

Exxon Exhibit No. 1

Case No. 9-1-6

Hearing Date: April 27, 1988

Exhibits 1 through 5  
Complete Set

0 5 10 20  
Scale in Miles

<b>EXXON CORP.</b>		
<b>SHIPP (STRAWN) FIELD</b>		
Location Map		
T-17-S	R-37-E	Lea
LOCATION	COUNTY	STATE
April 1988		

Barbara Fasken

B. FASKEN  
Cons. State #3

BHL EXXON  
EX #2

(Hanley Pet.)

Pennzoil

Harding

D. FASKEN  
Cons. State #1

9

EXXON  
(Hanley Pet.)

Proposed  
Exxon Location

Hanley Pet.  
(EXXON)  
(Mesa Oper.)  
(Vaughn Pet.)  
(Grayrock Corp.)

C.B. Gillespie Jr.

Vintage Pet.

Mesa

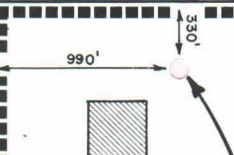
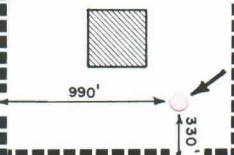


Apollo Oil

Consolidated Oil & Gas

C.B. Gillespie  
(Exxon)

Exxon



TEXAS INTL  
Nicholson #3

TEXAS INTL  
Nicholson #2

TEXAS INTL  
Nicholson #1

HARDING  
Shipp #5

HARDING  
Shipp #6

GILLESPIE  
#1 Shipp "DA"

Exxon Exhibit No. 2

Case No. 9366

Hearing Date: April 27, 1988

Orthodox Location Area

80 Acre Proration Unit

Strawn Producer

Dry Strawn Test

Proposed Location



EXXON CORP.

SHIPP (STRAWN) FIELD

Land Map

T-17-S R-37-E  
Lea New Mexico  
April, 1988

5))

**EXXON** COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

PRODUCTION DEPARTMENT  
SOUTHWESTERN DIVISION

March 24, 1988

New Mexico FF State  
Well No. 1  
Lea County, New Mexico

New Mexico Oil Conservation Commission  
P. O. Box 2088  
Santa Fe, New Mexico 87501

Exxon requests permission to drill the captioned well as an unorthodox location in the Undesignated Shipp-Strawn Pool.

Field Rules for the Shipp Strawn Pool specify that no well be drilled more than 150 feet from the center of a quarter quarter section. This well is staked 990 feet from the South line and 330 feet from the East line of Section 9, T17S, R37E in Lea County.

Exxon's seismic data indicates a Strawn carbonate mound development that can best be accessed from a well at the proposed unorthodox location.

By copy of this letter, offsetting operators and unleased mineral interest owners are notified of our intent to drill this well at an unorthodox location. If you have no objection to this proposal, please sign the attached waivers and mail them in the postage paid envelopes provided.

The list of offset operators notified is attached.

Sincerely

*Charlotte Harper*

Charlotte Harper  
Permits Supervisor

CHH:jjf  
Attachments

BEFORE EXAMINER STOGNER	
OIL CONSERVATION DIVISION	
<u>Exxon</u>	EXHIBIT NO. <u>3</u>
CASE NO	<u>9366</u>

New Mexico FF State #1  
Offset Operator's List

✓ T. W. Lovelady P. O. Box 2666 4520 W. Hwy. 80 Midland, TX 79703	✓ Florida Exploration Company c/o Enron Oil and Gas P. O. Box 2267 508 W. Wall, Ste. 1100 Midland, TX 79701	RT15 Securities Fund Investors Incorporated P. O. No. 30 Rockefeller Plaza New York, NY 10020
✓ Delta U. S. Corporation Attn: Joan Mullenax 110 N. College Tyler, TX 75710-2012	RT25 Huron Drilling Corporation 1700 Broadway, Suite 1122 Tower Building Denver, CO 80202	RT25 Petroleum Properties Inc. Petroleum Invest. Services Inc Freda Jackson & Leon DuCharme No. 30 Rockefeller Plaza New York, NY 10020
✓ Pennzoil Company 200 N. Loraine, Ste. 1230 Briarcroft Building Midland, TX 79702	✓ TOG Limited Partnership P. O. Box 352 West Point, CT 06881	✓ Ladd Petroleum Corporation P. O. 370 17th Street, Ste. 1700 Denver, CO 80202-5617
✓ Kerr-McGee Corporation One Marienfeld Place, Ste. 330 Midland, TX 79701	✓ Segal Oil and Gas Incorporated P. O. No. 6 Peter Cooper Road New York, NY 10010	✓ Barbara Fasken P. O. 303 W. Wall Avenue Suite 1901 Midland, TX 79701-5116
✓ C. Wayne Greenlee P. O. 41 East Illinois Suite 401 Midland, TX 79701	✓ Harry A. Trueblood, Jr. P. O. Lincoln Twr. Bldg., Ste. 1300 1860 Lincoln Street Denver, CO 80295	✓ Richard S. Brooks P. O. 303 W. Wall Ave. Suite 608 Midland, TX 79701-0608
✓ Charles B. Gillespie Charles B. Gillespie, Jr. 550 W. Texas, Tower 2, Ste. 670 Midland, TX 79702	✓ John J. O'Shea, Trustee P. O. Longwood Daniel M. O'Shea, and John E. McDermott 1860 Lincoln Street, Ste. 1100 Denver, CO 80295	✓ Robert H. Angevine P. O. 3601 Imperial Avenue Midland, TX 79703
✓ Sohio Petroleum Company 9401 Southwest Freeway Suite 600 Houston, TX 77074	RT15 ✓ John M. Templeton, Jr. and RT15 ✓ John M. Templeton, Jr. as Trustee P. O. Box 408 Englewood, NJ 07631	✓ James B. Henry P. O. 3104 Shell Avenue Midland, TX 79705
✓ Mesa Operating Ltd. Partnership and Mesa Ltd. Partnership One Mesa Square Amarillo, TX 79189	RT25 ✓ John M. Templeton, Jr. and RT25 ✓ John M. Templeton, Jr. as Trustee 3309 Lindlewood Crescent Chesapeake, VA 23321	✓ Unicon Producing Company P. O. 1 Riverway Box 2120 Houston, TX 77001
✓ Consolidated Oil and Gas Inc. 1860 Lincoln Street Suite 1100 Denver, CO 80295	Thomas M. Yett 901 Sherman Street Denver, CO 80206	✓ Union Texas Explor. Corp. P. O. 1330 Post Oak Blvd. Houston, TX 77252-2120
✓ Apollo Oil Company P. O. Box 278 Hobbs, NM 88240	✓ Gross Oil Delaware Corporation P. O. 110 East 57th Street New York, NY 10019	✓ Exploration Finance Company P. O. 13910 Champion Forrest Dr., Suite 200 Houston, TX 77069

New Mexico FF State #1  
Offset Operator's List  
(Con't)

0 Hanley Petroleum, Inc. ✓  
1500 Wilco Building  
Midland, TX 79701

WAIVER

New Mexico Oil Conservation Commission  
P. O. Box 2088  
Santa Fe, New Mexico 87501

This is to advise that the undersigned has been given due notice that Exxon Corporation has made an application for an unorthodox location for the New Mexico FF State Well No. 1 in the Undesignated Shipp-Strawn.

We hereby waive any objection to the granting of this application for the above well which will be located 990 feet FSL and 330 feet FEL of Section 9, T17S, R37E, Lea County, New Mexico.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 1988.

Company \_\_\_\_\_

By \_\_\_\_\_

WAIVER

Exxon Corporation  
P. O. Box 1600  
Midland, Texas 79702

Attention Stephen Johnson

This is to advise that the undersigned has been given due notice that Exxon Corporation has made an application for an unorthodox location for the New Mexico FF State Well No. 1 in the Undesignated Shipp-Strawn.

We hereby waive any objection to the granting of this application for the above well which will be located 990 feet FSL and 330 feet FEL of Section 9, T17S, R37E, Lea County, New Mexico.

Executed this \_\_\_\_\_ day of \_\_\_\_\_, 1988.

Company \_\_\_\_\_

By \_\_\_\_\_

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION

P. O. BOX 2088

SANTA FE, NEW MEXICO 87501

Form C-101  
Revised 10-1-78

NO. OF COPIES RECEIVED	
DISTRIBUTION	
SANTA FE	
FILE	
U.S.G.S.	
LAND OFFICE	
OPERATOR	

5A. Indicate Type of Lease  
STATE ☒ FEE ☐  
5. State Oil & Gas Lease No.  
V-1356

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

1a. Type of Work b. Type of Well OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/> DRILL <input checked="" type="checkbox"/> DEEPEN <input type="checkbox"/> PLUG BACK <input type="checkbox"/> SINGLE ZONE <input type="checkbox"/> MULTIPLE ZONE <input type="checkbox"/>		7. Unit Agreement Name
2. Name of Operator Exxon Corporation Attn: Permits Supervisor		8. Farm or Lease Name New Mexico FF State
3. Address of Operator P. O. Box 1600, Midland, TX 79702		9. Well No. 1
4. Location of Well UNIT LETTER P LOCATED 990 FEET FROM THE S LINE AND 330 FEET FROM THE E LINE OF SEC. 9 TWP. 17S RCE. 37E NMPM		10. Field and Pool, or Wildcat Undes. Shipp-Strawn
		12. County Lea
		19. Proposed Depth 11,700
		19A. Formation Strawn
		20. Rotary or C.T. Rotary
1. Elevations (Show whether DF, RT, etc.) 3762 GR	21A. Kind & Status Plug. Bond Blanket	21B. Drilling Contractor Unknown
		22. Approx. Date Work will start June 1, 1988

23.

PROPOSED CASING AND CEMENT PROGRAM

SIZE OF HOLE	SIZE OF CASING	WEIGHT PER FOOT	SETTING DEPTH	SACKS OF CEMENT	EST. TOP
17 1/2	13 3/8	54.5	450	500 sx CLC	Surface
12 1/4	9 5/8	40	4400	950 sx CLC	Surface
7 7/8	5 1/2	17, 15.5	TD	1275 sx CLH	3800'

IN ABOVE SPACE DESCRIBE PROPOSED PROGRAM; IF PROPOSAL IS TO DEEPEN OR PLUG BACK, GIVE DATA ON PRESENT PRODUCTIVE ZONE AND PROPOSED NEW PRODUCTIVE ZONE. GIVE BLOWOUT PREVENTER PROGRAM, IF ANY.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

Signed Charlotte Harper Title Permits Supervisor Date 3-24-88

(This space for State Use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:



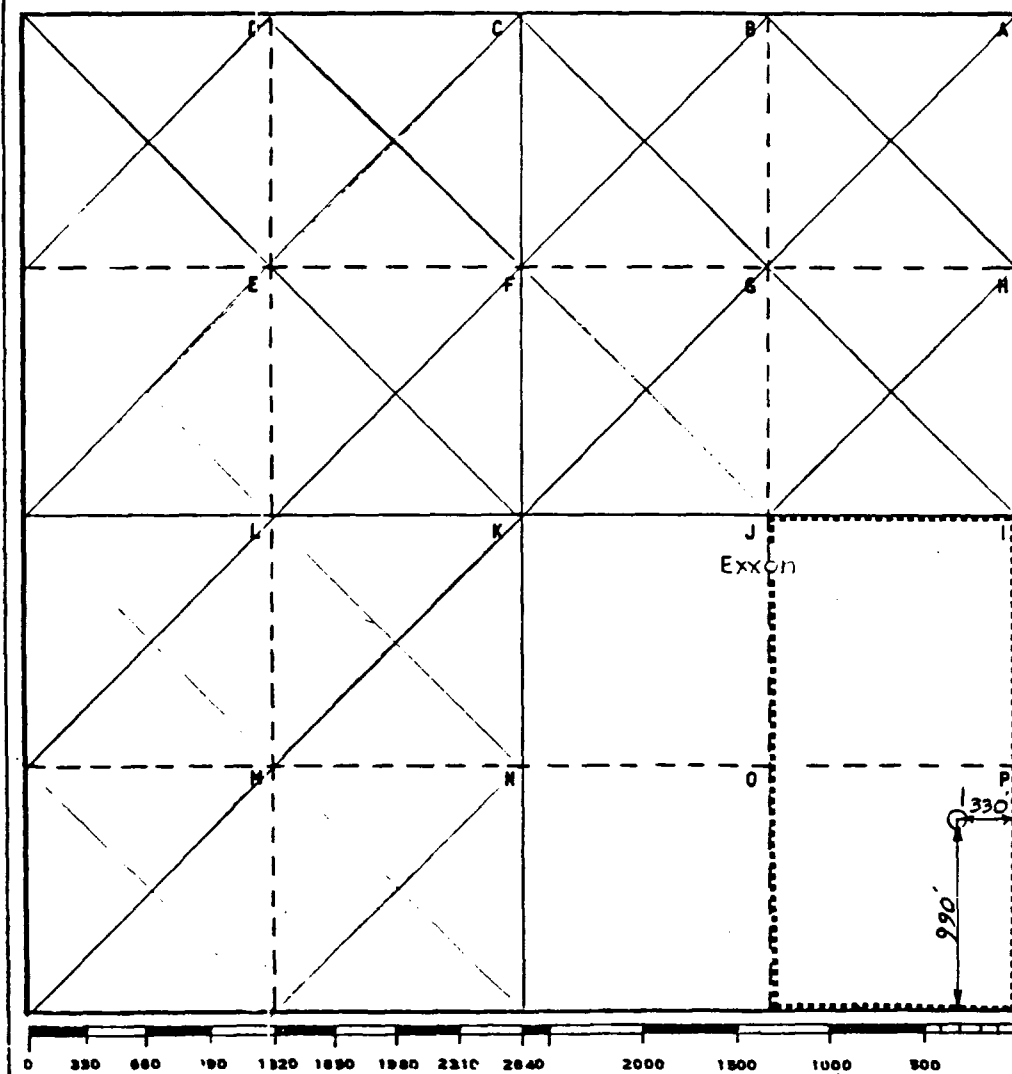
Operator Exxon Corporation		Lease NEW MEXICO "FF" STATE		Well No. 1
Unit Letter P	Section 9	Township 17S	Range 37E	County LEA
Actual Footage Location of Well: 330' feet from the EAST line and 990' feet from the SOUTH line				
Ground Level Elev. 3762'	Producing Formation STRAWN	Pool UNDESIGNATED SHIPP	Dedicated Acreage: 80 Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

☐ Yes ☐ No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



#### CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

*Charlotte Harper*

Name  
Charlotte Harper

Position  
Permits Supervisor

Company Exxon Corporation  
Box 1600 Midland, Texas

Date  
3-24-88

*Bruce R. Pennell*  
I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed  
3-17-88

Registered Professional Engineer  
and/or Land Surveyor

*Bruce R. Pennell*

Certificate No.  
#9062

11.4 Miles NW of HOBBS, New Mexico

C.E. Sec. File No. WA-10100

**EXXON** COMPANY U.S.A.

CLAIM CHECK NO. 876077

Claim Check

No.

876077

☐ Hold

Date

4/15

1ST Notice

2ND Notice

Return

Detached from  
PS Form 3849-A,  
Oct. 1985

RETURN RECEIPT REQUESTED

CERTIFIED MAIL

NO. 369093

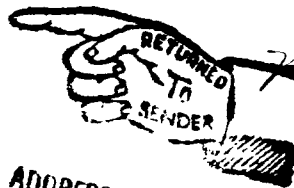
John M. Templeton, Jr. and  
John M. Templeton, Jr. as  
Trustee  
3309 Lindewood Crescent  
Chesapeake, VA 23321

SOUTHWESTERN

|||||

**EXXON** COMPANY U.S.A.

P.O. BOX 1507 • MIDLAND, TEXAS 79701



ADDRESSEE UNKNOWN  
NEW YORK, N.Y. 10020

RETURN RECEIPT REQUESTED

CERTIFIED MAIL

NO.

369097

Petroleum Properties, Inc.  
Petroleum Invest. Services Inc.  
Freda Jackson & Leon DuCharme  
No. 30 Rockefeller Plaza  
New York, NY 10020

|||||

*Unknown*  
4/12/88

**EXXON** COMPANY, U.S.A.

P.O. BOX 1600 • M.D. ALA. TEL. 1-800-222-1600

Claim C  
No.

1205

☐ Hol

Date \_\_\_\_\_

151 dot

 $2N^2$  17,

Detached from  
PS Form 100-1  
Oct. 1935

REFURN RECEIPT REQUESTED

CERTIFIED MAIL  
369100  
NO.

NO.

ADDRESSEE UNKNOWN  
NEW YORK, N.Y. 10020

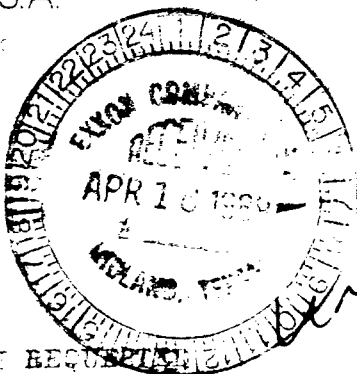
~~Securities Fund  
Investors Incorporated  
No. 30 Rockefeller Plaza  
New York, NY 10020~~

4/11

**Abstract** The purpose of this study was to determine whether there were differences in the prevalence of risk factors for coronary artery disease between men who had been exposed to asbestos and those who had not. A case-control study was conducted among men aged 60 years or older who resided in the same community as the subjects of the first National Health and Medical Research Council Australian Cancer Incidence Study. Cases were defined as men with a confirmed diagnosis of myocardial infarction or angina pectoris. Controls were randomly selected from the electoral roll. Information on potential risk factors was obtained by telephone interview. There were no significant differences between cases and controls in age, education, occupation, smoking status, alcohol consumption, or family history of coronary artery disease. However, exposure to asbestos was significantly more prevalent among cases than among controls ( $P = .007$ ). This finding suggests that exposure to asbestos may be associated with an increased risk of developing coronary artery disease.

**EXXON** COMPANY, U.S.A.

P.O. BOX 1500 • MIDLAND TX 79701-1500



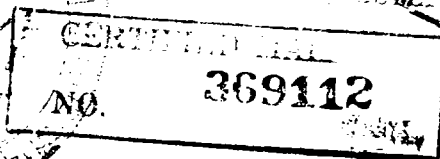
~~RETURN BROKER REQUEST~~

**CERTIFIED MAIL**  
**369089**

Huron Drilling Corporation  
1700 Broadway, Suite 1422  
Tower Building  
Denver, CO 80202

[illegible]

P.O. BOX 1600 • MIDLAND, TEXAS 79702-1600



John M. Templeton, Jr. and  
John M. Templeton, Jr. as  
Trustee  
P. O. Box 408  
Englewood, NJ 07631

4  
SOUTHWESTERN DIVISION



**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

☐ Show to whom delivered, date, and addressee's address. ☐ Restricted Delivery ☐ (Extra charge)†

Article Addressed to:

Consolidated Oil and Gas Inc.  
1860 Lincoln Street  
Suite 1100  
Denver, CO 80295

Article Number **369054**

Type of Service:  
☒ Registered  
☐ Certified  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

Signature - Addressee  
*Blanca Bugman*

Signature - Agent  
*Blanca Bugman*

Date of Delivery  
*3/29/88*

Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

APD - NM FF St. #1

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

☐ Show to whom delivered, date, and addressee's address. ☐ Restricted Delivery ☐ (Extra charge)†

Article Addressed to:

Seegal Oil and Gas Incorporated  
10. 6 Peter Cooper Road  
New York, NY 10010

Article Number **369053**

Type of Service:  
☒ Registered  
☐ Certified  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

Signature - Addressee  
*Seegal Oil and Gas*

Signature - Agent  
*Seegal Oil and Gas*

Date of Delivery  
*APR 4 1988*

Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

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☐ Show to whom delivered, date, and addressee's address. ☐ Restricted Delivery ☐ (Extra charge)†

Article Addressed to:

TOG Limited Partnership  
P. O. Box 352  
West Point, CT 06881

Article Number **369078**

Type of Service:  
☒ Registered  
☐ Certified  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

Signature - Addressee  
*TOG Limited Partnership*

Signature - Agent  
*TOG Limited Partnership*

Date of Delivery  
*3/29/88*

Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

APD - NM FF St. #1

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☐ Show to whom delivered, date, and addressee's address. ☐ Restricted Delivery ☐ (Extra charge)†

Article Addressed to:

Unicon Producing Company  
1 Riverway  
P. O. Box 2120  
Houston, TX 77001

Article Number **369078**

Type of Service:  
☐ Registered  
☒ Certified  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

Signature - Addressee  
*Unicon Producing Company*

Signature - Agent  
*Unicon Producing Company*

Date of Delivery  
*3/29/88*

Form 3811, Mar. 1987

DOMESTIC RETURN RECEIPT

ILLEGIBLE

PS Form 3811, Feb. 1986

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.  
1. ☐ Show to whom delivered, date, and addressee's address.  
2. ☐ Restricted Delivery  
3. Article Addressed to:  
4. Article Number

Sohio Petroleum Company  
9401 Southwest Freeway  
Suite 600  
Houston, TX 77074

5. Signature - Addressee  
X  
6. Signature - Agent  
X  
7. Date of Delivery  
3/29/88

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

Article Number 369045  
Type of Service:  
☒ Registered  
☐ Certified  
☐ Express Mail  
Always obtain signature of addressee or agent and DATE DELIVERED.

8. Addressee's Address (ONLY if requested and fee paid)  
9. Signature - Agent  
10. Date of Delivery

APD-NM FF St. #1

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.  
1. ☐ Show to whom delivered, date, and addressee's address.  
2. ☐ Restricted Delivery  
3. Article Addressed to:  
4. Article Number

Delta U. S. Corporation  
Attn: Joan Mullenax  
110 N. College  
Tyler, TX 75710-2012

5. Signature - Addressee  
X  
6. Signature - Agent  
X  
7. Date of Delivery  
3-28-88

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

Mesa Operating Ltd. Partnership  
and Mesa Ltd. Partnership  
One Mesa Square  
Amarillo, TX 79189

15. Signature - Addressee  
X  
16. Signature - Agent  
X  
17. Date of Delivery  
MAR 2 1988

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

APD-NM FF St. #1

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.  
1. ☐ Show to whom delivered, date, and addressee's address.  
2. ☐ Restricted Delivery  
3. Article Addressed to:  
4. Article Number

Exploration Finance Company  
13910 Champion Forrest Dr.,  
Suite 200  
Houston, TX 77064

5. Signature - Addressee  
X  
6. Signature - Agent  
X  
7. Date of Delivery  
4-6-88

PS Form 3811, Mar 1987

DOMESTIC RETURN RECEIPT

ILLEGIBLE

**SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Harry A. Trueblood, Jr.  
Lincoln Twr. Bldg., Ste. 1300  
1860 Lincoln Street  
Denver, CO 80295

4. Article Number: 369949

Type of Service:  
☐ Registered  
☒ Certified  
☐ Express Mail  
☐ Insured  
☐ COD

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: *[Signature]*  
 6. Signature - Agent: *[Signature]*  
 7. Date of Delivery: 3.28.88

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

**SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Ladd Petroleum Corporation  
370 17th Street, Ste. 1700  
Denver, CO 80202-5617

4. Article Number: 369949

Type of Service:  
☐ Registered  
☒ Certified  
☐ Express Mail  
☐ Insured  
☐ COD

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: *[Signature]*  
 6. Signature - Agent: *[Signature]*  
 7. Date of Delivery: 3.28.88

PS Form 3811, Mar. 1985

DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Kerr-McGee Corporation  
One Marienfeld Place, Ste. 330  
Midland, TX 79701

4. Article Number: 369949

Type of Service:  
☐ Registered  
☒ Certified  
☐ Express Mail  
☐ Insured  
☐ COD

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: *[Signature]*  
 6. Signature - Agent: *[Signature]*  
 7. Date of Delivery: 3.28.88

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Florida Exploration Company  
c/o Enron Oil and Gas  
P. O. Box 2267  
508 W. Wall, Ste. 1100  
Midland, TX 79701

4. Article Number: 369949

Type of Service:  
☐ Registered  
☒ Certified  
☐ Express Mail  
☐ Insured  
☐ COD

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: *[Signature]*  
 6. Signature - Agent: *[Signature]*  
 7. Date of Delivery: 3.28.88

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

ILLEGIBLE

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery†  
†(Extra charge)

3. Article Addressed to:

Hanley Petroleum, Inc.  
1500 Wilco Building  
Midland, TX 79701

4. Article Number  
**369051**

Type of Service:

☐ Registered  
☒ Certified  
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery

PS Form 3811, Mar. 1987

★ U.S.G.P.O. 1987-178-268

DOMESTIC RETURN RECEIPT

NM FF St. #1 - APD

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery†  
†(Extra charge)

3. Article Addressed to:

James B. Henry  
3104 Shell Avenue  
Midland, TX 79705

4. Article Number

**369050**

Type of Service:

☐ Registered  
☒ Certified  
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery

PS Form 3811, M 1987

★ U.S.G.P.O. 1987-178-268

DOMESTIC RETURN RECEIPT

Charles B. Gillespie

Charles B. Gillespie, Jr.

550 W. Texas, Tower 2, Ste. 670

Midland, TX 79702

8. Signature - Agent

9. Date of Delivery

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

APD-NM FF St. #1

● **SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery†  
†(Extra charge)

3. Article Addressed to:

Pennzoil Company  
200 N. Loraine, Ste. 1230  
Briarcroft Building  
Midland, TX 79702

4. Article Number

**369074**

Type of Service:

☐ Registered  
☒ Certified  
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

ILLEGIBLE



APD-NM FF St. #1

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery <sup>1</sup>(Extra charge)

3. Article Addressed to:		4. Article Number <b>369057</b>	
Barbara Fasken 303 W. Wall Avenue Suite 1901 Midland, TX 79701-5116		Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
5. Signature — Addressee <b>X</b>		Always obtain signature of addressee or agent and DATE DELIVERED.	
6. Signature — Agent <b>X</b> <i>W. Taylor</i>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery <b>3-28-88</b>			

PS Form 3811, Mar. 1987 \* U.S.G.P.O. 1987-176-268 DOMESTIC RETURN RECEIPT

APD-NM FF St. #1

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery <sup>1</sup>(Extra charge)

3. Article Addressed to:		4. Article Number <b>369062</b>	
I. W. Lovelady P. O. Box 2666 4520 W. Hwy. 80 Midland, TX 79703		Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
5. Signature — Addressee <b>X</b>		Always obtain signature of addressee or agent and DATE DELIVERED.	
6. Signature — Agent <b>X</b> <i>Dana Hansen</i>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery <b>3-28-88</b>			

PS Form 3811, Mar. 1987 \* U.S.G.P.O. 1987-176-268 DOMESTIC RETURN RECEIPT

APD-NM FF St. #1

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery <sup>1</sup>(Extra charge)

3. Article Addressed to:		4. Article Number <b>369070</b>	
Richard S. Brooks 303 W. Wall Ave. Suite 608 Midland, TX 79701-0608		Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
5. Signature — Addressee <b>X</b>		Always obtain signature of addressee or agent and DATE DELIVERED.	
6. Signature — Agent <b>X</b> <i>C. Taylor</i>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery <b>3-28-88</b>			

PS Form 3811, Mar. 1987 \* U.S.G.P.O. 1987-176-268 DOMESTIC RETURN RECEIPT

APD-NM FF St. #1

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery <sup>1</sup>(Extra charge)

3. Article Addressed to:		4. Article Number <b>369047</b>	
Gross Oil Delaware Corporation 110 East 57th Street New York, NY 10019		Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
5. Signature — Addressee <b>X</b>		Always obtain signature of addressee or agent and DATE DELIVERED.	
6. Signature — Agent <b>X</b> <i>C. Taylor</i>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery <b>4-1-88</b>			

PS Form 3811, Mar. 1987 \* U.S.G.P.O. 1987-176-268 DOMESTIC RETURN RECEIPT

ILLEGIBLE

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery 1/Extra charge

3. Article Addressed to:

Union Texas Explor. Corp.  
1330 Post Oak Blvd.  
Houston, TX 77252-2120

4. Article Number  
**369059**

Type of Service:  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
*[Signature]*

6. Signature - Agent  
*[Signature]*

7. Date of Delivery  
*3/29/88*

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

PS Form 3811, Mar. 1987 \* U.S.G.P.O. 1987-178-288 DOMESTIC RETURN RECEIPT

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery 1/Extra charge

3. Article Addressed to:

John J. O'Shea, Trustee  
Longwood Daniel M. O'Shea, and  
John L. McDermott  
1960 Rippling Street, Ste. 1100  
DENVER, CO 80295

4. Article Number  
**369066**

Type of Service:  
☒ Registered ☐ Insured  
☐ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
*[Signature]*

6. Signature - Agent  
*[Signature]*

7. Date of Delivery  
*3/29/88*

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

PS Form 3811, Feb. 1986 DENVER MAR 28 1988 HILL STA 8861 1988 DOMESTIC RETURN RECEIPT

ILLEGIBLE

3. Article Addressed to:

C. Wayne Greenlee  
41 East Illinois  
Suite 401  
Midland, TX 79701

4. Article Number

**369064**

Type of Service:  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
*[Signature]*

6. Signature - Agent  
*[Signature]*

7. Date of Delivery  
*MAR 28 1988*

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

PS Form 3811, Feb. 1986 DOMESTIC RETURN RECEIPT

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 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 additional service(s) requested.

1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery 1/Extra charge

3. Article Addressed to:

Robert H. Angevine  
3601 Imperial Avenue  
Midland, TX 79703

4. Article Number  
**369064**

Type of Service:  
☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
*[Signature]*

6. Signature - Agent  
*[Signature]*

7. Date of Delivery  
*MAR 28 1988*

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

PS Form 3811, Mar. 1987 \* U.S.G.P.O. 1987-178-288 DOMESTIC RETURN RECEIPT

JOHN M. TEMPLETON, JR. and JOHN M. TEMPLETON, JR. as Trustee P. O. Box 408 Englewood, NJ 07631		Type of Service <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail	Always obtain signature of addressee and <b>DATE DELIVERED</b>
B. Ship to Address <i>[Signature]</i>	C. Ship to Address <i>[Signature]</i>	D. Ship to Address <i>[Signature]</i>	E. Ship to Address <i>[Signature]</i>

45-88-82

DOMESTIC RETURN RECEIPT

PS Form 3811, Feb. 1986

ADD-NM F ST FL <b>● SENDER:</b> Complete items 1 and 2 which additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent the 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. Contact postmaster for fees and check box(es) for additional service(s) requested.	
1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address.	2. <input type="checkbox"/> Restricted Delivery.
3. Article Addressed to:  Apollo Oil Company P. O. Box 278 Hobbs, NM 88240	
4. Article Number  369062	Type of Service: <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Addressee's Address ( <i>ONLY if requested and fee paid</i> )  <i>P.O. Box 278, Hobbs, NM</i> 5. Signature — Addressee <input checked="" type="checkbox"/> 6. Signature — Agent <input checked="" type="checkbox"/> 7. Date of Delivery <i>4-1-88</i>	

**EXXON** COMPANY, U.S.A.

POST OFFICE BOX 1600 • MIDLAND, TEXAS 79702-1600

PRODUCTION DEPARTMENT  
SOUTHWESTERN DIVISION

April 21, 1988

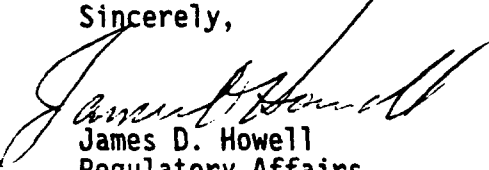
NMOCD Case #9366  
New Mexico FF State #1  
Lea County, NM

B. L. Estes, et.al.  
P. O. Box 352  
Westport, CT 06881

Exxon inadvertently failed to notify you of our application to drill the captioned well as an unorthodox location in the undesignated Shipp-Strawn Pool. Our well is staked 990' from the south line and 330' from the east of Section 9, T17S, R37E in Lea County. Field rules for the Shipp-Strawn Pool specify that no well will be drilled more than 150 feet from the center of a quarter-quarter section. Exxon is requesting this location because our seismic data indicates that a Strawn carbonate mound development can be best accessed from a well at the proposed unorthodox location.

If you have no objection to Exxon's application we would appreciate your executing the attached waivers and mailing them in the postage-paid envelopes provided. We have included copies of our prior April 7, and March 24 correspondence on the captioned well. If you have any questions, please contact Bill Duncan at (915)686-4105.

Sincerely,

  
James D. Howell  
Regulatory Affairs

JDH:djr  
Attachments

Express Mail

YC WTD  
Bill & Return  
both

# POST OFFICE TO ADDRESSEE

**EXPRESS MAIL**  
NEXT DAY SERVICE



**B**

4742305C

ORIGIN

Date: 4-21-88

Post Office:  
ZIP Code:

Initials of  
Receiving Clerk:

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**Account Number**

(Using an authorized number indicates postage and fees paid.)

Express Mail Corporate Account No.:

Federal Agency Control No.:

**FROM:**

**WAIVER OF  
SIGNATURE  
AND INDEMNITY**

I wish delivery to be made without obtaining the signature of the addressee or the addressee's agent and I authorize the delivery employee to sign that the shipment was delivered and understand that the signature of the delivery employee will constitute valid proof of delivery.

SIGNED \_\_\_\_\_

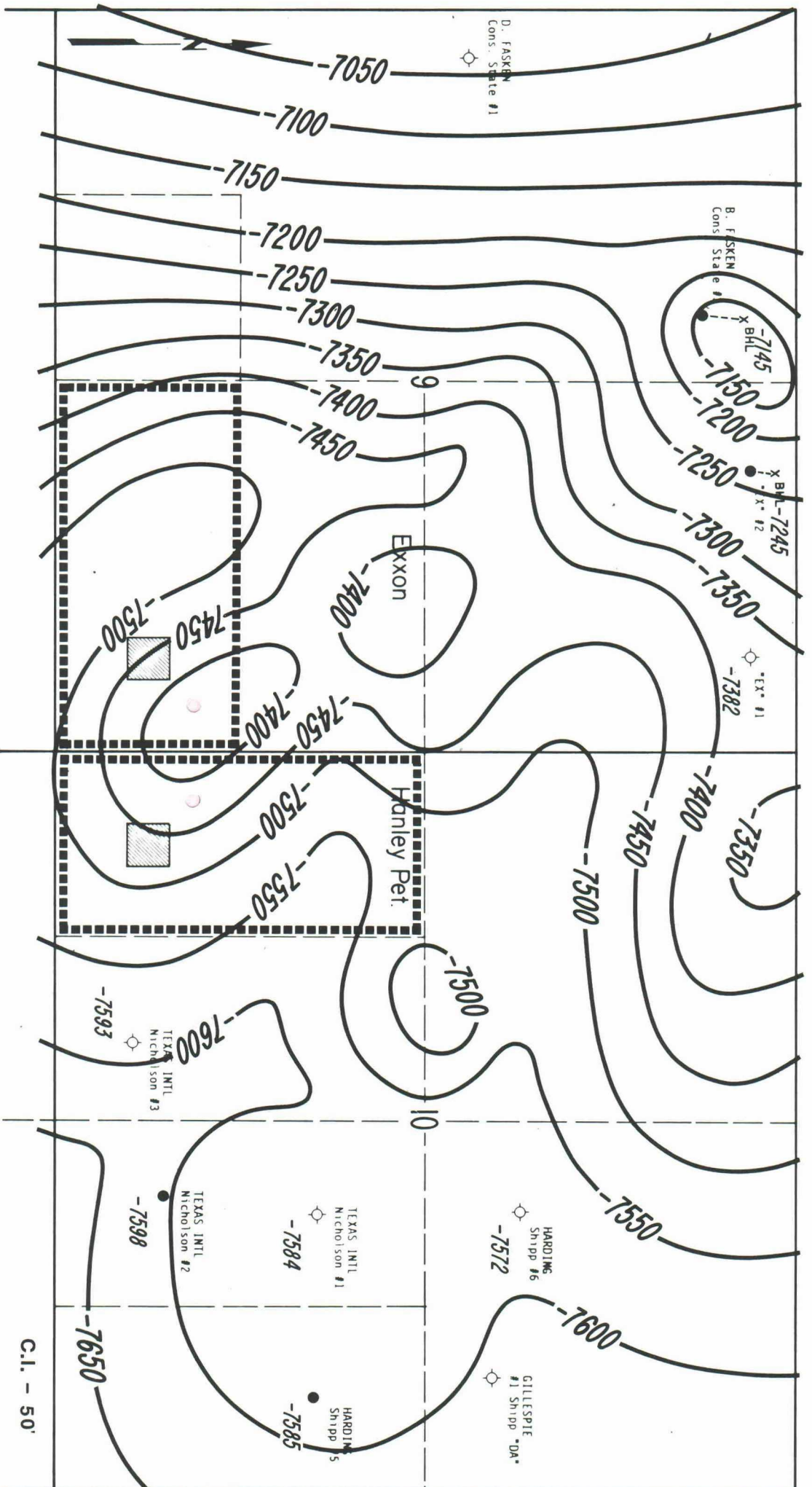
**CUSTOMER RECEIPT**

**TO:**

Telephone Number: \_\_\_\_\_

Label 11-B (Jan. 1987)

**Thank You For Using Express Mail Service**



Exxon Exhibit No. 4

Case No. 9366

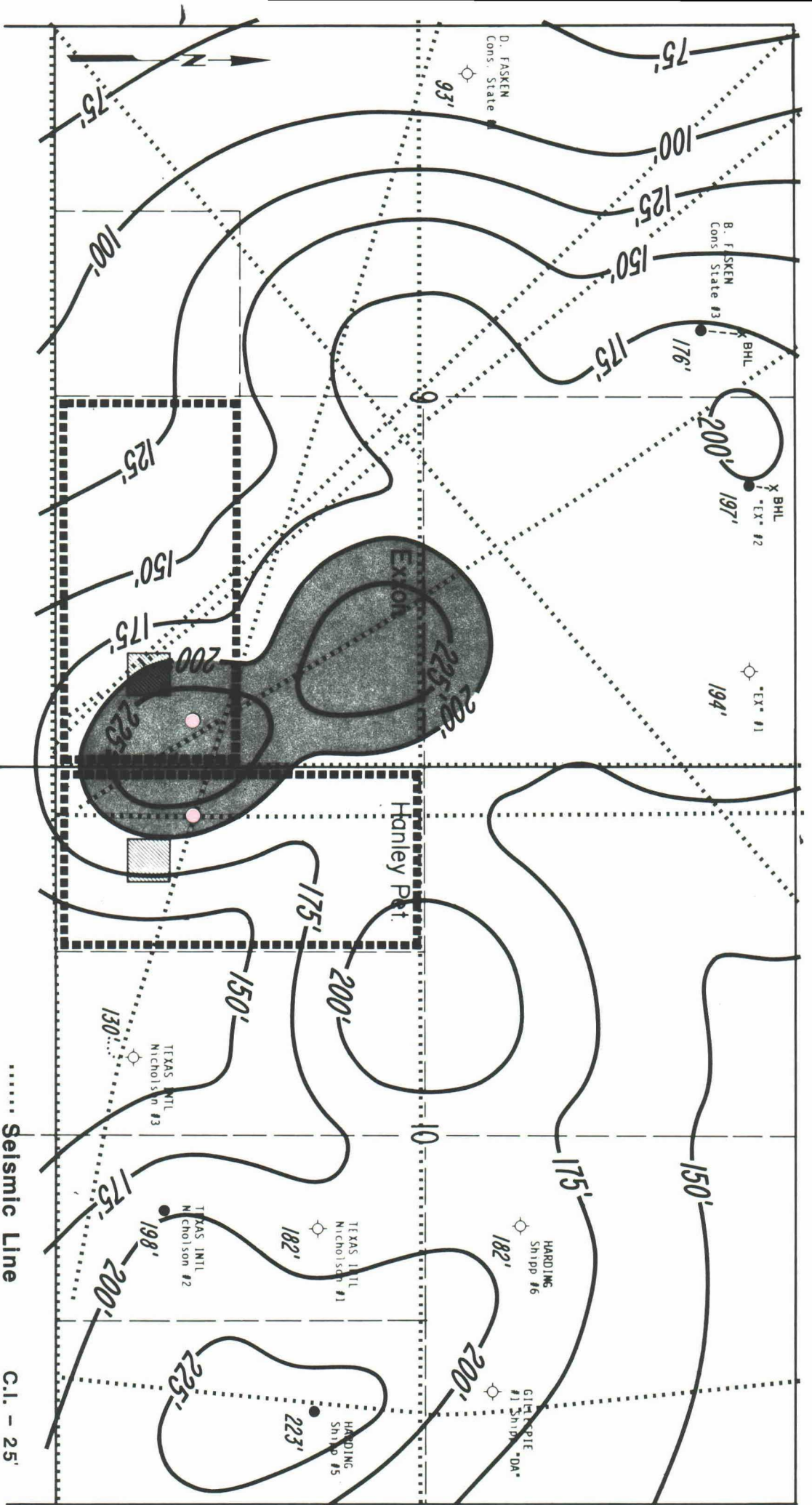
Hearing Date: April 27, 1988

0 1000' 2000' 3000'

scale

<b>EXXON CORP.</b>	
<b>SHIPP (STRAWN) FIELD</b>	
Structure Map	
Top of the Strawn Formation	
T-17-S R-37-E	Lea New Mexico
Location	County
April, 1988	Year





Exxon Exhibit No. 5

Case No. 9366

Hearing Date: April 27, 1988



- Orthodox Location Area
- 80 Acre Proration Unit
- Strawn Producer
- Dry Strawn Test
- Proposed Location

# **EXXON CORP.**

## **SHIPP (STRAWN) FIELD**

Gross Isopach Map

Strawn Formation

T-17-S R-37-E Lea New Mexico

April, 1988