

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:

CASE NO. 10704

APPLICATION OF MARATHON OIL COMPANY
TO AMEND DIVISION ORDER R-9503 TO
INCREASE THE VERTICAL LIMITS AUTHORIZED
FOR INJECTION IN CERTAIN INJECTION
WELLS IN A WATERFLOOD PROJECT,
LEA COUNTY, NEW MEXICO

CERTIFICATE OF MAILING

AND

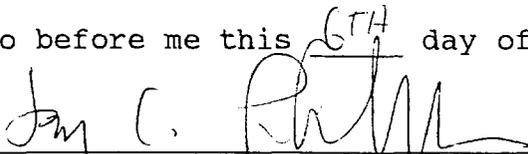
COMPLIANCE WITH ORDER R-8054

W. THOMAS KELLAHIN, attorney in fact and authorized representative of MARATHON OIL COMPANY, states that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on MARCH 16, 1993, I caused to be mailed by certified mail return-receipt requested notice of this hearing and a copy of the application for the above referenced case along with the cover letter, at least twenty days prior to the hearing set for APRIL 8, 1993, to the parties shown in the application as evidenced by the attached copies of return receipt cards, and that pursuant to Division Rule 1207, notice has been given at the correct addresses provided by such rule.



W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me this ^{6TH} day of
APRIL, 1993.


Notary Public-Jay C. Laubscher

My Commission Expires:

10/17/95

Before The
OIL CONSERVATION DIVISION
Santa Fe, New Mexico
Case No. 10704 Exhibit No. 20
Submitted by: Marathon Oil Company
Hearing Date: 4/8/93

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- 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:

ARCO Oil & Gas Company
P.O. Box 1610
Midland, TX 79702

4a. Article Number
P133 832 270

4b. Service Type

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
MAR 19 1993

5. Signature (Addressee)
[Signature]

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

6. Signature (Agent)
[Signature]

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 **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.
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- 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:

Meridian Oil Inc.
21 Desta Drive
Midland, TX 79701

4a. Article Number
P133 832 272

4b. Service Type

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

7. Date of Delivery
MAR 19 1993

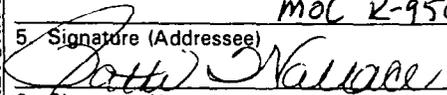
5. Signature (Addressee)
[Signature]

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

6. Signature (Agent)
[Signature]

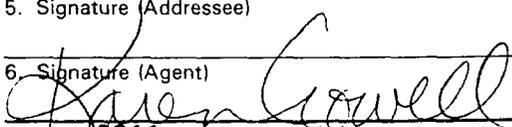
PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 **DOMESTIC RETURN RECEIPT**

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Is your RETURN ADDRESS completed on the reverse side?	SENDER: <ul style="list-style-type: none"> • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so that we can return this card to you. • Attach this form to the front of the mailpiece, or on the back if space does not permit. • Write "Return Receipt Requested" on the mailpiece below the article number. • The Return Receipt will show to whom the article was delivered and the date delivered. 		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
	3. Article Addressed to: Dasco Land Corporation P.O. Box 2545 Hobbs, NM 88240		4a. Article Number P133 832 269	
	5. Signature (Addressee) 		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
	6. Signature (Agent) 3-18-93		7. Date of Delivery 8. Addressee's Address (Only if requested and fee is paid)	

Thank you for using Return Receipt Service.

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	3. Article Addressed to: Dallas McCasland P.O. Box 206 Eunice, NM 88231		4a. Article Number P133 832 274	
	5. Signature (Addressee) 		4b. Service Type <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
	6. Signature (Agent)		7. Date of Delivery 3-19-93 8. Addressee's Address (Only if requested and fee is paid)	

Thank you for using Return Receipt Service.

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- 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:
State of New Mexico
c/o Commissioner of
Public Lands
P.O. Box 1148
Santa Fe, NM 87504-1148
MOL R-9503

4a. Article Number
P133 832 268

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

7. Date of Delivery

5. Signature (Addressee)
M. Lucero

6. Signature (Agent)

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

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

I also wish to receive the following services (for an extra fee):

1. Addressee's Address

2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Conoco, Inc.
ATTN: Jerry W. Hoover
10 Desta Drive West
Midland, TX 79705-4500
MOL R-9503

4a. Article Number
P133 832 271

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

7. Date of Delivery
3-19-93

5. Signature (Addressee)
Jerry W. Hoover

6. Signature (Agent)

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

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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:
Headington Oil
7557 Rambler Road
Suite 1150
Dallas, TX 75231
MOL R-9503

4a. Article Number
P133 832 273

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

7. Date of Delivery
3/18/93

5. Signature (Addressee)

6. Signature (Agent)
D. Jackson

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

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.