATE #1

<u>Owner Name</u>	<u>Interest Type</u>
Atlantic Richfield Company	ORI
Robert G. & Nancy S. Hanagan	ORI
Hugh E. Hanagan	ORI
Elk Oil Company	ORI
Joseph J. Kelly	ORI
Esther L. Kelly	ORI
John M. Kelly	ORI
Patricia Kelly Kyle	ORI
Mary Ann Twitty	ORI
Elizabeth A. Malone, Testamentary Trust c/o Baynard W. Malone	ORI
Ross L. Malone, Testamentary Trust c/o Baynard W. Malone	ORI
Earl L. Malone, MD	ORI
New Mexico Western Minerals, Inc.	ORI
Cheryl White Derrick	ORI
Gretchen S. White	ORI
Theodore P. White	ORI
J. Phelps White, III	ORI
J. Phelps White, IV	ORI
Elizabeth White Nelson	ORI
Harvard Petroleum Corporation	ORI
Gilbert J. Eaton	ORI
Charles F. Malone Living Trust	ORI
Andersen-Malone Trust Dtd 12/5/91	ORI
The Beveridge Company	ORI
Bravo I Limited Liability Co.	ORI
LRW Corporation	ORI
Constance White	ORI
Elizabeth Eaton	ORI
Bean Family Limited Company	ORI
Dan M. Leonard	ORI
Robert K. Leonard	ORI
Lisa L. Durban	ORI
Gretchen S. White, Theodore White Cheryl W. Derrick	ORI
Enron Oil & Gas Company	WI
Roy G. Barton, Sr. & Opal Barton Revtr	WI
Read & Stevens, Inc.	WI
Yates Petroleum Corporation	WI
State of New Mexico	RI
Marathon Oil Company	WI

JAMES GARVIN 22 STATE #1

<u>Owner Name</u>	<u>Interest Type</u>
Wendell W. Iverson	ORI
Exxon Corporation	ORI
Atlantic Richfield Company	ORI
S.J. Iverson, Jr.	ORI
Patsy Iverson Page	ORI
Phoebe Welch Shelton	ORI
Yates Brothers, a Partnership	ORI
Wendell W. Iverson, Trustee of the SJI, Jr. 1990 Trust	ORI
Wendell W. Iverson, Trustee of the PIP 1990 Trust	ORI
Wendell W. Iverson, Trustee of the WWI 1990 Trust	ORI
State of New Mexico	RI
Marathon Oil Company	WI
Louis Dreyfus Natural Gas Corp	WI
Marshall & Winston, Inc.	WI
Yates Petroleum Corporation	WI
Petro Quest Exploration	WI
Logro Corporation	WI

FREEDMAN 22 STATE #1

<u>Owner Name</u>	<u>Interest Type</u>
Exxon Corporation	ORI
Atlantic Richfield Company	ORI
Yates Brothers, a Partnership	ORI
Daneille Smith Ficke	ORI
Vilas P Sheldon Marital Trust	ORI
Elmer L. Smith	ORI
Howard Lindsay Smith	ORI
Randall Lewis Smith	ORI
State of New Mexico	RI
Marathon Oil Company	WI
Louis Dreyfus Natural Gas Corp.	WI
Yates Petroleum Corporation	WI
S.P. Yates	WI

A. WALKER 33 STATE COM. #1

<u>Owner Name</u>	<u>Interest Type</u>
The Rudman Partnership	ORI
Alvron Sater	ORI
Roy G. Barton, Sr. and Opal Barton Revocable Trust Dtd 1/28/92	WI
Enron Oil & Gas Company	ORI
Read & Stevens, Inc.	WI
Robert J. Leonard	ORI
Andersen-Malone Trust Dtd 12/5/91	ORI
Bean Family Limited Company	ORI
Cheryl W. Derrick	ORI
Elizabeth Eaton	ORI
Gilbert J. Eaton	ORI
Hugh E. Hanagan	ORI
Robert G. Hanagan	ORI
Harvard Petroleum Corporation	ORI
Esther L. Kelly	ORI
John Michael Kelly	ORI
Joseph J. Kelly	ORI
Patricia Kelly Kyle	ORI
Elizabeth A. Malone Testamentary Trust for the benefit of Edna M. Schwartz	ORI
Baynard W. Malone, Trustee u/w/o Ross L. Malone	ORI
Charles F. Malone Living Trust	ORI
Earl L. Malone, M.D.	ORI
Elizabeth White Nelson	ORI
New Mexico Western Minerals, Inc.	ORI
Mary Ann Twitty	ORI
Western Reserves Oil Company	ORI
Constance A. White	ORI
Gretchen S. White	ORI
Gretchen S. White, and/or Theodore P. White and Cheryl White Derrick	ORI
J. Phelps White, III	ORI
J. Phelps White, IV	ORI
Theodore P. White	ORI
Hanagan Properties	ORI
Seven W. Resources, Inc.	ORI
State of New Mexico	RI
Elk Oil Company	ORI
Marathon Oil Company	WI

EXHIBIT "C"

KELLAHIN AND KELLAHIN

ATTORNEYS AT LAW

EL PATIO BUILDING

117 NORTH GUADALUPE

POST OFFICE BOX 2286

SANTA FE, NEW MEXICO 87504-2286

TELEPHONE (505) 982-4286
TELEFAX (505) 982-2047

W. THOMAS KELLAHIN*

*NEW MEXICO BOARD OF LEGAL SPECIALIZATION
RECOGNIZED SPECIALIST IN THE AREA OF
NATURAL RESOURCES-OIL AND GAS LAW

JASON KELLAHIN (RETIRED 1991)

March 25, 1999

TO: NOTICE OF THE HEARING OF THE FOLLOWING NEW MEXICO OIL CONSERVATION DIVISION CASE:

**Re: Application of Marathon Oil Company to amend
Order R-11112 for pool and lease commingling
(Buchanan Centralized Facility)
Eddy County, New Mexico.**

Marathon Oil Company ("Marathon") has applied to the New Mexico Oil Conservation Division ("Division") to amend Division Order R-11112 which previously approved Marathon's application for the surface commingling of production from the North Illinois Camp-Morrow Gas, Illinois Camp-Morrow Gas, North Turkey Track-Morrow Gas, Travis-Wolfcamp Gas and Travis Upper Pennsylvanian Gas Pool and the off-lease measurement and storage of that production for its Buchanan Consolidated Facility and Gathering Systems. See attached plat. This facility has the capability to satellite test and lease meter liquids sent to the battery located in the SE/4 of Section 33 and the gas sold from the individual leases.

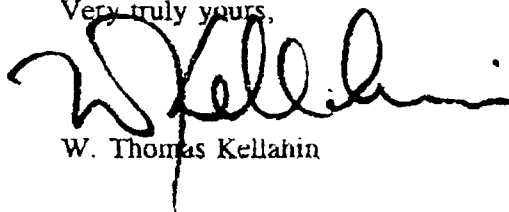
This amendment would allow Marathon to expand its prior approval to include the Walker State Well No. 1 drilled in the SW/4 of Section 33, T18S, R28E and to adopt an administrative procedure to add or subtract existing or future wells to this facility without notice and hearing.

This case has been set for hearing on the Division Examiner's docket now scheduled for April 15, 1999. The hearing will be held at the Division hearing room located at 2040 South Pacheco, Santa Fe, New Mexico.

Marathon believes that the proposed amendment will allow it to continue to operate this project in an efficient manner. If you, agree, then there is no need for you to take any action. If you object to the Division approving this application, then you need to follow the following procedure: You have the right to appear at the hearing and participate in this case, including the right to present evidence in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

Pursuant to the Division's Memorandum 2-90, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 4:00 PM on Friday, April 9, 1999 with a copy delivered to the undersigned.

Very truly yours,



W. Thomas Kellahin

1-22-55, 12.55, INFORMATION OF 12/11/55, 1,000 000 27-11 11 11



The Karami Privatization Bill, 1999, 2000

INFORM:
 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:

Earl L. Malone, NID
 2301 Corner Court
 Roswell, NM 88201-3411

4a. Article Number

Z 445 056 800

4b. Service Type

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

7. Date of Delivery

4/16/99

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

mk 03/23/99

Signature (Addressee or Agent)
 X *[Signature]*
 PS Form 3811, December 1994

10255-96-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

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.

Article Addressed to:

New Mexico Western Minerals, Inc.
 P. O. Box 1738
 Roswell, NM 88202-1738

4a. Article Number

Z 445 056 801

4b. Service Type

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

7. Date of Delivery

3-25-99

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

mk 03/23/99

Signature (Addressee or Agent)
 X *[Signature]*
 PS Form 3811, December 1994

10255-96-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

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.

Article Addressed to:

Cheryl White Demick
 4006 Balcones Ct. Apt. 20
 El Paso, TX 79912-3340

4a. Article Number

Z 445 056 802

4b. Service Type

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

7. Date of Delivery

3/23/99

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

mk 3/23/99

Signature (Addressee or Agent)
 X *[Signature]*
 PS Form 3811, December 1994

10255-96-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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

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

Article Addressed to:

Gretchen S. White
 700 North Kentucky
 Roswell, NM 88201-4822

4a. Article Number

Z 445 056 803

4b. Service Type

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

7. Date of Delivery

4/5/99

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

mk 3/23/99

Signature (Addressee or Agent)
 X *[Signature]*
 PS Form 3811, December 1994

10255-96-0229 Domestic Return Receipt

1. Complete items 1 and 2 for additional services.
2. Complete items 3, 4a, and 4b.
3. Print your name and address on the reverse of this form so that we can return this card to you.
4. Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. Write "Return Receipt Requested" on the mailpiece below the article number.
6. 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.

Addressed to:

Theodore P. White
P O Box 511
Roswell, NM 88202-0511

4a. Article Number
2, 445 056 804
4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☒ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

4/5/99

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

Received By (Print Name)
Theodore P. White
Signature (Address or Agent)
Theodore P. White
PS Form 3811, December 1994

10256-96-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

1. Complete items 1 and 2 for additional services.
2. Complete items 3, 4a, and 4b.
3. Print your name and address on the reverse of this form so that we can return this card to you.
4. Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. Write "Return Receipt Requested" on the mailpiece below the article number.
6. 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.

Addressed to:

Philips White, III
P O Box 871
Roswell, NM 88202-0871

4a. Article Number
2, 445 056 805
4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

3-25-99

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

Received By (Print Name)
Signature (Address or Agent)
Philips White
PS Form 3811, December 1994

10256-96-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:

1. Complete items 1 and 2 for additional services.
2. Complete items 3, 4a, and 4b.
3. Print your name and address on the reverse of this form so that we can return this card to you.
4. Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. Write "Return Receipt Requested" on the mailpiece below the article number.
6. 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:

J J Iverson, Jr.
1528 Sinclair
Midland, TX 79705-8422

4a. Article Number
2, 445 056 806
4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

3-23

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

Received By (Print Name)
Signature (Address or Agent)
J J Iverson, Jr.
PS Form 3811, December 1994

10256-96-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

1. Complete items 1 and 2 for additional services.
2. Complete items 3, 4a, and 4b.
3. Print your name and address on the reverse of this form so that we can return this card to you.
4. Attach this form to the front of the mailpiece, or on the back if space does not permit.
5. Write "Return Receipt Requested" on the mailpiece below the article number.
6. 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:

Wendell W Iverson, Ind Tr Co, Inc
PIP (199) Trust Co
P O Box 10508
Midland, TX 79702-0508

4a. Article Number
2, 445 056 807
4b. Service Type
☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

3-23

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

Received By (Print Name)
Signature (Address or Agent)
Wendell W Iverson, Ind Tr Co, Inc
PS Form 3811, December 1994

10256-96-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

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 the 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:

Patsy Iverson Page
 1153 Mainlands Vista Way
 LaJolla, CA 92037-6210

4a. Article Number
 Z 445 056 808

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)
 mk 3/23/99

Received By: (Print Name)
 Patsy Iverson Page
 Signature (Address or Agent)
 X *Patsy Iverson Page*

PS Form 3811, December 1994

102395 9B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

ADDRESSEE DECEASED
(Green Card Not Returned)

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 the 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:

Constance White
 7017 Lawler Ridge
 Houston, TX 77055-7010

4a. Article Number
 Z 445 056 810

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)

Received By: (Print Name)
 Constance White
 Signature (Address or Agent)
 X *Constance White*

PS Form 3811, December 1994

102395 9B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

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 the 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:

L.R.W. Corporation
 P.O. Box 168
 Midland, TX 79702-0168

4a. Article Number
 Z 445 056 809

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)
 mk 2/23/99

Received By: (Print Name)
 L.R.W. Corporation
 Signature (Address or Agent)
 X *L.R.W. Corporation*

PS Form 3811, December 1994

102395 9B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

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 the 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:

Robert U. Flanagan & Nancy S. Hor
 P.O. Box 1887
 Santa Fe, NM 87501-1887

4a. Article Number
 Z 445 056 811

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)

Received By: (Print Name)
 Robert U. Flanagan & Nancy S. Hor
 Signature (Address or Agent)
 X *Robert U. Flanagan & Nancy S. Hor*

PS Form 3811, December 1994

102395 9B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER: Complete items 1 and/or 2 for additional services. a. Complete items 3, 4a, and 4b. b. Print your name and address on the reverse of this form so that we can return the card to you. c. Attach this form to the front of the mailpiece, or on the back if space does not permit. d. 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: Joseph J. Kelly P O Box 310 Roswell, NM 88202-0310		4a. Article Number Z 445 056 812	
5. Received By: (Print Name) Hugh E. Flanagan P O Box 329 Roswell, NM 88202-0329		4b. Service Type ☐ Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Merchandise ☐ COD 7. Date of Delivery 3/23/99 mk	
6. Signature (Addressee or Agent)  PS Form 3811, December 1994		8. Addressee's Address (Only if requested and fee is paid) 1/23/99 mk Domestic Return Receipt	

Thank you for using Return Receipt Service.

RETURN ADDRESS completed on the reverse side.

SENDER: Complete items 1 and/or 2 for additional services. a. Complete items 3, 4a, and 4b. b. Print your name and address on the reverse of this form so that we can return the card to you. c. Attach this form to the front of the mailpiece, or on the back if space does not permit. d. 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: Esther L. Kelly P O Box 310 Roswell, NM 88202-0310		4a. Article Number Z 445 056 815	
5. Received By: (Print Name) Elit Oil Company P O Box 310 Roswell, NM 88202-0310		4b. Service Type ☐ Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Merchandise ☐ COD 7. Date of Delivery 3/23/99 mk	
6. Signature (Addressee or Agent)  PS Form 3811, December 1994		8. Addressee's Address (Only if requested and fee is paid) 3/23/99 mk Domestic Return Receipt	

Thank you for using Return Receipt Service.

RETURN ADDRESS completed on the reverse side.

SENDER:

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

Article Addressed to:

John M Kelly
 P O Box 310
 Roswell NM 88202-0310

Received By: (Print Name)

Signature (Addressee or Agent)

PS Form 3811, December 1994

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

4a Article Number

Z 445 056 816

4b Service Type

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

7 Date of Delivery

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

mk 3/23/99

10256 99 B 0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:

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

Article Addressed to:

Patricia Kelly Kyle
 1508 Wilmington Ave.
 Richmond, VA 21227-4430

Received By: (Print Name)

Signature (Addressee or Agent)

PS Form 3811, December 1994

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

4a Article Number

Z 445 056 817

4b Service Type

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

7 Date of Delivery

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

3/23/99 mk

10256 99 B 0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:

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

Article Addressed to:

Elizabeth A. Malone Test Tr
 c/o Baynard W. Malone
 P O Box 87
 Roswell, NM 88202-0087

Received By: (Print Name)

Signature (Addressee or Agent)

PS Form 3811, December 1994

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

4a Article Number

Z 445 056 819

4b Service Type

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

7 Date of Delivery

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

3/23/99

10256 99 B 0229 Domestic Return Receipt

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 the 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:

Ross L. Malone Test Tr.
 c/o Baynard W. Malone
 P O Box 87
 Roswell, NM 88202-0877

4a. Article Number
Z 445 056 820

4b. Service Type

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

7. Date of Delivery
 3/23/99
 8. Addressee's Address (Only if requested and fee is paid)
 NM 88202-0877
 U.S.D.

Thank you for using Return Receipt Service.

Form 3811, December 1994

10235 9e-8-0229

Domestic Return Receipt

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 the 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:

Elizabeth White Nelson
 P O Box 871
 Roswell, NM 88202-0871

4a. Article Number
Z 445 056 822

4b. Service Type

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

7. Date of Delivery
 3-25-99
 8. Addressee's Address (Only if requested and fee is paid)

Thank you for using Return Receipt Service.

Form 3811, December 1994

10235 9e-8-0229

Domestic Return Receipt

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 the 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:

Phelps White, IV
 P O Box 1413
 Roswell, NM 88202-1413

4a. Article Number
Z 445 056 821

4b. Service Type

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

7. Date of Delivery
 3-25-99
 8. Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlc

Is your RETURN ADDRESS completed on the reverse side?

Form 3811, December 1994

10235 9e-8-0229

Domestic Return Receipt

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 the 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:

Harvard Petroleum Corporation
 P O Box 936
 Roswell, NM 88202-0936

4a. Article Number
Z 445 056 823

4b. Service Type

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

7. Date of Delivery
 3-25-99
 8. Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlc

Is your RETURN ADDRESS completed on the reverse side?

Form 3811, December 1994

10235 9e-8-0229

Domestic Return Receipt

SENDER:

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

3. Article Addressed to:

1. ☐ Addressed to the following services (for an extra fee):
 2. ☐ Restricted Delivery
 Consult postmaster for fee.

Received By (Print Name)
 Gilbert J. Eaton
 461 Rittenhouse Blvd
 Jeffersonville, PA 19403-3382

Signature (Addressed or Agent)
G. J. Eaton

S Form 3811, December 1994

4a. Article Number
 2 445 056 824

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

7. Date of Delivery
 3/23/99

8. Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlc

102595-98 B-6229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

3. Article Addressed to:

1. ☐ Addressed to the following services (for an extra fee):
 2. ☐ Restricted Delivery
 Consult postmaster for fee.

Received By (Print Name)
 Charles F. Malone Living Trust
 Charles F. Malone/MT T. Malone, Jr
 P O Drawer 700
 Roswell, NM 88202-0700

Signature (Addressed or Agent)
C. F. Malone

S Form 3811, December 1994

4a. Article Number
 2 445 056 825

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

7. Date of Delivery
 3/23/99

8. Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlc

102595-98 B-6229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

3. Article Addressed to:

1. ☐ Addressed to the following services (for an extra fee):
 2. ☐ Restricted Delivery
 Consult postmaster for fee.

Received By (Print Name)
 Anderson-Malone Trust did 127791
 Baynard W. Malone/Marlou A. Malon
 P O Box 87
 Roswell, NM 88202-0087

Signature (Addressed or Agent)
W. Malone

S Form 3811, December 1994

4a. Article Number
 2 445 056 826

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

7. Date of Delivery
 3/23/99

8. Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlc

102595-98 B-6229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

3. Article Addressed to:

1. ☐ Addressed to the following services (for an extra fee):
 2. ☐ Restricted Delivery
 Consult postmaster for fee.

Received By (Print Name)
 The Beverage Company
 P O Box 993
 Midland, TX 79702-0993

Signature (Addressed or Agent)
W. Beverage

S Form 3811, December 1994

4a. Article Number
 2 445 056 827

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

7. Date of Delivery
 3/23/99

8. Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlc

102595-98 B-6229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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

Thank you for using Return Receipt Service.

Bravo I Limited Liability Co.
 P O Box 2160
 Hobbs, NM 88241-2160

Received By (Print Name)

Signature (Addressee or Agent)

S Form 3811, December 1994

102535-93-8-0229

Domestic Return Receipt

4a. Article Number

Z 445 056 828

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7 Date of Delivery

3/23/99

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

3/23/99

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

Lowe Pottery E.P.
 Dept 5
 P O Box 4887
 Houston, TX 77210-4887

4a. Article Number

Z 445 056 829

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7 Date of Delivery

3/23/99

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

3/23/99

PS Form 3811, December 1994

102535-93-8-0229

Domestic Return Receipt

Received By (Print Name)

Signature (Addressee or Agent)

PS Form 3811, December 1994

102535-93-8-0229

Domestic Return Receipt

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 the card to you.
 Attach this form to the front of the mailpiece, or on the back if space does not permit.
 Please "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:

Robert K. Leonard
 P O Box 332
 Midland, TX 79702-0332

4a. Article Number

Z 445 056 830

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7 Date of Delivery

3/23/99

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

3/23/99

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

Lisa L. Durban
 P O Box 400
 Roswell, NM 88202-0400

4a. Article Number

Z 445 056 831

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7 Date of Delivery

3/23/99

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

3/23/99

PS Form 3811, December 1994

102535-93-8-0229

Domestic Return Receipt

Received By (Print Name)

Signature (Addressee or Agent)

PS Form 3811, December 1994

102535-93-8-0229

Domestic Return Receipt

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.

Article Addressed to:

4a. Article Number

Z 445 056 832

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

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

3/23/99 mk

Received By: (Print Name)

Signature (Address or Agent)

PS Form 3811, December 1994

10255 90-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

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.

Article Addressed to:

4a. Article Number

Elizabeth Eron

2121 East Biscayne Court

Highland Ranch, CO 80126-1019

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

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

PS Form 3811, December 1994

10255 90-0229

Domestic Return Receipt

Received By: (Print Name)

Signature (Address or Agent)

PS Form 3811, December 1994

10255 90-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

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.

Article Addressed to:

4a. Article Number

Z 445 056 834

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

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

3/23/99 mk

Received By: (Print Name)

Signature (Address or Agent)

PS Form 3811, December 1994

10255 90-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

Article Addressed to:

4a. Article Number

Z 445 056 835

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

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

3/23/99 mk

Received By: (Print Name)

Signature (Address or Agent)

PS Form 3811, December 1994

10255 90-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

Z 445 056 836

**IS Postal Service
Receipt for Certified Mail**
To Insurance Coverage Provider
Do not use for International Mail (See Form 1)

Marion C. Welch
302 Hermosa Dr
Aptos, NM 88210

**RE-SENT UNDER NUMBER:
Z 445 056 875**
(Signed Green Card Returned)

9156878307

No.	
Rate	
Date	
Address	
TOTAL Postage & Fees	\$
Postmark or Date	

02:58pm

From-MARATHON OIL COMPANY

04-28-99

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.

Article Addressed to:
Marshall & Winston, Inc
P O Box 50880
Midland, TX 79710-0580

Received By (Print Name):
3/23/99 mk

Signature (Addressee or Agent):
PS Form 3811, December 1994

4a. Article Number: Z 445 056 838

4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery: 3/23/99 mk

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

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

Thank you for using Return Receipt Service.

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.

Article Addressed to:
Logio Corporation
P O Box 261324
Plano, TX 75026-1324

Received By (Print Name):

Signature (Addressee or Agent):
PS Form 3811, December 1994

4a. Article Number: Z 445 056 837

4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery: 3-27-99

8. Addressee's Address (Only if requested and fee is paid):
3/23/99 mk

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

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.

Article Addressed to:
Petro-Quest Exploration
P O Box 10016
Midland, TX 79702-7016

Received By (Print Name):

Signature (Addressee or Agent):
PS Form 3811, December 1994

4a. Article Number: Z 445 056 839

4b. Service Type:
☐ Registered
☐ Express Mail
☐ Return Receipt for Merchandise
☐ COD

7. Date of Delivery: 3/23/99 mk

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

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

SENDER:

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

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

Erma Lowe
 c/o Maratho, Inc
 P O Box 4887
 Houston, TX 77210-4887

4a Article Number
Z 445 056 840**4b Service Type**

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

7 Date of Delivery

3-23-99

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

3/23/99

Received By (Print Name)
 Erma Lowe
 Signature (Addressee or Agent)
 Form 3811, December 1994

Form 3811, December 1994

102365-90-0229 Domestic Return Receipt

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.

Article Addressed to

Maratho, Inc.
 P O Box 4887
 Houston, TX 77210-4887

4a Article Number
Z 445 056 841**4b Service Type**

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

7 Date of Delivery

3-23-99

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

3/23/99

Received By (Print Name)
 Maratho, Inc.
 Signature (Addressee or Agent)
 Form 3811, December 1994

Form 3811, December 1994

102365-90-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

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.

Article Addressed to

MRL Partners, Inc
 c/o Maratho, Inc.
 P O Box 4887
 Houston, TX 77210-4887

4a Article Number
Z 445 056 842**4b Service Type**

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

7 Date of Delivery

3-23-99

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

3/23/99

Received By (Print Name)

Signature (Addressee or Agent)
 Form 3811, December 1994

Form 3811, December 1994

102365-90-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

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

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

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

Article Addressed to

Faulconer 1996 LLC
 c/o Vermont Faulconer
 P O Box 7995
 Tyler, TX 75711-7995

4a Article Number
Z 445 056 843**4b Service Type**

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

7 Date of Delivery

3-23-99

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

3/23/99

Received By (Print Name)

Signature (Addressee or Agent)
 Form 3811, December 1994

Form 3811, December 1994

102365-90-0229 Domestic Return Receipt

PS Form 3811, December 1994

1. Article Addressed to:

L R Freckel Jr
P O Box 11327
Midland TX 79702-8327

2. Article Number: 2 445 056 846

3. Service Type: Registered ☒ Express Mail ☐ Insured ☐ Certified ☐ Return Receipt for Merchandise ☐ COD ☐

4. Delivery: 3/23/99 mtk

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

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

7. Date of Delivery: 3/23/99 mtk

8. Addressee's Address (Only if requested):

9. Also wish to receive the following services (for an extra fee):

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

1025 95 98 8 0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

1. Article Addressed to:

Allura Energy Ltd
P O Box 4291
Houston, TX 77210-4291

2. Article Number: 2 445 056 846

3. Service Type: Registered ☒ Express Mail ☐ Insured ☐ Certified ☐ Return Receipt for Merchandise ☐ COD ☐

4. Delivery: 3/23/99 mtk

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

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

7. Date of Delivery: 3/23/99 mtk

8. Addressee's Address (Only if requested):

9. Also wish to receive the following services (for an extra fee):

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

1025 95 98 8 0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

US Postal Service

Receipt for Certified Mail

No Insurance Coverage Provided.

Atlantic Richfield Company
P O Box 910355
Dallas, TX 75191-0355

RE-SENT UNDER NUMBER:
2 445 056 874

(Signed Green Card Returned)

PS Form 3800

Postage: \$ 6.55

PS Form 3811, December 1994

1. Article Addressed to:

Roy G Barton Sr & Opal Barton, Re:
Roy G Barton Jr, Trustee
1919 N. Turner St.
Hobbs, NM 88240-2712

2. Article Number: 2 445 056 847

3. Service Type: Registered ☒ Express Mail ☐ Insured ☐ Certified ☐ Return Receipt for Merchandise ☐ COD ☐

4. Delivery: 3/23/99 mtk

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

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

7. Date of Delivery: 3/23/99 mtk

8. Addressee's Address (Only if requested):

9. Also wish to receive the following services (for an extra fee):

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

1025 95 98 8 0229 Domestic Return Receipt

PAID 20 1000
US Address (City/Invoiced
paid)
5/23/99 mk

Address (Only if requested
(paid))

Thank you for using Return Receipt Service

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

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

3. Article Addressed to:

Louis Dreyfus Gas Holdings, Inc.
 14000 Quail Springs Parkway #600
 Oklahoma City, OK 74134-2600

Received By: (Print Name)

Signature (Addressee or Agent)

S Form 3811, December 1994

10255 98-8 0229 Domestic Return Receipt

4a. Article Number

2 445 056 852

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

3/23/99

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

3/23/99 mk

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse of

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

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

3. Article Addressed to:

Lahapeno Corporation
 P. O. Box 1608
 Albuquerque, NM 87103-1608

4a. Article Number

2 445 056 853

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

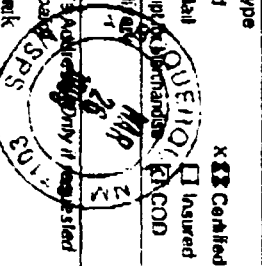
7. Date of Delivery

3/23/99 mk

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

PS Form 3811, December 1994

10255 98-8 0229 Domestic Return Receipt



SENDER:

Complete items 1 and 2 for additional services.
 a. Complete items 3, 4a, and 4b.
 b. Print your name and address on the reverse of this form so that we can return this card to you.
 c. Attach this form to the front of the mailpiece, or on the back if space does not permit.
 d. Write "Return Receipt Requested" on the mailpiece below the article number.
 e. 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 Exploration, Inc.
 c/o Yates Petroleum Corporation
 105 South Fourth St.
 Artesia, NM 88210-2177

4a. Article Number

2 445 056 854

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

3/23/99

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

3/23/99 mk

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

Complete items 1 and 2 for additional services.
 a. Complete items 3, 4a, and 4b.
 b. Print your name and address on the reverse of this form so that we can return this card to you.
 c. Attach this form to the front of the mailpiece, or on the back if space does not permit.
 d. Write "Return Receipt Requested" on the mailpiece below the article number.
 e. 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:

Reed & Stevens, Inc.
 P. O. Box 1518
 Roswell, NM 88202-1518

4a. Article Number

2 445 056 855

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise

7. Date of Delivery

3/23/99

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

3/23/99 mk

PS Form 3811, December 1994

10255 98-8 0229 Domestic Return Receipt

PS Form 3811, December 1994

10255 98-8 0229 Domestic Return Receipt

SENDER:

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

Slabro Oil Ltd Co
 P O Box 840
 Artesia, NM 88211-0840

4a. Article Number
 Z 445 056 856

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

7. Date of Delivery
 3-25-99

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

Received By: (Print Name)
 T. Hornilton
 Signature (Address or Agent)
 X. O. Hornilton

3/23/99 mlk

PS Form 3811, December 1994

10256 99-9-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and/or 2 for additional services:
 a. Complete items 1, 4a, and 4b.
 b. Print your name and address on the reverse of this form so that we can return this card to you.
 c. Attach this form to the front of the mailpiece, or on the back if space does not permit.
 d. Write "Return Receipt Requested" on the mailpiece below the article number.
 e. 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 Brothers A Partnership
 105 South 4th Street
 Artesia, NM 88210-2177

4a. Article Number
 Z 445 056 857

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

7. Date of Delivery
 3-25-99

8. Addressee's Address (Only if requested and fee is paid)
 Z 445 056 857

Received By: (Print Name)
 K. K. K. K.
 Signature (Address or Agent)
 X. O. K. K.

3/23/99 mlk

PS Form 3811, December 1994

10256 99-9-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:

- Complete items 1 and/or 2 for additional services:
 a. Complete items 1, 4a, and 4b.
 b. Print your name and address on the reverse of this form so that we can return this card to you.
 c. Attach this form to the front of the mailpiece, or on the back if space does not permit.
 d. Write "Return Receipt Requested" on the mailpiece below the article number.
 e. 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 Corporation
 P O Box 1395
 Artesia, NM 88211-1395

4a. Article Number
 Z 445 056 858

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

7. Date of Delivery
 3-25-99

8. Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlk

Received By: (Print Name)
 K. K. K. K.
 Signature (Address or Agent)
 X. K. K. K.

PS Form 3811, December 1994

10256 99-9-0229

Domestic Return Receipt

your RETURN ADDRESS completed on the reverse side.

SENDER:

- Complete items 1 and/or 2 for additional services:
 a. Complete items 1, 4a, and 4b.
 b. Print your name and address on the reverse of this form so that we can return this card to you.
 c. Attach this form to the front of the mailpiece, or on the back if space does not permit.
 d. Write "Return Receipt Requested" on the mailpiece below the article number.
 e. 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 Energy Corporation
 P O Box 2323
 Roswell, NM 88202-2323

4a. Article Number
 Z 445 056 859

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

7. Date of Delivery
 3-25-99

8. Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlk

Received By: (Print Name)
 K. K. K. K.
 Signature (Address or Agent)
 X. K. K. K.

PS Form 3811, December 1994

10256 99-9-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

NOTER: 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 multipiece, or on the back if space does not permit. "Return Receipt Requested" on the multipiece 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.

Thank you for using Return Receipt Service.

Received By: (Print Name)
 Harry E. Yates Company
 P O Box 1716
 Roswell, NM 88202-1716

Signature: Addressee or Agent
 X *[Signature]*

Form 3811, December 1994

102565-98-8-0229 Domestic Return Receipt

4a Article Number
 Z 445 056 860

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

7 Date of Delivery
 3/23/99 mlk

8 Addressee's Address (Only if requested and fee is paid)
 1009

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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

Received By: (Print Name)
 Lillie M. Yates Estate
 Frank Yates, Jr. Executor
 P O Box 841
 Artesia, NM 88211-0841

Signature: Addressee or Agent
 X *[Signature]*

Form 3811, December 1994

102565-98-8-0229 Domestic Return Receipt

4a Article Number
 Z 445 056 861

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

7 Date of Delivery
 3-25-99

8 Addressee's Address (Only if requested and fee is paid)
 3/23/98

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 multipiece, or on the back if space does not permit. "Return Receipt Requested" on the multipiece 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.

Received By: (Print Name)
 Richard M. Yates
 105 South Fourth St.
 Artesia, NM 88210-2177

Signature: Addressee or Agent
 X *[Signature]*

Form 3811, December 1994

102565-98-8-0229 Domestic Return Receipt

4a Article Number
 Z 445 056 862

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

7 Date of Delivery
 3-25-99

8 Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlk

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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

Received By: (Print Name)
 S. P. Yates
 105 S Fourth St.
 Artesia, NM 88210-2177

Signature: Addressee or Agent
 X *[Signature]*

Form 3811, December 1994

102565-98-8-0229 Domestic Return Receipt

4a Article Number
 Z 445 056 863

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

7 Date of Delivery
 3-25-99

8 Addressee's Address (Only if requested and fee is paid)
 3/23/99 mlk

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.

1. Article Addressed to:

SP & Estelle N Yates 1976 Tst
 St Clair Peyton Yates, Jr., Trec
 105 South Fourth St.
 Artesia NM 88210-2177

4a. Article Number

2 445 056 864

4b. Service Type

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

7. Date of Delivery

3-25-99

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

3/23/99 mlc

PS Form 3811, December 1994

10295-90 8 0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

3. Article Addressed to:

St. Clair Yates, Jr.
 c/o Yates Petroleum Corp
 105 South Fourth St.
 Artesia NM 88210-2177

4a. Article Number

2 445 056 865

4b. Service Type

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

7. Date of Delivery

3-25-99

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

3/23/99 mlc

PS Form 3811, December 1994

10295-90 8 0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

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.

1. Article Addressed to:

Thomas G. Calhoun, II
 Trustee of the Frank M. Trust
 4429 North Central Expressway
 Dallas TX 75205

4a. Article Number

2 445 056 866

4b. Service Type

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

7. Date of Delivery

MAR 26 1999

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

3/23/99 mlc

PS Form 3811, December 1994

10295-90 8 0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

3. Article Addressed to:

KCS Medallion Resources, Inc.
 7130 S. Lewis Ave., Suite 700
 Tulsa OK 74136

4a. Article Number

2 445 056 867

4b. Service Type

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

7. Date of Delivery

3-29-99

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

3/23/99 mlc

PS Form 3811, December 1994

10295-90 8 0229 Domestic Return Receipt

SENDER:

Complete items 1 and/or 2 for additional services.

a Complete items 1, 4a, and 4b.
b Print your name and address on the reverse of this form so that we can return this card to you.

c Attach this form to the front of the mailpiece, or on the back if space does not permit.

d Write "Return Receipt Requested" on the mailpiece below the article number.

e The Return Receipt will show to whom the article was delivered and the date delivered.

Article Addressed to:

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

4a. Article Number

2 445 056 868

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise☐ COD

7. Date of Delivery

3-29-99

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

3/23/99 mlk

PS Form 3811, December 1994

102595 98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

Complete items 1 and/or 2 for additional services.

a Complete items 1, 4a, and 4b.
b Print your name and address on the reverse of this form so that we can return this card to you.

c Attach this form to the front of the mailpiece, or on the back if space does not permit.

d Write "Return Receipt Requested" on the mailpiece below the article number.

e The Return Receipt will show to whom the article was delivered and the date delivered.

Article Addressed to:

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

4a. Article Number

2 445 056 869

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise☐ COD

7. Date of Delivery

3-21-99

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

3/23/99 mlk

PS Form 3811, December 1994

102595 98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

Complete items 1 and/or 2 for additional services.

a Complete items 1, 4a, and 4b.
b Print your name and address on the reverse of this form so that we can return this card to you.

c Attach this form to the front of the mailpiece, or on the back if space does not permit.

d Write "Return Receipt Requested" on the mailpiece below the article number.

e The Return Receipt will show to whom the article was delivered and the date delivered.

Article Addressed to:

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

4a. Article Number

2 445 056 870

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise☐ COD

7. Date of Delivery

3-26-99

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

3/23/99 mlk

PS Form 3811, December 1994

102595 98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

Complete items 1 and/or 2 for additional services.

a Complete items 1, 4a, and 4b.
b Print your name and address on the reverse of this form so that we can return this card to you.

c Attach this form to the front of the mailpiece, or on the back if space does not permit.

d Write "Return Receipt Requested" on the mailpiece below the article number.

e The Return Receipt will show to whom the article was delivered and the date delivered.

Article Addressed to:

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

4a. Article Number

2 445 056 871

4b. Service Type

☐ Registered☐ Express Mail☐ Return Receipt for Merchandise☐ COD

7. Date of Delivery

MAR 26 1999

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

3/23/99 mlk

PS Form 3811, December 1994

102595 98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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

1. 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, Trustee of
 the S.J. Jr. 1990 Trust
 P O Box 10508
 Midland TX 79702-0508



4. Article Number:

Z 445 056 872

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)

3/30/99 mlk

5. Form 3811, December 1994

102536-99-8 0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

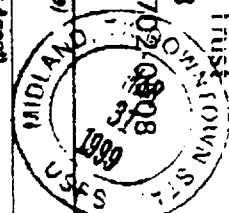
SENDER:

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

1. 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, Trustee of
 the W.W. 1990 Trust
 P O Box 10508
 Midland TX 79702-0508



4a. Article Number

Z 445 056 873

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)

3/30/99 mlk

5. Form 3811, December 1994

102536-99-8 0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

SENDER:

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

1. 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:

Atlantic Richfield Company
 P O Box 1610
 Midland TX 79702

4a. Article Number

Z 445 056 874

4b. Service Type

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

7. Date of Delivery

APR 07 1999

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

4/6/99 mlk

3. Form 3811, December 1994

102536-99-8 0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

1. 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:

Constance White
 5151 San Felipe
 Suite 1900
 Houston TX 77056-3610

4a. Article Number

Z 445 056 875

4b. Service Type

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

7. Date of Delivery

4-18-99

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

4/8/99 mlk

5. Form 3811, December 1994

102536-99-8 0229

Domestic Return Receipt

9156878307

T-368 P.21/21 F-686

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 item in the mailpiece, or on the back if space does not permit. Return Receipt Requestor 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: Earl L. Malone, MD 310 West Mescalero Road Apt. 11 Roswell NM 88201-5830		4a. Article Number 2 445 056 876	
3. Received By: (Print Name) 		4b. Service Type ☐ Registered ☒ Certified ☐ Express Mail ☐ Insured ☐ Return Receipt for Merchandise ☐ COD	
6. Signature (Addressee or Agent) X <i>[Signature]</i>		7. Date of Delivery 4/8/99	
PS Form 3811, December 1994		107595-9a B-6219 Domestic Return Receipt	

Thank you for using Return Receipt Service.