

BEFORE THE OIL CONSERVATION DIVISION
NEW MEXICO ENERGY, MINERALS AND
NATURAL RESOURCES DEPARTMENT

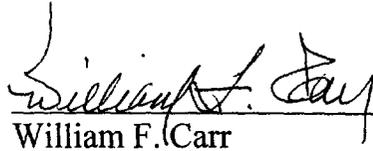
APPLICATION OF OXY USA WTP LIMITED
PARTNERSHIP FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.

CASE NO. _____

AFFIDAVIT

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

William F. Carr, attorney in fact and authorized representative of OXY USA WTP Limited Partnership, the Applicant herein, being first duly sworn, upon oath, states that notice has been given to all interested persons entitled to receive notice of this application under Oil Conservation Division rules, and that notice has been given at the addresses shown on Exhibit "A" attached hereto.

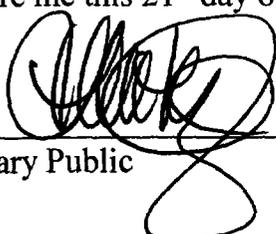


William F. Carr

SUBSCRIBED AND SWORN to before me this 21st day of February 2003.



OFFICIAL SEAL
LISAMARIE ORTIZ
NOTARY PUBLIC-STATE OF NEW MEXICO
My commission expires 01-14-07



Notary Public

My Commission Expires:

January 14, 2007

EXHIBIT A

**APPLICATION OF OXY USA WTP LIMITED PARTNERSHIP
FOR COMPULSORY POOLING
LEA COUNTY, NEW MEXICO.**

NOTICE LIST

Lodene A. Garcia
2 Amanda Ct.
Napa, California 94559

Betty Akers
440 CR 232, Space 13
Durango, Colorado 81303

Estate of Alice Dragoo
10000 Miller Circle #13
Oklahoma City, Oklahoma 73132

Ira Dragoo
10000 Miller Circle #13
Oklahoma City, Oklahoma 73132

Drury Tankersley
900 Front Street
Soledad, California 93960

Kathleen Hayes Kavooras
9711 Wheatland Ave
Shadow Hills, California 91040

James S. Hayes, Jr.
Post Office Box 1473
Wainscott, New York 11975

Mary Sue Paddock
2319 West Avenue "L"
San Angelo, Texas 76901

Maecenas Minerals, L.L.P.
Post Office Box 176
Abilene, Texas 79604

Republic Royalty Company
3738 Oak Lawn Ave., Suite 300
Dallas, Texas 75219

The Fasken Foundation
500 W. Texas, Suite 1160
Midland, Texas 79701

Kendy L. Cirbo
1433 E. Glenhaven Drive
Phoenix, Arizona 85048

Jon L. Houston
1445 Bodwell Rd., Apt. 7
Manchester, New Hampshire 03109

Ralph W. Houston
121 Cordelia Drive
Myrtle Creek, Oregon 97457

Estate of William Edward Scarlett
12917 West 92nd Street
Lanexa, Kansas 66215

Elizabeth Scarlett
12917 West 92nd Street
Lanexa, Kansas 66215

Estate of George Price Scarlett
3310 Riviera W Drive
Kelseyville, California 95451

Siew Scarlett Beardsley
3310 Riviera W Drive
Kelseyville, California 95451

Warren Akers/sp
2465 Mustang Drive
Arroyo Grande, CA 93420

Janelle Crabtree/sp
440 CR 232, Space 13
Durango, CO 81303

Mary Lou Davis/sp
5337 E. Highway 79
Milano, TX 76556

Ruth Lorance/sp
3265 Frick Road
Houston, TX 77086

Ellen F. Barnes/sp
2516 Northwest 104th Street
Oklahoma City, Ok 73112

Lori Jean Houston/sp
2335 SW Landers
Roseburg, OR 97470

Brian Thomas Houston/sp
2335 SW Landers
Roseburg, OR 97470

HOLLAND & HART LLP
ATTORNEYS AT LAW

DENVER • ASPEN
BOULDER • COLORADO SPRINGS
DENVER TECH CENTER
BILLINGS • BOISE
CHEYENNE • JACKSON HOLE
SALT LAKE CITY • SANTA FE
WASHINGTON, D.C.

P.O. BOX 2208
SANTA FE, NEW MEXICO 87504-2208
110 NORTH GUADALUPE, SUITE 1
SANTA FE, NEW MEXICO 87501-6525

TELEPHONE (505) 988-4421
FACSIMILE (505) 983-6043

William F. Carr

wcarr@hollandhart.com

February 20, 2003

CERTIFIED MAIL -- RETURN RECEIPT REQUESTED

TO: AFFECTED INTEREST OWNERS:

Re: Application of OXY USA WTP Limited Partnership for compulsory pooling, Lea County, New Mexico

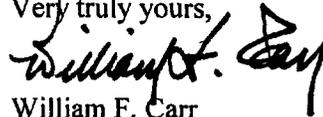
Ladies and Gentlemen:

This letter is to advise you that OXY USA WTP Limited Partnership has filed the enclosed application with the New Mexico Oil Conservation Division seeking the force pooling all mineral interests in all formations in certain spacing and proration units located in Section 8, Township 22 South, Range 38 East, NMPM, Lea County, New Mexico. OXY proposes to dedicate the referenced pooled unit to its Brabant Well No. 1 to be drilled at a standard oil well location 1980 feet from the North and East lines of said Section 8.

This application has been set for hearing before a Division Examiner on March 13, 2003. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases are required by Division Rule 1208.B to file a Pre-Hearing Statement at the Santa Fe Office of the Oil Conservation Division three days in advance of a scheduled hearing. This statement must include: the names of the parties and their attorneys; a concise statement of the case; the names of all witnesses the party will call to testify at the hearing; the approximate time the party will need to present its case; and identification of any procedural matters that are to be resolved prior to the hearing. Unless you declare in this Pre-Hearing Statement your intention to oppose the imposition of a 200% risk penalty against any interest not voluntarily committed to this spacing unit, OXY will request that this penalty be imposed by the order that results from this hearing without the presentation of evidence in support thereof.

Very truly yours,



William F. Carr
ATTORNEY FOR OXY USA WTP LIMITED
PARTNERSHIP

Enclosure

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

**IN THE MATTER OF THE APPLICATION
OF OXY USA WTP LIMITED PARTNERSHIP
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.**

APPLICATION

OXY USA WTP Limited Partnership ("OXY"), through its undersigned attorneys, hereby makes application pursuant to the provisions of N.M.Stat.Ann.§70-2-17, (1978), for an order pooling all mineral interests in all formations in the following described spacing and proration units located in Section 8, Township 22 South, Range 38 East, NMPM, Lea County, New Mexico: the N/2 for all formations and/or pools developed on 320-acre spacing; the NE/4 for all formations and/or pools developed on 160-acre spacing which includes but is not limited to the Undesignated Tubb Oil and Gas Pool; and the SW/4 NE/4 for all formations and/or pools developed on 40-acre spacing which includes but is not necessarily limited to the Undesignated Wantz-Granite Wash Pool, Undesignated South Brunson Drinkard-Abo Pool, Undesignated Tubb Oil and Gas Pool, Undesignated Blinebry Oil and Gas Pool and Undesignated Paddock Pool, and in support of its application states:

1. OXY is a working interest owner in the N/2 of Section 8, Township 22 South, Range 38 East, NMPM, on which it proposes to drill its Brabant Well No. 1 at a

standard oil and gas well location 1980 feet from the North and East lines of the section to an approximate total depth of 10,500 feet to test any and all formations from the surface through the base of the Ellenberger formation.

2. OXY has sought and been unable to obtain a voluntary agreement for the development of this acreage from the owners of interest, including the owners of unleased mineral interests, in the N/2 of Section 8 identified on Exhibit A to this application to whom notice of this application will be provided in accordance with the rules of the Division.

3. Said pooling of interests will avoid the drilling of unnecessary wells, will prevent waste and will protect correlative rights.

4. In order to permit OXY to obtain its just and fair share of the oil and gas underlying the subject lands, all mineral interests should be pooled, and OXY should be designated the operator of the well.

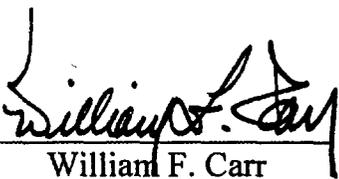
WHEREFORE, OXY USA WTP Limited Partnership requests that this application be set for hearing before an Examiner of the Oil Conservation Division on March 13, 2003, and, after notice and hearing as required by law, the Division enter its order:

- A. pooling all mineral interests in the subject spacing and proration units,
- B. designating OXY USA WTP Limited Partnership operator of the unit and the well to be drilled thereon,

- C. authorizing OXY to recover its costs of drilling, equipping and completing the well,
- D. approving the actual operating charges and costs of supervision while drilling and after completion, together with a provision adjusting the rates pursuant to the COPAS accounting procedures, and
- E. imposing a 200% penalty for the risk assumed by OXY in drilling and completing the well against any working interest owner and any unleased mineral interest owners who does not voluntarily participate in the well.

Respectfully submitted,

HOLLAND & HART LLP

By: 

William F. Carr

Post Office Box 2208

Santa Fe, New Mexico 87504

Telephone: (505) 988-4421

ATTORNEYS FOR OXY USA WTP LIMITED
PARTNERSHIP

CASE _____: Application of OXY USA WTP Limited Partnership for compulsory pooling, Lea County, New Mexico. Applicant in the above-styled cause seeks an order pooling all mineral interests in all formations in the following described spacing and proration units located in Section 8, Township 22 South, Range 38 East, NMPM, Lea County, New Mexico: the N/2 for all formations and/or pools developed on 320-acre spacing; the NE/4 for all formations and/or pools developed on 160-acre spacing which includes the Undesignated Tubb Oil and Gas Pool ; and the SW/4 NE/4 for all formations and/or pools developed on 40-acre spacing which includes but is not necessarily limited to the Undesignated Wantz-Granite Wash Pool, Undesignated South Brunson Drinkard-Abo Pool, Undesignated Tubb Oil and Gas Pool, Undesignated Blinebry Oil and Gas Pool and Undesignated Paddock Pool. Applicant proposes to dedicate the pooled units to its Brabant Well No. 1 to be drilled at a standard gas well location 1980 feet from the North and East lines of said Section 8. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of applicant as operator of the well and a charge for risk involved in drilling said well. Said area is located approximately 6 miles southeast of Eunice, New Mexico.

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

WFC Postage	\$.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To
 Betty Akers
 440 CR 232, Space 13
 Durango, Colorado 81303

PS Form 3800

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:
 Betty Akers
 440 CR 232, Space 13
 Durango, Colorado 81303

2. Article Number (Copy from sender) **7001 1140 0002 5601 1616**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) *Key* B. Date of Delivery **2/26**

C. Signature *X* Agent Addressee

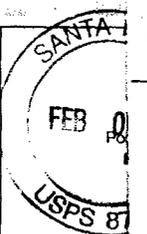
D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

WFC Postage	\$.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To
 Warren Akers/sp
 2465 Mustang Drive
 Arroyo Grande, CA 93420

PS Form 3800

- 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:
 Warren Akers/sp
 2465 Mustang Drive
 Arroyo Grande, CA 93420

2. Article Number (Copy from sender) **7001 1140 0002 5601 3344**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature *X W Akers* Agent Addressee

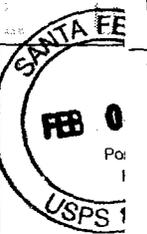
D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

WFC Postage	\$.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To
 Ellen F. Barnes/sp
 2516 Northwest 104th Street
 Oklahoma City, Ok 73112

PS Form 3800

- 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:
 Ellen F. Barnes/sp
 2516 Northwest 104th Street
 Oklahoma City, Ok 73112

2. Article Number (Copy from sender) **7001 1140 0002 5601 3382**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature *X* 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To: Siew Scarlett Beardsley
 3310 Riviera W Drive
 Kelseyville, California 95451

Street, Apt. No., or PO Box No.
 City, State, ZIP+

PS Form 3800, July 1999

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:

Siew Scarlett Beardsley
 3310 Riviera W Drive
 Kelseyville, California 95451

2. Article Number (Copy from): 7001 1140 0002 5601 3337

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____ B. Date of Delivery: 2-27-03

C. Signature: *Siew Beardsley* 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To: Kendy L. Cirbo
 1433 E. Glenhaven Drive
 Phoenix, Arizona 85048

Street, Apt. No., or PO Box No.
 City, State, ZIP+

PS Form 3800, July 1999

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:

Kendy L. Cirbo
 1433 E. Glenhaven Drive
 Phoenix, Arizona 85048

2. Article Number (Copy from): 7001 1140 0002 5601 1715

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly): David Cirbo B. Date of Delivery: 2/24/03

C. Signature: *D. Cirbo* 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$.60
Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To: Janelle Crabtree/sp
 440 CR 232, Space 13
 Durango, CO 81303

Street, Apt. No., or PO Box No.
 City, State, ZIP+

PS Form 3800, July 1999

MAIL RETURNED

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

OFFICIAL USE

WFC Postage	\$ 1.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



- 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:

Mary Lou Davis/sp
5337 E. Highway 79
Milano, TX 76556

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature Agent Addressee

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

Sent To
Mary Lou Davis/sp
5337 E. Highway 79
Milano, TX 76556

Street, Apt. No.,
or PO Box No.
City, State, ZIP+ 4

PS Form 3800, Ja

2. Article Number (Copy from

7001 1140 0002 5601 3368

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$ 1.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To
Estate of Alice Dragoo
10000 Miller Circle #13
Oklahoma City, Oklahoma
73132

Street, Apt. No.,
or PO Box No.
City, State, ZIP+ 4

PS Form 3800, Ja

MAIL RETURNED

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$ 1.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To
Ira Dragoo
10000 Miller Circle #13
Oklahoma City, Oklahoma
73132

Street, Apt. No.,
or PO Box No.
City, State, ZIP+ 4

PS Form 3800, Ja

MAIL RETURNED

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



MAIL RETURNED

Sent To The Fasken Foundation
 500 W. Texas, Suite 1160
 Midland, Texas 79701

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage)

OFFICIAL USE

WFC Postage	\$.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To Lodene A. Garcia
 2 Amanda Ct.
 Napa, California 94559

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:

 Lodene A. Garcia
 2 Amanda Ct.
 Napa, California 94559

2.
 PS 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 2/2/03

C. Signature [Signature] 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage)

OFFICIAL USE

WFC Postage	\$.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To James S. Hayes, Jr.
 Post Office Box 1473
 Wainscott, New York

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:

 James S. Hayes, Jr.
 Post Office Box 1473
 Wainscott, New York 11975

2. Article Number (Copy from se) 7001 1140 0002 5601 1661

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery 2-24-03

C. Signature [Signature] 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

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



MAIL RETURNED

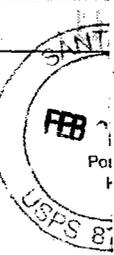
Sent To Brian Thomas Houston/sp
2335 SW Landers
Roseburg, OR 97470

Street, Apt. No. or PO Box No.
City, State, ZIP

PS Form 3800

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

WFC Postage	\$.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 2.65



Sent To Jon L. Houston
1445 Bodwell Rd., Apt. 7
Manchester, New Hampshire
03109

Street, Apt. No.; or PO Box No.
City, State, ZIP+

PS Form 3800

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:

Jon L. Houston
1445 Bodwell Rd., Apt. 7
Manchester, New Hampshire
03109

2. Article Number (Copy from) 7001 1140 0002 5601 1722

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____

B. Date of Delivery 2/24/03

C. Signature X *[Signature]* 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 Insured Mail
 Insured Mail C.O.D.

4. Restricted Delivery? (Extra Fee) Yes

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

WFC Postage	\$.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To Lori Jean Houston/sp
2335 SW Landers
Roseburg, OR 97470

Street, Apt. No. or PO Box No.
City, State, ZIP

PS Form 3800

MAIL RETURNED

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$ 3.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

SANTA FE NM FEB 0 2003 USPS 87501

Sent To Ralph W. Houston
 121 Cordelia Drive
 Myrtle Creek, Oregon 97457

Street, Apt. No. or PO Box No.
 City, State, ZIP

PS Form 3800, July 1999

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:

Ralph W. Houston
 121 Cordelia Drive
 Myrtle Creek, Oregon 97457

2. Article Number (Copy from service label)

PS Form 3811, July 1999 Domestic Return Receipt

7001 1140 0002 5000 -739

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **J. Moschin, RN** B. Date of Delivery **2/24/03**

C. Signature **X J. Moschin RN** 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$ 1.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

SANTA FE NM FEB 0 2003 USPS 87501

Sent To Kathleen Hayes Kavooras
 9711 Wheatland Ave
 Shadow Hills, California

Street, Apt. No.; or PO Box No.
 City, State, ZIP+

PS Form 3800, July 1999

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:

Kathleen Hayes Kavooras
 9711 Wheatland Ave
 Shadow Hills, California 91040

2. Article Number (Copy from service label)

PS Form 3811, July 1999 Domestic Return Receipt

7001 1140 0002 5601 1654

K. KAVOORAS 1 2/24/03

C. Signature **X Kathleen Kavooras** 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC Postage	\$ 1.60
OXY Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

SANTA FE NM FEB 0 2003 USPS 87501

Sent To Ruth Lorance/sp
 3265 Frick Road
 Houston, TX 77086

Street, Apt. No.; or PO Box No.
 City, State, ZIP+

PS Form 3800, July 1999

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage)

OFFICIAL MAIL

WFC Postage	\$.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To Maecenas Minerals, L.L.P.
Post Office Box 176
Abilene, Texas 79604

City, State, ZIP+ 4

PS Form 3800, J

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage)

OFFICIAL MAIL

WFC Postage	\$.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To Mary Sue Paddock
2319 West Avenue "L"
San Angelo, Texas 76901

City, State, ZIP+ 4

PS Form 3800, Ja

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage)

OFFICIAL MAIL

WFC Postage	\$.60
Oxy Brabant Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

Sent To Republic Royalty Company
3738 Oak Lawn Ave., Suite
Dallas, Texas 75219

City, State, ZIP

PS Form 3800

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:

Maecenas Minerals, L.L.P.
Post Office Box 176
Abilene, Texas 79604

2. Article Number (Copy from s

7001 1140 0002 5601 1685

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

- 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:

Mary Sue Paddock
2319 West Avenue "L"
San Angelo, Texas 76901

2. Article Number (Copy from

7001 1140 0002 5601 1678

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

- 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:

Republic Royalty Company
3738 Oak Lawn Ave., Suite 300
Dallas, Texas 75219

2. Article Number (Copy from s

7001 1140 0002 5601 1692

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

X

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

LINDA KINARD

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

Yes

M. Paddock 2-25-03
C. Signature

X Agent Addressee

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

Yes

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

X

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

Yes

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage)

Postage	\$ 1.60
WPC Oxy Brabast Certified Fee	2.31
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To
 Elizabeth Scarlett
 12917 West 92nd Street
 Lanexa, Kansas 66215

Street, Apt. No., or PO Box No.
 City, State, ZIP+ 4

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:
 Elizabeth Scarlett
 12917 West 92nd Street
 Lanexa, Kansas 66215

2. Article Number (Copy from ser...)
 7001 1140 0002 5601 1555

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 J. J. J.

C. Signature
 X Cynthia Kiper 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage)

Postage	\$ 1.60
WPC Oxy Brabast Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To
 Estate of George Price Scarlett
 3310 Riviera W Drive
 Kelseyville, California

Street, Apt. No., or PO Box No.
 City, State, ZIP+

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:
 Estate of George Price Scarlett
 3310 Riviera W Drive
 Kelseyville, California 95451

2. Article Number (Copy from ser...)
 7001 1140 0002 5601 3320

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 2-27-03

C. Signature
 X [Signature] 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage)

Postage	\$ 1.60
WPC Oxy Brabast Certified Fee	2.30
Return Receipt Fee (Endorsement Required)	1.75
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To
 Estate of William Edward Scarlett
 12917 West 92nd Street
 Lanexa, Kansas 66215

Street, Apt. No., or PO Box No.
 City, State, ZIP

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:
 Estate of William Edward Scarlett
 12917 West 92nd Street
 Lanexa, Kansas 66215

2. Article Number (Copy from ser...)
 7001 1140 0002 5601 1746

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
 J. J. J.

C. Signature
 X Cynthia Kiper 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

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

WFC OXY Brehant	Postage \$ 1.60
	Certified Fee 2.30
	Return Receipt Fee (Endorsement Required) 1.75
	Restricted Delivery Fee (Endorsement Required)
	Total Postage & Fees \$ 4.65



Sent To
 Drury Tankersley
 900 Front Street
 Soledad, California 93960

Street, Apt. No., or PO Box No.
 City, State, ZIP+ 4

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:
 Drury Tankersley
 900 Front Street
 Soledad, California 93960

2. Article Number (Copy from) **7001 1140 0002 5601 1647**

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature
 X *Bonzale Diaz* 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

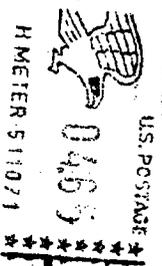
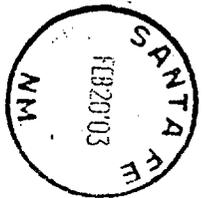
HOLLAND & HART
ATTORNEYS AT LAW

SUITE 1
110 NORTH GUADALUPE
SANTA FE, NEW MEXICO 87501-6525
P.O. BOX 2208
SANTA FE, NEW MEXICO 85704-2208



7001 1140 0002 5601 3399

CERTIFIED MAIL



Lori Jean Houston/sp
2335 SW Landers
Roseburg, OR 97470

NSU

RETURN RECEIPT
REQUESTED

NOTICE
NOTICE
URN

- Not Deliverable As Addressed
- Unable to Forward
- Insufficient Address
- Moved, Left No Address
- Unclassified
- Attempted - No Address
- No Such Street
- Vacant
- No Mail Receipts
- No Mail Receipts
- Box Closed - No Order
- Postoffice or Better Address
- Postage Due

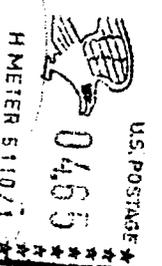
CERTIFIED MAIL

HOLLAND & HART
ATTORNEYS AT LAW

SUITE 1
110 NORTH GUADALUPE
SANTA FE, NEW MEXICO 87501-6525
P.O. BOX 2208
SANTA FE, NEW MEXICO 85704-2208



7001 1140 0002 5601 1708



**ATTEMPTED,
NOT KNOWN**

The Fashion Foundation
500 W. Texas, Suite 1160
Midland, Texas 79701

JFF

RETURN RECEIPT

NOTICE
NOTICE
URN

HOLLAND & HART
ATTORNEYS AT LAW

SUITE 1

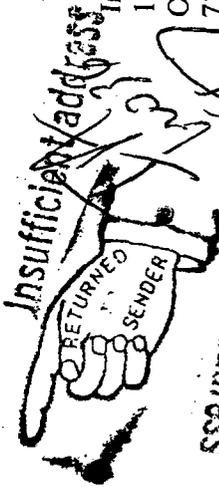
110 NORTH GUADALUPE
SANTA FE, NEW MEXICO 87501-6525

P.O. BOX 2208

SANTA FE, NEW MEXICO 85704-2208



7001 1140 0002 5601 1630

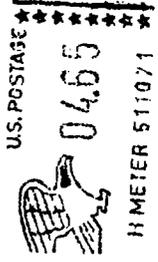


~~Insufficient address~~

Ira Drago
10000 Miller Circle #13
Oklahoma City, Oklahoma
73132

sseppe [unclear]
FEB 26 2003

1ST NOTICE _____
2ND NOTICE _____
RETURN _____



Insufficient address

**RETURN RECEIPT
REQUESTED**

CERTIFIED MAIL

HOLLAND & HART
ATTORNEYS AT LAW

SUITE 1

110 NORTH GUADALUPE
SANTA FE, NEW MEXICO 87501-652

P.O. BOX 2208

SANTA FE, NEW MEXICO 85704-220



7001 1140 0002 5601 1623

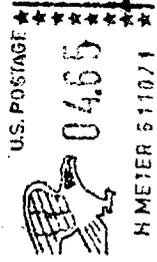
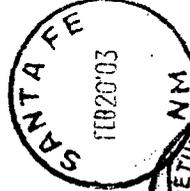


~~Insufficient address~~

Estate of Alice Drago
10000 Miller Circle #13
Oklahoma City, Oklahoma
73132

FEB 26 2003

1ST NOTICE _____
2ND NOTICE _____
RETURN _____



Insufficient address

**RETURN RECEIPT
REQUESTED**

HOLLAND & HART LLP
ATTORNEYS AT LAW

SUITE 1
110 NORTH GUADALUPE
SANTA FE, NEW MEXICO 87501-6525

P.O. BOX 2208
SANTA FE, NEW MEXICO 85704-2208



9505 1140 0002 5601

REASON CHECKED

Unclaimed
 Refused
 Mailed - No Known Recipient Address
 No Such Street
 No Such Office in State
 Do Not Return This Envelope

Postage Due

Returned For Better Address

Box Closed - No Order

No Mail Receipts

Vacant Illegible

No Such Street Number

Attempted - Not Known

Undelivered Refused

Moved, Left No Address

Postage Due

Not Deliverable As Addressed

Unable To Forward

Insufficient Address

Moved, Left No Address

Unclaimed Refused

Attempted - Not Known

No Such Street Number

Vacant Illegible

No Mail Receipts

Box Closed - No Order

Returned For Better Address

Postage Due

Janelle Crabtree
440 CR 2300 Space 13
Durango, CO 81303



U.S. POSTAGE

0466

H. MEYER 51408
CARR METER

- Not Delivered
- Unable To Forward
- Insufficient Address
- Moved, Left No Address
- Unclaimed Refused
- Attempted - Not Known
- No Such Street Number
- Vacant Illegible
- No Mail Receipts

RETURN RECEIPT REQUESTED

POSTAGE DUE



7001 1140 0002 5601 3405



U.S. POSTAGE

0466

H. MEYER 511071

Brian Thomas Houston/sp
2335 SW Landers
Roseburg, OR 97470

- Not Deliverable As Addressed
- Unable To Forward
- Insufficient Address
- Moved, Left No Address
- Unclaimed Refused
- Attempted - Not Known
- No Such Street Number
- Vacant Illegible
- No Mail Receipts
- Box Closed - No Order
- Returned For Better Address
- Postage Due

RETURN RECEIPT REQUESTED