



dugan production corp.

SEP 27 2002

September 25, 2002

Mr. David Catanach
New Mexico Oil Conservation Division
1220 South St. Francis Drive
Santa Fe, NM 87505

Re: NMOCD Case No. 12936
Examiner Hearing Docket 10-10-02
Application of Dugan Production Corp.

Dear Mr. Catanach:

Attached for your consideration in the captioned case is a copy of the "certified mail - return receipts" for each of the interest owners having an interest (WI, RI, ORRI) in Questar's South Lybrook Gas Gathering System and/or the wells attached to it, along with the two wells which Dugan Production is proposing to add. We offer these receipts as evidence that all parties having any interest in our application have received a complete copy of our application dated 09-06-02. A copy of the letter transmitting the application to the interest owners was included in our application as Attachment No. 10.

To date we have not had any response from any of the interest owners. Questar has advised they will provide a supporting letter mailed directly to you.

Should you have any questions, please let me know.

Sincerely,

John D. Roe
Engineering Manager

JDR:sh

xc: Questar E&P - Attention Gary Ohlman

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

*Guatemala Exp Co.
1050 17th St.
Suite 500
Denver, CO 80205*

Article Number
(Transfer from service label)
Form 3811, August 2001

7000 1670 0010 0492 4940
Domestic Return Receipt
Do. Stylusnot 665

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
X *Heather Long*
B. Received by (Printed Name) *H. Long* C. Date of Delivery *9-9-99*
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

*Bureau of Land Management
1335 La Plata Hwy.,
Suite A
Farmington, NM 87401*

Article Number
(Transfer from service label)
Form 3811, August 2001

7000 1670 0010 0492 4995
Domestic Return Receipt
Do. Stylusnot 665

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
X *Virginia Barber*
B. Received by (Printed Name) *Virginia Barber, BLM* C. Date of Delivery *9/5/99*
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

*State of New Mexico
New Mexico State Land Office
P.O. Box 1148
Santa Fe, NM
87504-1148*

Article Number
(Transfer from service label)
PS Form 3811, August 2001

7001 1940 0003 1548 7439
Domestic Return Receipt
Do. Stylusnot

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
X *[Signature]*
B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9-9-2007*
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

*Mr. Harold R. Buehler
c/o Richard Bitter, Quetta
201 W. 2nd Street
Bloomington, IA 52801*

Article Number
(Transfer from service label)
PS Form 3811, August 2001

7001 1940 0003 1548 7316
Domestic Return Receipt
Do. Stylusnot

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee
X *[Signature]*
B. Received by (Printed Name) *[Signature]* C. Date of Delivery *9-10-99*
D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Mr. Michael W. Houston
P.O. Box 980
Buffalo, MD 15622

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
Michael Houston ☐ Addressee
B. Received by (Printed Name) ☐ Date of Delivery
9-19-02

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Transfer from service label) 7001 1940 0003 1548 7323
3 Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Mr. Kyle S. Payne, Jr.
218 Symwood Drive
Albama, LA 70360

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
Kyle S. Payne, Jr. ☐ Addressee
B. Received by (Printed Name) ☐ Date of Delivery
9-19-02

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Transfer from service label) 7001 1940 0003 1548 7330
Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Mr. Robert S. Payne
14902 Indian Trail Dr.
Houston, TX 77045-3220

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
Robert S. Payne ☐ Addressee
B. Received by (Printed Name) ☐ Date of Delivery
Robert S. Payne 9-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Transfer from service label) 7001 1940 0003 1548 7347
PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

SENDER: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

Article Addressed to:

Mr. Miller Partnership
2702 Creative Road
Big Spring, TX 79720

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent
Lanette Miller ☐ Addressee
B. Received by (Printed Name) ☐ Date of Delivery
Lanette Miller 9-10

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type ☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Transfer from service label) 7001 1940 0003 1548 7354
PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Marie A. Schaffner
4131 W. 16th Boulevard,
Apt. 303
Davenport, IA 52806

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Marie A. Schaffner* ☒ Agent ☐ Addressee
- B. Received by (Printed Name) *Marie A. Schaffner* ☐ Agent ☒ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Nickel & Moulton Schmidt
5418 Chapel Hill Road
Davenport, IA
52802-9802

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *Nickel & Moulton Schmidt* ☐ Agent ☒ Addressee
- B. Received by (Printed Name) *Nickel & Moulton Schmidt* ☐ Agent ☒ Addressee
- C. Date of Delivery *9-10-02*
- D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

3. Service Type

- ☒ Certified Mail ☐ Express Mail
- ☐ Registered ☒ Return Receipt for Merchandise
- ☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

2. Article Number *7001 1940 0003 1548 7378*
 (Transfer from service label)

PS Form 3811, August 2001 Domestic Return Receipt *J. Sylwark* 102595-02-M-0835