

P 506 040 528

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Ohio Casualty Ins. Co.	
Street and No. 5555 Montgomery Blvd NE	
P.O. State and ZIP Code Suite 24	
Albuquerque, N.M. 87109	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return Receipt Showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3800, Feb. 1982

PS Form 3871, Dec. 1980

● **SENDER:** Complete items 1, 2, 3, and 4.  
Add your address in the "RETURN TO" space  
on reverse.

**(CONSULT POSTMASTER FOR FEES)**

1. The following service is requested (check one).

☒ Show to whom and date delivered ..... —¢

☐ Show to whom, date, and address of delivery.. —¢

2. ☐ **RESTRICTED DELIVERY** ..... —¢  
(The restricted delivery fee is charged in addition to  
the return receipt fee.)

**TOTAL \$** \_\_\_\_\_

3. **ARTICLE ADDRESSED TO:**  
Ohio Casualty Insurance Co.  
5555 Montgomery Blvd., N.E.  
Suite 24

4. **ARTICLE OF SERVICE:** **ARTICLE NUMBER**  
☐ REGISTERED ☐ INSURED  
☒ CERTIFIED ☐ COD P 506 040 528  
☐ EXPRESS MAIL

**(Always obtain signature of addressee or agent)**

I have received the article described above.

**SIGNATURE** ☐ Addressee ☐ Authorized agent  
*Barbara Garcia*

5. **DATE OF DELIVERY**  
5-2-84

6. **ADDRESSEE'S ADDRESS** (Only if required)

7. **UNABLE TO DELIVER BECAUSE:**

7a. **EMPLOYEE'S INITIALS**

**POSTMARK**  
506  
MAY  
1984

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

P 506 040 527

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Manvar Mining, Inc.	
Street and No. 426 W. Roosevelt	
P.O., State and ZIP Code Grants, New Mexico 87020	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to whom and Date Delivered	
Return Receipt Showing to whom Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

PS Form 3811, Dec. 1980

<p>● <b>SENDER:</b> Complete items 1, 2, 3, and 4. Add your address in the "RETURN TO" space on reverse.</p>	
<p><b>(CONSULT POSTMASTER FOR FEES)</b></p>	
<p>1. The following service is requested (check one).</p> <p><input checked="" type="checkbox"/> Show to whom and date delivered ..... —¢</p> <p><input type="checkbox"/> Show to whom, date, and address of delivery.. —¢</p> <p>2. <input type="checkbox"/> <b>RESTRICTED DELIVERY</b> —¢ (The restricted delivery fee is charged in addition to the return receipt fee.)</p>	
<p><b>TOTAL \$</b> _____</p>	
<p>3. <b>ARTICLE ADDRESSED TO:</b> Manvar Mining, Inc. 426 W. Roosevelt Grants, New Mexico 87020</p>	
<p>4. <b>TYPE OF SERVICE:</b></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</p>	<p><b>ARTICLE NUMBER</b> P 506 040 527</p>
<p><b>(Always obtain signature of addressee or agent)</b></p> <p>I have received the article described above.</p> <p><b>SIGNATURE</b> <input checked="" type="checkbox"/> Addressee <input type="checkbox"/> Authorized agent</p> <p><i>[Signature]</i></p>	
<p>5. <b>DATE OF DELIVERY</b></p>	<p><b>POSTMARK</b> 2 1984</p>
<p>6. <b>ADDRESSEE'S ADDRESS (Only if requested)</b></p>	
<p>7. <b>UNABLE TO DELIVER BECAUSE:</b></p>	<p>7a. <b>EMPLOYEE'S INITIALS</b> <i>[Initials]</i></p>

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
OIL CONSERVATION DIVISION  
AZTEC DISTRICT OFFICE

TONEY ANAYA  
GOVERNOR

1000 RIO BRAZOS ROAD  
AZTEC, NEW MEXICO 87410  
(505) 334-6178

April 12, 1984

Mr. Perry W. Pearce  
Oil Conservation Division  
P.O. Box 2088  
Santa Fe NM 87501

*Case 8171*

Re: Forced Plugging Case

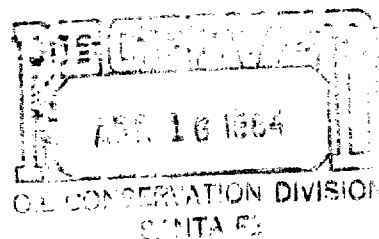
Dear Perry,

Please docket a case calling Manvar Mining, Inc., and all other interested parties to appear and show cause why the Manvar #1, located 330 feet from the North line and 330 feet from the East line of section 20, township 14 North, range 7 West, McKinley County, should not be plugged and abandoned in accordance with a Division approved plugging program.

Yours truly,

Charles Gholson  
Deputy Oil and Gas Inspector

CG/lh





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

TONEY ANAYA  
GOVERNOR

May 10, 1984

POST OFFICE BOX 2088  
STATE LAND OFFICE BUILDING  
SANTA FE, NEW MEXICO 87501  
(505) 827-5800

Manvar Mining, Inc.  
426 W. Roosevelt  
Grants, New Mexico 87020

Re: CASE NO. 8171  
ORDER NO. R-7523

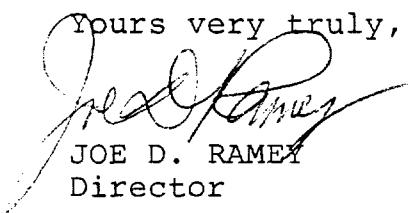
Applicant:

OCD (Manvar Mining, Inc.)

Dear Sir:

Enclosed herewith are two copies of the above-referenced  
Division order recently entered in the subject case.

Yours very truly,

  
JOE D. RAMEY  
Director

JDR/fd

Copy of order also sent to:

Hobbs OCD x  
Artesia OCD x  
Aztec OCD x

Other Ohio Casualty Insurance Company



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

TONEY ANAYA  
GOVERNOR

May 1, 1984

POST OFFICE BOX 2088  
STATE LAND OFFICE BUILDING  
SANTA FE, NEW MEXICO 87501  
(505) 827-5800

CERTIFIED - RETURN  
RECEIPT REQUESTED

Manvar Mining, Inc.  
426 W. Roosevelt  
Grants, New Mexico 87020

Ohio Casualty Insurance Company  
5555 Montgomery Blvd., N.E.  
Suite 24  
Albuquerque, New Mexico 87109

Re: Manvar Well No. 1,  
located in Unit A of  
Section 20, Township 14  
South, Range 7 West,  
McKinley County  
Plugging Bond

Gentlemen:

Enclosed is a copy of the docket of the Examiner Hearing to be held on Wednesday, May 9, 1984, at 8 o'clock a.m. in the Oil Conservation Division Conference Room, State Land Office Building, Santa Fe, New Mexico. Case 8171 concerns the above captioned subject matter.

Sincerely,

W. PERRY PEARCE  
GENERAL COUNSEL

WPP/fd  
enc.