

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:

APPLICATION FOR MARATHON OIL COMPANY
FOR APPROVAL OF A LEASE WATERFLOOD
PROJECT, INCLUDING THE DRILLING OF
TWELVE INJECTION WELLS AT UNORTHODOX
WELL LOCATIONS, AND INCREASE SURFACE
INJECTION PRESSURE LIMITATION,
LEA COUNTY, NEW MEXICO


CASE NO. 10269

CERTIFICATE OF MAILING
AND
COMPLIANCE WITH ORDER R-8054

In accordance with Division Rule 1207 (Order R-8054) I hereby certify that on February 27, 1991 and March 11, 1991, 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 March 21, 1991, to the parties shown in the application as evidenced by the attached copies of return receipt cards.


W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me this 15 day of
March, 1991.


Notary Public

My Commission Expires:

7-6-91

DEFEND BY ORDER STOP

889/cert315.092

MARATHON No. 9

Case No. 10269

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. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
State of New Mexico
c/o Commissioner of Public Lands
Post Office Box 1148
Santa Fe, New Mexico 87504
Re: Marathon WF (WTK)

4. Article Number
P 438 026 036

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD ☐ Return Receipt for Merchandise
☐ Express Mail

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

5. Signature - Addressee
X *Mike*

6. Signature - Agent
X

7. Date of Delivery

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

SANTAFE, NM FEB 28 1991 USPS 10501

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-239-815 **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. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
Oxy USA Inc.
Post Office Box 50250
Midland, Texas 79710
Re: Marathon WF (WTK)

4. Article Number
P 438 026 038

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD ☐ Return Receipt for Merchandise
☐ Express Mail

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

5. Signature - Addressee
X *K. Hunkard*

6. Signature - Agent
X


7. Date of Delivery
3/15/91

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-239-815 **DOMESTIC RETURN RECEIPT**

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

3. Article Addressed to: ARCO Oil & Gas Company Box 1610 Midland, Texas 79702 Re: Marathon WF (WTK)	4. Article Number P 438 025 260 Type of Service: <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 Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X 	
7. Date of Delivery MAR 4 1990	

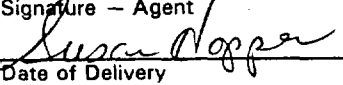
PS Form 3811, Apr. 1989

★U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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

3. Article Addressed to: Wiser Oil Company 700 Petroleum Bldg. Wichita Falls, Texas 76301 Re: Marathon WF (WTK)	4. Article Number P 438 026 029 Type of Service: <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 Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X 	
7. Date of Delivery 3.5.91	

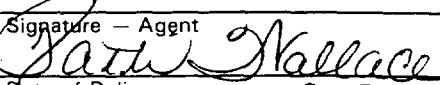
PS Form 3811, Apr. 1989

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

3. Article Addressed to: Dasco Land Corporation Post Office Box 2545 Hobbs, New Mexico 88240 Re: Marathon WF (WTK)	4. Article Number P 438 026 037 Type of Service: <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 Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X 	
7. Date of Delivery 2.28.91	

PS Form 3811, Apr. 1989

★U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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

3. Article Addressed to:
Doyle Hartman
Post Office Box 10426
Midland, Texas 79701
Re: Marathon WF (WTK)

4. Article Number
P 438 026 033

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X *[Signature]*

7. Date of Delivery
3-5-91

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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

3. Article Addressed to:
Meridian Oil
21 Desta Drive
Midland, Texas 79702
Re: Marathon WF (WTK)

4. Article Number
P 438 026 031

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X *[Signature]*

7. Date of Delivery
3-4-91

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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

3. Article Addressed to:
Conoco Inc.
Post Office Box 1959
Midland, Texas 79702
Re: Marathon WF (WTK)

4. Article Number
P 438 026 029

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X *[Signature]*

7. Date of Delivery
MAR 4 1991

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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

3. Article Addressed to:
H.J. Rasmussen 2700
6 Desta Drive Suite 5850
Midland, Texas 79702
Re: Marathon WF (WTK)

4. Article Number
P 438 026 030

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X *[Signature]*

7. Date of Delivery
MAR 5 1989

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

PS Form 3811, Apr. 1989

★U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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

3. Article Addressed to:
Dallas McCasland
Post Office Box 206
Eunice, New Mexico 88231
Re: Marathon WF (WTK)

4. Article Number
P 438 026 035

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X *[Signature]*

7. Date of Delivery

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

PS Form 3811, Apr. 1989

★U.S.G.P.O. 1989-238-815

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

3. Article Addressed to:
Headington Oil
7557 Rambler Rd. Ste 1150
Dallas, Texas 75231
Re: Marathon WF (WTK)

4. Article Number
P 438 026 034

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee
X

6. Signature — Agent
X *[Signature]*

7. Date of Delivery
3/4/91

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

PS Form 3811, Apr. 1989

★U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT