

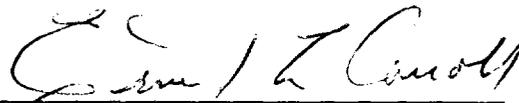
BEFORE THE OIL CONSERVATION DIVISION
OF THE STATE OF NEW MEXICO

IN THE MATTER OF THE APPLICATION OF :
ARCO PERMIAN FOR COMPULSORY POOLING, : CASE NO. 10993
EDDY COUNTY, NEW MEXICO :
_____ :

CERTIFICATE OF MAILING
AND
COMPLIANCE WITH RULE 1207

In accordance with Division Rule 1207, I hereby certify that on May 18, 1994, copies of the application filed in the above-referenced case, were mailed, at least twenty days prior to hearings set for June 9, 1994, to the parties listed in Exhibit "A".

Also attached hereto are copies of said correspondence as Exhibit "B".

By: 
Ernest L. Carroll

LOSEE, CARSON, HAAS & CARROLL, P.A.
P. O. Drawer 239
Artesia, New Mexico 88211-0239

Attorneys for Applicant

SUBSCRIBED AND SWORN TO before me this June 6, 1994.


Notary Public

My commission expires:
11-17-97

ARCO PERMIAN
BEFORE EXAMINER MORROW
NMOCD CASE NO. 10993
DATE: 06/09/94 4
EXHIBIT NO. _____

"EXHIBIT A"

Camterra Resources Partners, Ltd.
306 West Wall, Suite 500
Midland, TX 79701

Attn: Mr. Gary L. Pitts

Enron Oil & Gas Company
P. O. Box 2267
Midland, TX 79702

Attn: Mr. Pat Tower

El Paso Production Company
c/o Meridian Oil, Inc.
P. O. Box 51810
Midland, TX 79701

Attn: Mr. Larry Crowder

LOSEE, CARSON, HAAS & CARROLL, P. A.

ERNEST L. CARROLL
 JOEL M. CARSON
 DEAN B. CROSS
 JAMES E. HAAS
 A. J. LOSEE
 MARY LYNN BOGLE

300 YATES PETROLEUM BUILDING
 P. O. DRAWER 239
 ARTESIA, NEW MEXICO 88211-0239

TELEPHONE
 (505) 746-3506
 TELECOPY
 (505) 746-6318

May 18, 1994

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

El Paso Production Company
 c/o Meridian Oil, Inc.
 P. O. Box 51810
 Midland, TX 79701

Attn: Mr. Larry Crowder

Re: Application of ARCO Permian for Compulsory
 Pooling: Cedar Lake State 36-1 Well, Eddy
 County, New Mexico

Gentlemen:

Please be advised that this office has filed the enclosed Appli-
 cation on behalf of ARCO Permian with the Oil Conservation
 Division, and requested a hearing date of Thursday, June 9, 1994.

Any party wishing to appear must file a prehearing statement by
 the Friday prior to the date of hearing, and any party wishing to
 receive other parties' prehearing statements or pleadings must
 file an entry of appearance. If you do not intend to protest
 said Application, enclosed you will find a waiver whereby you can
 make that decision known.

Very truly yours,

LOSEE, CARSON, HAAS & CARROLL, P.A.

Ernest L. Carroll

Z 064 713 120

Receipt for Certified Mail
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

Sent to: *El Paso Production Co.*
 Street and No.
 P.O., State and ZIP Code
 Postage \$
 Certified Fee
 Special Delivery Fee
 Restricted Delivery Fee
 Return Receipt Showing to Whom & Date Delivered

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:
*El Paso Production Company
 c/o Meridian Oil, Inc.
 P.O. Box 51810
 Midland, TX 79701
 Attn: Larry Crowder*

4a. Article Number
Z 064 713 120

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

7. Date of Delivery
5-20

8. Addressee's name and fee is paid

5. Signature (Addressee)
Larry Crowder

6. Signature (Agent)
[Signature]

EXHIBIT
B

our RETURN ADDRESS completed on the reverse side? you for using Return Receipt Service.

LOSEE, CARSON, HAAS & CARROLL, P. A.

ERNEST L. CARROLL
 JOEL M. CARSON
 DEAN B. CROSS
 JAMES E. HAAS
 A. J. LOSEE
 MARY LYNN BOGLE

300 YATES PETROLEUM BUILDING
 P. O. DRAWER 239
 ARTESIA, NEW MEXICO 88211-0239

TELEPHONE
 (505) 746-3505
 TELECOPY
 (505) 746-8318

May 18, 1994

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Enron Oil & Gas Company
 P. O. Box 2267
 Midland, TX 79702

Attn: Mr. Pat Tower

Re: Application of ARCO Permian for Compulsory
 Pooling: Cedar Lake State 36-1 Well, Eddy
 County, New Mexico

Gentlemen:

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Very truly yours,

LOSEE, CARSON, HAAS & CARROLL, P.A.

Ernest L. Carroll
 Ernest L. Carroll

Z 064 713 119



**Receipt for
 Certified Mail**

No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

Sent to	<i>Enron Oil & Gas</i>	
Street and No.		
P.O., State and ZIP Code		
Postage	\$	
Certified Fee		
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt Showing to Whom & Date Delivered		
Return Receipt Showing to Whom, Date, and Addressee's Address		

our RETURN ADDRESS completed on the reverse side?

<p>SENDER:</p> <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. 	<p>I also wish to receive the following services (for an extra fee):</p> <p>1. <input type="checkbox"/> Addressee's Address</p> <p>2. <input type="checkbox"/> Restricted Delivery</p> <p>Consult postmaster for fee.</p>
<p>3. Article Addressed to:</p> <p><i>Enron Oil & Gas Co. P.O. Box 2267 Midland, TX 79702 Attn: Mr. Pat Tower</i></p>	<p>4a. Article Number <i>2 064 713 119</i></p> <p>4b. Service Type</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured</p> <p><input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD</p> <p><input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p>
<p>5. Signature (Addressee) <i>[Signature]</i></p> <p>6. Signature (Agent) <i>[Signature]</i></p>	<p>7. Date of Delivery MAY 19 1994</p> <p>8. Addressee's Address (Only if requested and fee is paid)</p>

Thank you for using Return Receipt Service.

ch 1993

LOSEE, CARSON, HAAS & CARROLL, P. A.

ERNEST L. CARROLL
 JOEL M. CARSON
 DEAN B. CROSS
 JAMES E. HAAS
 A. J. LOSEE
 MARY LYNN BOGLE

300 YATES PETROLEUM BUILDING
 P. O. DRAWER 239
 ARTESIA, NEW MEXICO 88211-0239

TELEPHONE
 (505) 746-3505
 TELECOPY
 (505) 746-6316

May 18, 1994

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Camterra Resources Partners, Ltd.
 306 West Wall, Suite 500
 Midland, TX 79701

Attn: Mr. Gary L. Pitts

Re: Application of ARCO Permian for Compulsory
 Pooling: Cedar Lake State 36-1 Well, Eddy
 County, New Mexico

Gentlemen:

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 said Application, enclosed you will find a waiver whereby you can
 make that decision known.

Very truly yours,

LOSEE, CARSON, HAAS & CARROLL, P.A.

Z 064 713 118

Ernest L. Carroll
 Ernest L. Carroll



**Receipt for
 Certified Mail**

No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

Form 3800, March 1993

Sent to <i>Camterra Resource</i>	
Street and No.	
P. O., State and ZIP Code	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	<i>5/18/94</i>

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.

3. Article Addressed to:
*Camterra Resources Partners, Ltd.
 306 West Wall, Ste. 500
 Midland, TX 79701
 Attn: Gary L. Pitts*

5. Signature (Addressee)

6. Signature (Agent)

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
2 064 713 118

4b. Service Type

Registered Insured

Certified COD

Express Mail Return Receipt for Merchandise

7. Date of Delivery
5/19

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

Thank you for using Return Receipt Service.