CROWN CENTRAL PETROLEUM CORPORATION

PRODUCERS • REFINERS • MARKETERS OF PETROLEUM PRODUCTS AND PETROCHEMICALS
4000 NORTH BIG SPRING, SUITE 213 • MIDLAND, TEXAS 79705 (915) 683-6251

June 11, 1987

Sabine Corporation
100 LTV Center
2001 Ross Avenue
Dallas, Texas 75201-2993

Attention: Mr. Robert Floyd

RE: SE/4 Section 25, T-19-S, R-38-E, N.M.P.M.
Lea County, New Mexico

Gentlemen:

This letter is to advise that Crown Central Petroleum Corporation plans to seek a pooling order from the New Mexico Oil Conservation Commission in order to force pool all mineral and leasehold interests under the subject acreage from the surface down to the base of the Abo Formation, at an approximate depth of 8,000 feet, to be dedicated to a well at a standard location.

This is a wildcat Abo well and if it is completed as an oil well the SE/4 SE/4 of Section 25 will be dedicated to the well. If it is a gas well, the SE/4 of Section 25 will be dedicated to the well.

The forced pooling application has been set for hearing on July 1, 1987 before the New Mexico Oil Conservation Division. Please call if you should have any questions pertaining to this matter.

Very truly yours,

Crown Central Petroleum Corporation

R. G. Reasoner
Landman

RGR/bh

BEFORE EXAMINER CATANACH
OIL CONSERVATION DIVISION
EXHIBIT NO. 2
CASE NO. 9161

PS Form 3811, July 1983

SENDER: Complete items 1, 2, 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Estate of W. A. Yeager
Suite 200, Petroleum Building
214 W. Texas Avenue
Midland, Texas 79701

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035 010

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X Cheryl Lauer

7. Date of Delivery
6-12-87

8. Addressee's Address (ONLY if requested and fee paid)
SAME

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Mr. W. A. Yeager, Jr.
Estate of W. A. Yeager
Suite 200, Petroleum Building
214 W. Texas Avenue
Midland, Texas 79701

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035 015

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X Cheryl Lauer

6. Signature – Agent
X

7. Date of Delivery
6-17-87

8. Addressee's Address (ONLY if requested and fee paid)
Same

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Kirby Exploration Company of Texas
Attention: Ms. Linda Schwarzbach
1717 St. James Place
P. O. Box 1745
Houston, Texas 77251

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035 016

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
6-09-87

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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2. ☒ Restricted Delivery.

3. Article Addressed to:
Kirby Exploration Company
Attention: Ms. Linda Schwarzbach
P. O. Box 1745
Houston, Texas 77251

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035 012

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Estate of J. M. Armstrong
Suite 200, Petroleum Build
214 W. Texas Avenue
Midland, Texas 79705

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X Cheryl Lauer

6. Signature – Agent
X

7. Date of Delivery
6-12-87

8. Addressee's Address (ONLY if requested and fee
SAME

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Sabine Corporation
100 LTV Center
2001 Ross Avenue
Dallas, Texas 75201-2993

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 034 999

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
4-24-87

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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2. ☐ Restricted Delivery.

3. Article Addressed to:
Sabine Corporation
Attention: Mr. Robert Floyd
100 LTV Center
2001 Ross Avenue
Dallas, Texas 75201-2993

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035 011

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
6-15-87

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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2. ☐ Restricted Delivery.

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Sabine Corporation
100 LTV Center
2001 Ross Avenue
Dallas, Texas 75201-2993

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035 017

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
6-25-87

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

SENDER: Complete items 1, 2, 3 and 4.

Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.

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2. ☐ Restricted Delivery.

3. Article Addressed to:
Kirby Exploration Co.
P.O. Box 1745
Houston, Texas 77251

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035 000

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery APR 27 1987

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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2. ☐ Restricted Delivery.

3. Article Addressed to:
Estate of J. M. Armstrong
Suite 200, Petroleum Build
214 W. Texas Avenue
Midland, Texas 79701

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 652 035

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X Cheryl Lauer

6. Signature – Agent
X

7. Date of Delivery
6-17-87

8. Addressee's Address (ONLY if requested and fee
Same

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Amerada Hess Corporation
Attention: Mr. Bill Hough
1200 Milam Street
Houston, Texas 77002

4. Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail
Article Number: P652 035 005

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
JUN 15 1987

8. Addressee's Address *(ONLY if requested and fee paid)*

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Thomas H. Ellis
804 Jefferson
Fall River, Massachusetts 02722

4. Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail
Article Number: P 652 035 006

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Heirs or Devisee
Herbert C. Seelye
211 Bay Street
Glen Falls, New York 12801

4. Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail
Article Number: P 652 035 007

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X Marshall B. Lake

6. Signature – Agent
X

7. Date of Delivery
6/17/87

8. Addressee's Address *(ONLY if requested and fee paid)*

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Heirs or Devisee of
Charles J. Eichman
4054 Louisiana
San Diego, California

4. Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail
Article Number: P652-035-013

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

DOMESTIC RETURN RECEIPT

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US FUNDS

1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Rachel M. Cox
916 W. Main
Chrisfield, Maryland

4. Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail
Article Number: P 652 035 008

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
06-16-87

8. Addressee's Address *(ONLY if requested and fee paid)*

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Louis Stromwasser
2807 Monroe Street
Wilmington, DE 19902

4. Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail
Article Number: P 652 035 014

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983

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1. ☒ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Emma S. Pierson
P. O. Box 206 RD #1
Hockessin, DE 19707

4. Type of Service: ☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail
Article Number: P 652 035 004

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X William A Pierson

7. Date of Delivery

8. Addressee's Address *(ONLY if requested and fee paid)*

DOMESTIC RETURN RECEIPT

FORM 3-13
Rev. 1-1-83

CROWN CENTRAL PETROLEUM CORPORATION

AUTHORIZATION FOR EXPENDITURE

A.F.E. No. 025942
Addendum No.
Date June 29, 1987

Lease: Emerald Well No. 1 Ser. No. and/or Permit
Location: Lse Lines T19S, R38E, Sec. 25, Unit P
Survey Lines

Field Nadine County Lea State New Mexico TD 8000'
Project: Drill and Complete 8000' Abo Test

Exploration [X] Development [ ] Recompletion [ ] Plug & Abandon [ ]

DESCRIPTION				Quantity	Code	Dry Hole	Code	Completion
Intangibles					01		30	
Contract Drlg.	Turnkey/Footage	$ 10.00	/ft.	8000	02	80,000		
Contract Drlg.	Day rate	$ 3600	/day		02	10,800		
Contract Drlg.	MI RU & RD				02			
Completion/Recompletion Unit		$ 1000	/day	14	—		32	14,000
Fuel & Water					03	10,000	33	5,000
Location & Roads					04	10,000	34	
Mud & Chemicals					05	10,000	35	
Cement & Service: Csg, Liners, Zone & Blk Sqz.					06	8,500	36	16,000
Rentals - equipment					07	5,000	37	5,000
Test & Inspection Service					08		38	2,000
Well Surveys: Directional, Caliper, Csg, etc.					09		39	
Logging: Elect. RFT, SWC, DST, Coring & Analysis etc.					10	20,000	40	3,000
Non-Controllable expendible material & equip (bits etc.)					11		41	10,000
Labor-Contract					12	5,000	42	10,000
Geological, Paleo & Engineering Service					13	4,000	43	
Wireline Service: Perf., Swabbing & slick line service					14		44	5,000
Stimulation & Service					—		45	25,000
Damage Claims - Surface					16	10,000	46	
Insurance					17		47	
Contract Overhead					18		48	
Transportation					19		49	2,000
Contingency					20		50	
Sub Total Intangibles		$ 270,300			01	173,300	30	97,000
Tangibles					61		62	
Conductor Csg.	13-3/8 "OD	54.50 #	H-40 Gr. ST&C	Thrd. 40	51	1,000		
Surface Csg.	8-5/8 "OD	24 #	K-55 Gr. ST&C	Thrd. 1600	51	13,200		
Intermed Csg.	"OD	#	Gr.	Thrd.	51			
Csg.	"OD	#	Gr.	Thrd.	51			
Csg.	"OD	#	Gr.	Thrd.	51			
Csg.	"OD	#	Gr.	Thrd.	51			
Production Csg.	5-1/2 "OD	17#&15.50 #	K-55 Gr. LT&C	Thrd. 800	—		52	39,000
Production Tbg	2-3/8 "OD	4.7 #	J-55 Gr. EUE	Thrd.	—		52	12,000
Well Head & Hangers					53	2,000		
X-Mas Tree / Pump Jack & Engine					—		54	25,000
Tanks & Manifolds					—		55	10,000
Separators, Heaters & Treater					—		55	7,500
Compressor & Dehydration Equip					—		56	-
Electric Systems & Transmission Lines					—		57	7,000
Flowlines and/or Pipe lines					—		58	3,000
Foundation & Structures					—		59	-
Non-Controllable-Pkrs, Nipples, Blast Jts, Rods, Mandrels					—		60	10,000
Sub-Total - Tangibles				129,700	61	16,200	62	113,500
Total Expenditure				400,000		189,500		210,500
Recoverable from Joint Interest								
Net Expenditure				400,000		189,500		210,500

Prepared By: L. R. Belden

Application of Net Expenditure
Capital Equip.
Intangibles
Depreciation
Maintenance

Joint Interest Approvals:

Operator Crown Central Petroleum Corp.	By: R. G. Belden	W.I. 100%	Date	6/29/87
Company	By:	W.I.	Date	
Company	By:	W.I.	Date	
Company	By:	W.I.	Date	
Company	By:	W.I.	Date	
Company	By:	W.I.	Date	
Company	By:	W.I.	Date	

BEFORE EXAMINER CATANACH
OIL CONSERVATION DIVISION
EXHIBIT NO. 3
CASE NO. 9161