

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION
STATE LAND OFFICE BLDG.
SANTA FE, NEW MEXICO

12 June 1986

EXAMINER HEARING

IN THE MATTER OF:

The disposition of certain cases
called on Docket No. 18-86 for which
no testimony was offered.

CASE
8849, 8921,
8922, 8923,

BEFORE: David R. Catanach, Examiner

TRANSCRIPT OF HEARING

A P P E A R A N C E S

For the Division:

Jeff Taylor
Attorney at Law
Legal Counsel to the Division
State Land Office Bldg.
Santa Fe, New Mexico 87501

STATE OF NEW MEXICO
ENERGY AND MINERALS DEPARTMENT
OIL CONSERVATION DIVISION

IN THE MATTER OF THE HEARING
CALLED BY THE OIL CONSERVATION
DIVISION FOR THE PURPOSE OF
CONSIDERING:

CASE NO. 8923
Order No. R-8325

APPLICATION OF AMOCO PRODUCTION
COMPANY FOR THE REINSTATEMENT OF
CANCELLED UNDERPRODUCTION, EDDY
COUNTY, NEW MEXICO.

ORDER OF THE DIVISION

BY THE DIVISION:

This cause came on for hearing at 8:15 a.m. on June 25, 1986, at Santa Fe, New Mexico, before Examiner Michael E. Stogner.

NOW, on this 10th day of October, 1986, the Division Director, having considered the testimony, the record, and the recommendations of the Examiner, and being fully advised in the premises,

FINDS THAT:

(1) Due public notice having been given as required by law, the Division has jurisdiction of this cause and the subject matter thereof.

(2) At the time of the hearing this case was consolidated with Division Case No. 8922 for the purpose of testimony.

(3) The applicant, Amoco Production Company, seeks an exception to the general rules for prorated gas pools in southeast New Mexico to permit the reinstatement of underproduction cancelled for the 1983-1984 and 1984-1985 proration periods for the 640-acre standard gas proration unit comprising all of Section 12, Township 22 South, Range 23 East, Indian Basin-Upper Pennsylvanian Gas Pool, Eddy County, New Mexico, and dedicated to its Smith Federal Gas Com Well No. 1 located 1650 feet from the North line and 2310 feet from the West line (Unit F) of said Section 12.

(4) In August, 1965, said well was completed in the Indian Basin-Upper Pennsylvanian Gas Pool with the production split-connected to Southern Union Gas Company (Gas Company of New Mexico) and Marathon Oil Company.

(5) The subject well was reclassified from non-marginal to marginal status effective August 1, 1984 by the Division and all underproduction accrued to that date was cancelled.

(6) The Division on its own motion reclassified the Smith Federal Gas Com Well No. 1 from marginal to non-marginal status effective January 1, 1986 and reinstated this well's underproduction for the 1985-1986 proration period.

(7) The applicant has demonstrated that the subject well had been of non-marginal character throughout the 1983-1984, 1984-1985, and 1985-1986 proration periods and the marginal classification of said well was not a result of the well's inability to produce gas in non-marginal quantities, but rather a result of the gas purchaser's inability to accept gas due to the depressed gas market.

(8) The testimony and the exhibits received at the hearing of this case demonstrate that the subject well and unit is and has been since August 1, 1984, of truly non-marginal character, and the well and unit should not at any time after that date have been classified as marginal.

(9) Granting this application for reinstatement of unproduced non-marginal allowable for the 1983-1984 and 1984-1985 proration periods, which totals 665,720 MCF, will allow the applicant an opportunity to produce its just and equitable share of reserves from the pool, will not impair correlative rights, nor cause waste.

(10) Inasmuch as the accrued underproduction developed over a two year period, the applicant should be allowed a two year period to produce said underproduction. Any of this underproduction remaining at the end of this period shall be cancelled unless at such time the operator can show good cause why it should not.

(11) During the period reinstated underproduction is to be made up, the well should not be subject to reclassification from non-marginal to marginal status.

IT IS THEREFORE ORDERED THAT:

(1) The Amoco Production Company Smith Federal Gas Com Well No. 1 located 1650 feet from the North line and 2310 feet from the West line (Unit F) of Section 12, Township 22 South, Range 23 East, Indian Basin-Upper Pennsylvanian Gas Pool, Eddy County, New Mexico, having dedicated to it the

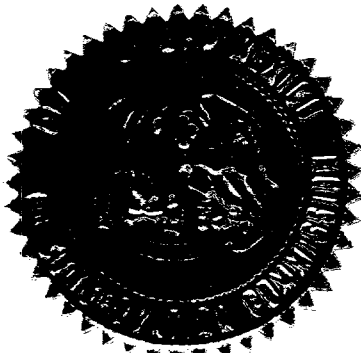
standard 640-acre proration unit comprising all of said Section 12, is hereby ordered reclassified non-marginal as of August 1, 1984; and further, cancelled unproduced allowable accrued to August 1, 1984 is reinstated and unproduced non-marginal allowables from August 1, 1984 to March 1, 1986 are hereby granted as underproduction as of the date of this order.

(2) The applicant shall be granted a two-year period to produce said underproduction, which totals 665,720 MCF, said two-year period to commence November 1, 1986. Any of this underproduction remaining October 31, 1988 shall be cancelled unless at that time the operator can show good cause why it should not.

(3) Prior to October 31, 1988, said Smith Federal Gas Com Well No. 1 shall not be subject to reclassification from non-marginal to marginal status.

(4) Jurisdiction of this cause is retained for the entry of such further orders as the Division may deem necessary.

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.



S E A L

STATE OF NEW MEXICO
OIL CONSERVATION DIVISION

A handwritten signature in cursive script, appearing to read "R. L. Stamets".

R. L. STAMETS
Director

SOUTHEAST RECLASSIFICATION FOR PERIOD ENDED JUNE 31, 1984

INDIAN BASIN UPPER PENN. (PRO GAS)

MAR

PAGE 73

TOTAL	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	HI-MO	RE-	CLASS	STATUS	DATE	NEW
PROD													100PCT	AVE	U	N	G	INTERIM

SUN EXPLORATION & PRODUCTION CO.						807000												
BRIH FEDERAL GAS COM						065680												
276379	140580	140580	140580	140580	140580	140580							100010	92298	M	M	Q	100010
447829	140580	140580	140580	140580	140580	140580							149276	149276	M	M	Q	

TEXACO INCORPORATED						833000												
STATE OF GAS COM						758350												
103322	23E	00UP	AF=1.00															
306337	109087	121144	75806										121144	102012	M	M	Q	121144
447829	140580	140580	140580	140580	140580	140580							149276	149276	M	M	Q	

IND PRODUCTION CORPORATION						873850												
HELIX FEDERAL						316890												
102222	23E	00UP	AF=1.55															
37836	19832	20534	17450										20534	19268	M	M	Q	20534
246306	77319	81917	87070	87756									82102	82102	M	M	Q	

UNION OIL COMPANY OF CALIFORNIA						877200												
FEDERAL						223580												
102222	23E	00UP	AF=1.00															
368629	112804	133869	121956										133869	122876	M	M	Q	133869
447829	140580	148939	158310	159556									149276	149276	M	M	Q	

MARATHON AND GAS CO. OF N. M.						000000												
ANOCO PRODUCTION CO.						018270												
SMITH FEDERAL GAS COM						836580												
102222	23E	00UP	AF=1.00															
30781	102499	120561	77721										120561	100260	N	M	R	160832 120561
447829	140580	148939	158310	159556									149276	149276	M	M	Q	

ROBERT N. ENFIELD UNIT GAS COM						255500												
WEST HOLA GASIN UNIT GAS COM						352650												
102222	23E	00UP	AF=1.00															
33992	112443	135276	83943										135276	111220	N	M	R	116803 135276
447829	140580	148939	158310	159556									149276	149276	M	M	Q	

FLAV REEFER OIL CO						266960												
WINSTON GAS COM						904560												
102222	23E	00UP	AF=1.00															
1031	215246	216	1383										1288	629	M	M	Q	216
447829	140580	148939	158310	159556									149276	149276	M	M	Q	

ODESSA NATURAL CORP						594090												
J C WILLIAMS STANDARD FED GAS COM						898120												
102222	23E	00UP	AF=1.90															
20825	11330	7025	7980										11820	8951	M	M	Q	7055
43045	126522	134045	142479	143600									134348	134348	M	M	Q	

JALMAT TANSILL YLZ RVRS (PRO GAS)						079240												
EL PASO NATURAL GAS COMPANY						000000												
ALPHA ENERGY-ONE PRODUCTION CO.						012790												
EL PASO PLANT						191193												
102222	23E	00YT	AF=.50															
1031	215246	216	1383										17769	613	N	N	P	4106
447829	140580	148939	158310	159556									1598	1598	M	M	Q	

EL PASO RUBY FEDERAL						191198												
102222	23E	00YT	AF=.75															
1031	215246	216	1383										2373	1903	M	M	Q	2311
447829	140580	148939	158310	159556									2398	2398	M	M	Q	

EL PASO SMITH						191199												
102222	23E	00YT	AF=.75															
1031	215246	216	1383															
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TOTAL PRODUCE APR MAY JUN JUL AUG SEP OCT NOV DEC JAN FEB MAR APRIL MAY JUNE JULY AUGUST SEPTEMBER OCTOBER NOVEMBER DECEMBER

MARATHON OIL COMPANY NORTH INDIAN BASIN UNIT GAS CUM A 498700 352510

MONSANTO OIL COMPANY CONOCO STATE GAS CUM 553050***** 138380

IF 2 225 23E 00UP AF = 1.00 ACRES = 640 362142- CURR O/U = 38062-
625326 138535 116554 122980 142460 151250 161533 156698 158234 158234
949406 140580 146939 158310 159556 190771 446150
LOWE STATE GAS CUM

IF 36 215 23E 00UP AF = 1.00 ACRES = 640 62745
282449 47449 20550 62543 50981 32721 62745
949406 140580 146939 158310 159556 190771 151250 161533 156698
MORAN EXPLORATION, INC
MERSHON GAS CUM 560000***** 500750

IF 21 225 23E 00UP AF = 1.00 ACRES = 358 42278
275479 34483 32377 50209 49383 46747 42278
531608 78725 83406 88654 89351 106832 84700 90459 87751
SUN EXPLORATION & PRODUCTION CO.
BRIGHT FEDERAL GAS CUM 807000***** 065680

IF 21 215 23E 00UP AF = 1.00 ACRES = 640 89950
461148 84673 100010 95202 100010 95202 151250 161533 156698
949406 140580 146939 158310 159556 190771 151250 161533 156698
TEXACO INCORPORATED
STATE OF GAS CUM 833000***** 758350

IF 32 215 23E 00UP AF = 1.00 ACRES = 640 123907
612432 109037 121144 120745 123907 121803
949406 140580 146939 158310 159556 190771 151250 161533 156698
TXO PRODUCTION CORPORATION
HELBING FEDERAL 873850***** 316890

IF 22 225 23E 00UP AF = 1.00 ACRES = 352 18648
106381 19822 20534 17652 12275 352 18648
522173 77319 81917 87670 87756 104924 83187 88843 86184
UNION OIL COMPANY OF CALIFORNIA
FEDERAL 28 877200***** 223580

IF 28 215 23E 00UP AF = 1.00 ACRES = 640 133869
727532 112804 133869 125845 116498 116560 161533 156698 158234 158234
949406 140580 146939 158310 159556 190771 151250 161533 156698
MARATHON AND GAS CO. OF N. M. 000355*****

AMOCO PRODUCTION CO
SMITH FEDERAL GAS CUM 018270***** 686580

IF 12 225 23E 00UP AF = 1.00 ACRES = 640 127101
645446 102439 120561 113666 105058 640 127101
949406 140580 146939 158310 159556 190771 151250 161533 156698
ROBERT N. ENFIELD
WEST INDIAN BASIN UNIT GAS CUM 352650

26 20 215 23E 00UP AF = 1.00 ACRES = 640 2036
710888 112443 135276 85943 125666 129585 640 2036
949406 140580 146939 158310 159556 190771 151250 161533 156698
SITE = 284011 OPEN O/U = 241154
CURR O/U = 135276 118481 N 241154
158234 158234 M

PRODUCTION ALLOWANCE

PRODUCTION ALLOWANCE

PRODUCTION ALLOWANCE

TOTAL	PROD/	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	JAN	FEB	MAR	HI-MO	RE-	CLASS	STATUS	U/D	NEW
ALUM														100PCT	AVE	U	N	3	ALUM

UNION OIL COMPANY OF CALIFORNIA

877200

223580

MARATHON AND GAS CO. OF N.M.

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AMOCO PRODUCTION CO

018270

SMITH FEDERAL GAS CUM

080580

IF 12 225 23E COUP AF=1.00

SITE=280511

OPEN=

12784 O/U= 498972

946119 102499 120561 77721 113606 105058 127101 84610 124628 90335

123

1431307 140580 148939 158310 159556 190771 151250 161533 156698 163670 146327

ROBERT N. ENFIELD

255500

WEST INDIAN BASIN CUM

352650

26 20 215 23E COUP AF=1.00

SITE=284011

OPEN=

2636 O/U= 404225

1029718 112443 135276 85943 125666 129585 121975 109688 99697 109445

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1431307 140580 148939 158310 159556 190771 151250 161533 156698 163670 146327

FLAG REDFERN OIL CO

266960

MINSTON GAS CUM

904560

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ODESSA NATURAL CORP

594090

J C WILLIAMSON STANDARD FED GAS CUM

898120

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1431307 140580 148939 158310 159556 190771 151250 161533 156698 163670 146327

JALMAT TANSILL YI 7 RVRIS (PRO GAS)

079240

EL PASO NATURAL GAS COMPANY

000000

ALPHA TWENTY-ONE PRODUCTION CO.

012790

EL PASO PLANT

191193

11 32 235 37E 00YT AF=

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12 19 37E 00YT AF=

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30029 1596 1561 1639

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EL PASO RUBY FEDERAL

4106

10 8 255 37E 00YT AF=

75

18918 2373 2311 1025

2592

45045 2394 2342 2459

2592

EL PASO SMITH

191198

11 21 245 37E 00YT AF=

75

19673 2647 2084 2136

2497

45045 2394 2342 2459

2497

EL PASO STATE

191200

11 22 235 36E 00YT AF=

50

12104 747 988 222

896

30029 1596 1561 1639

2034

HARRISON

308350

20 27 255 37E 00YT AF=

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49500 63184 44 49500

93184

1143 126 125 45

128

3E 27 255 37E 00YT AF=

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P.U. CONTROL WELL 4479 AF=1.00

123

1143 126 125 45

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P.U. NO. 4479 SITE=283261 OPEN=

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P.U. CONTROL WELL 4479 AF=1.00

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P.U. CONTROL WELL 4479 AF=1.00

123

1143 126 125 45

93

60060 3192 3123 3279

8213

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 A \quad 4,319,454 \\
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SUN EXPLORATION & PRODUCTION CO. 007000 055680

TEXACO INCORPORATED STATE OF GAS CO. 758350

11 32 215 23E 000P AF = 1.00 ACRES = 640 OPEN O/U = 153458- CURR O/U = 134-
124134 25252 25152 28410 54374 51464 62557 44726 42726
1258022 66586 128803 62633 54374 51464 86007 86007 N N

TXO PRODUCTION CORPORATION HELMING FEDERAL 873850
10 32 235 23E 000P AF = 1.00 ACRES = 352 OPEN O/U = 53692- CURR O/U = 19757-
108112 28424 28427 13480 55 352 56277 29047 N N
140112 36822 70842 34448 29806 28305 47304 47304 N N

UNION OIL COMPANY OF CALIFORNIA FEDERAL 27200
1G 28 215 23E 000P AF = 1.00 ACRES = 640 OPEN O/U = 230838- CURR O/U = 80509-
135708 24906 43767 37025 54374 51464 54906 45036 N N
258022 66586 128803 62633 54374 51464 86007 86007 N N

MARATHON AND GAS CO. OF N. M. 00035
AMOCO PRODUCTION CO. 01870
SMITH FEDERAL GAS CO. 686580

1G 12 215 23E 000P AF = 1.00 ACRES = 640 SITE = 280511 OPEN O/U = 15763- CURR O/U = 195569
101048 18114 37598 26738 26814 54374 51464 86007 86007 N N
258022 66586 128803 62633 54374 51464 86007 86007 N N

FLAG REDFERN OIL CO. 266960
WINSTON GAS CO. 604560

1K 31 215 24E 000P AF = 1.00 ACRES = 640 SITE = 278911
258022 66586 128803 62633 54374 51464 86007 86007 M M

MERIDIAN OIL INCORPORATED 53820
J C WILLIAMSON STANDARD FED GAS CO. 898120

1G 19 215 23E 000P AF = 1.00 ACRES = 576 SITE = 279111
18426 5326 3100 26738 26814 54374 51464 5326 4213 M M
232220 59927 115923 56370 48937 46318 77406 77406 M M

JALMAT TANSILL-YT 7 RWS (PRO GAS) 079240

EL PASO NATURAL GAS COMPANY 000275

ALPHA TWENTY-ONE PRODUCTION CO. 012790
EL PASO PLANT 191163

11 32 235 23E 000P AF = 1.50 ACRES = 80 SITE = 612232 OPEN O/U = 1047- CURR O/U = 7786-
108112 25252 25152 28410 54374 51464 6147 5624 N N
11563 3580 5020 2943 975 5325 3854 3854 N N

EL PASO RUBY FEDERAL 191198

1G 10 255 27E 000P AF = 1.75 ACRES = 120 SITE = 283281 OPEN O/U = 966- CURR O/U = 98-
2130 577 587 966 1462 7988 710 710 M M
EL PASO SMITH 191199

1N 21 245 27E 000P AF = 1.75 ACRES = 120 SITE = 283271 OPEN O/U = 1724- CURR O/U = 255-
2955 930 301 1724 1462 7988 1724 985 M N
2955 930 301 1724 1462 7988 1724 985 M N

PRODUCTION ALLOWANCE



Amoco Production Company

Houston Region
501 WestLake Park Boulevard
Post Office Box 3092
Houston, Texas 77253

R. E. Ogden
Regional Engineering
Manager

**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

May 15, 1986

File: JCA-986.51NM-2028

Re: Hearing to Reinstate Cancelled Underproduction
Amoco Smith-Federal 11-1
Smith Federal Gas Com. 12-1
T-22-S, R-23-E
Indian Basin (Upper Penn) Field
Eddy County, New Mexico

Address List Attached

Gentlemen:

As an operator in the Indian Basin (Upper Penn) Pool, you are being notified, in accordance with Commission Rule 1207(a)9, of the subject cause which has been set for hearing on June 12, 1986. Amoco's application is attached for your information.

Very truly yours,

R. E. Ogden
RPZ/rr
Attachment

BEFORE EXAMINER STOGNER	
OIL CONSERVATION DIVISION	
6/25/86	EXHIBIT NO. <u>1</u>
CASE NO.	<u>8922 8923</u>

May 7, 1986

File: JCA-986.51NM-2020

Re: Application for Reinstatement of
Cancelled Underproduction
Indian Basin (Upper Penn) Field
State Federal 11-1 Well
State Federal Gas Com. 12-1 Well
T-22-S, R-23-E
Eddy County, New Mexico

State of New Mexico
Energy and Minerals Department
Oil Conservation Division
P.O. Box 2088
Santa Fe, NM 87501

Gentlemen:

Amoco Production Company respectfully requests that the referenced application to reinstate cancelled underproduction of allowable for the subject wells for the 1984-85 and 1983-84 proration periods be docketed for the June 11, 1986 Examiner's Hearing.

Amoco seeks approval for reinstatement of cancelled underproduced allowable which was caused by a lack of takes by the Gas Purchaser during this time period. Any inquiries regarding this submittal should be directed to R. P. Zinsmeister, Regulatory Affairs Engineer, at 713/556-2617.

Very truly yours,

O/S RED
by RPZ

RPZ/rr

bcc: C. A. Mote - 3.468
J. W. Aulick - 21.102

**OPERATORS IN THE
INDIAN BASIN (UPPER PENN) FIELD**

ARCO Oil & Gas Company
Box 1610
Midland, Texas 79702

Chevron U.S.A., Inc.
Box 1660
800 Wall Towers East Bldg.
Midland, Texas 79702

Robert N. Enfield
Box 2431
Santa Fe, New Mexico 87501

Flag-Redfern Oil Company
Box 2280
Midland, Texas 79702

Kaneb Operating Company, Ltd.
Box 4502
Houston, Texas 77210

Kerr-McGee Corporation
Box 250
Amarillo, Texas 79189

Marathon Oil Company
Box 552
Midland, Texas 79702

Meridian Oil Company
4936 Collinwood
Suite A
Fort Worth, Texas 76107

Monsanto Company
1330 Midland Nat'l Bank Tower
500 W. Texas
Midland, Texas 79701

Sun E&P Company
Two Lincoln Centre/LB 2
5420 LBJ Frwy.
Dallas, Texas 75240

Texaco Inc.
Box 728
Hobbs, New Mexico 88240

TXO Production Corporation
1700 Pacific/LB 10
Dallas, Texas 75201

Union Oil Company of California
Star Route
Box 609
Jal, New Mexico 88252

PS Form 3811, July 1983 447-945

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:
Arco Oil & Gas Company
Box 11610
Midland, TX 79702

4. Type of Service: Article Number

☒ Registered ☐ Insured **P-172-682-337**

☒ Certified ☐ COD

☐ Express Mail

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

5. Signature - Addressee
X

6. Signature - Agent
X

7. Date of Delivery
MAY 18 1986

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

DOMESTIC RETURN RECEIPT

P 172 682 337

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1964-446-014

PS Form 3800, Feb. 1982

Sent to Arco	
Street and No.	
P.O., State and ZIP Code	
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, July 1983 447-945

DOMESTIC RETURN RECEIPT

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:
 Chemon USA, Inc.
 Box 1660
 800 West Jowers E. Bldg.
 Midland, TX 79702

4. Type of Service: Article Number
☒ Registered ☐ Insured P-172-682-338
☒ Certified ☐ COD
☐ Express Mail

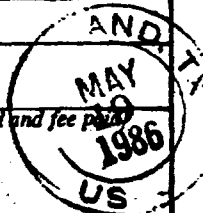
Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee
 X

6. Signature - Agent
 X *[Signature]*

7. Date of Delivery

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



P 172 682 338

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982

U.S.G.P.O. 1984-446-014

Sent to <i>Chemon</i>	
Street and No.	
P.O., State and ZIP Code	
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, July 1983 447-845

DOMESTIC RETURN RECEIPT

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:
Robert N. Enfield
Box 243
Santa Fe, NM 87501

4. Type of Service: ☒ Registered ☐ Insured ☐ COD ☐ Express Mail
 Article Number: **P-172-682-339**

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee
X *[Signature]*

6. Signature - Agent
X

7. Date of Delivery

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

SANTA FE NM 87501

P 172 682 339

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982

U.S.G.P.O. 1984-446-014

Sent to **Rob't. N. Enfield**

Street and No.

P.O., State and ZIP Code

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, July 1982 447-946

DOMESTIC RETURN RECEIPT

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:
Hag-Redfern Oil Company
Box 2280
Midland TX 79702

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

Article Number
P-172-682-340

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee
X

6. Signature - Agent
Binda Naughton

7. Date of Delivery

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

P 172 682 340

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982 * U.S.G.P.O. 1984-446-014

Sent to	<i>Hag-Redfern</i>	
Street and No.		
P.O., State and ZIP Code		
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, July 1983 447-945

DOMESTIC RETURN RECEIPT

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:

Kaneb Operating Co. Ltd.
 Box 4502
 Houston, TX 77210

4. Type of Service:

- ☒ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P. 172-682-341

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

X

6. Signature - Agent

X

J. L. L. L.

7. Date of Delivery

MAY 20 1986

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

P 172 682 341

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1984-448-014

PS Form 3800, Feb. 1982

Sent to <i>Kaneb Op. Co.</i>	
Street and No.	
P.O., State and ZIP Code	
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, July 1983 447-845

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:
Kerr-McGee Corp.
Box 250
Amarielo, TX 79189

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

Article Number
P.172.682.342

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

5. Signature - Addressee
X

6. Signature - Agent
X *James L. Stroud*

7. Date of Delivery
5-19-86

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

DOMESTIC RETURN RECEIPT

P 172 682 342

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982

Sent to *Kerr-McGee*

Street and No.

P.O., State and ZIP Code

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

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:
Marathon Oil Company
Box 552
Midland, TX 79702

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

Article Number **P.172.682.343**

Always obtain signature of addressee. **DATE DELIVERED.**

5. Signature - Addressee
X

6. Signature - Agent
X *Stanley White*

7. Date of Delivery
MAY 19 1986

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

P 172 682 343

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982

U.S.G.P.O. 1984-446-014

Sent to **Marathon**

Street and No.

P.O., State and ZIP Code

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, July 1983 447-845

DOMESTIC RETURN RECEIPT

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:
Meridian Oil Company
4936 Collinwood
Suite A
H. Worth, TX 76107

4. Type of Service: ☒ Registered ☐ Insured ☐ Certified ☐ COD ☐ Express Mail
 Article Number: *P. 172682.344*

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

5. Signature - Addressee:
X L. S. Meador

6. Signature - Agent:
X

7. Date of Delivery:
5-19-86 ce

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

P 172 682 344

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1984-448-014

PS Form 3800, Feb. 1982

Sent to <i>Meridian</i>	
Street and No.	
P.O., State and ZIP Code	
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	

P 172 682 345

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Monsanto	
Street and No.	
P.O., State and ZIP Code	
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
U.S.D.P.O. 1984-446-014

PS Form 3811, July 1983 447-845

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.

- ☐ Show to whom, date and address of delivery.
- ☐ Restricted Delivery.

3. Article Addressed to:

Monsanto Company
1330 Midland Natl Bk. Bldg.
500 W. Texas
Midland, TX 79701

4. Type of Service:

- ☒ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P172.682.345

Always obtain signature of addressee or agent and
DATE DELIVERED.

5. Signature - Addressee

X **[Signature]**

6. Signature - Agent

X

7. Date of Delivery

5-19-86

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

DOMESTIC RETURN RECEIPT

PS Form 3800, July 1982 447-945

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:
Sun EEP Company
Two Lincoln Center / B2
3400 ORCA Hwy.
Dallas, TX 75240

4. Type of Service: Article Number
☒ Registered ☐ Insured *P. 172.682.346*
☒ Certified ☐ COD
☐ Express Mail

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

5. Signature - Addressee
X

6. Signature - Agent
X *[Signature]*

7. Date of Delivery
MAY 21 1983

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

DOMESTIC RETURN RECEIPT

P 172 682 346

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1984-448-014
 PS Form 3800, Feb. 1982

Sent to <i>Sun EEP</i>	
Street and No.	
P.O., State and ZIP Code	
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, July 1983 447-845

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:

Jexaco Inc.
Box 728
Hobbs, NM 88240

4. Type of Service:

- ☒ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

Article Number

P. 172.682.347

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

5. Signature - Addressee

X *Steph D. G.*

6. Signature - Agent

X

7. Date of Delivery

5-19-88

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

P 172 682 347

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1982-446-014

PS Form 3800, Feb. 1982

Sent to <i>Jexaco</i>	
Street and No.	
P.O., State and ZIP Code	
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	

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983 447-945

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.

- ☐ Show to whom, date and address of delivery.
- ☐ Restricted Delivery.

3. Article Addressed to:
JXO Production Corp.
1700 Pacific RB10
Dallas, TX 75201

4. Type of Service: Article Number

☒ Registered ☐ Insured **P.172.682.348**
☒ Certified ☐ COD
☐ Express Mail

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

5. Signature - Addressee **3/19**
X

6. Signature - Agent
X **R Wood**

7. Date of Delivery
3/19/86

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

DOMESTIC RETURN RECEIPT

P 172 682 348

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

★ U.S.G.P.O. 1984-442-014

PS Form 3800, Feb. 1982

Sent to	JXO
Street and No.	
P.O., State and ZIP Code	
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, July 1983 447-946

DOMESTIC RETURN RECEIPT

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:
Union Oil Co. of California
Star Route
Box 609
Gal, NM 88252

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

Article Number
P.172.682.349

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee
X [Signature]

6. Signature - Agent
X

7. Date of Delivery
5-19-86

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

P 172 682 349

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL

(See Reverse)

* U.S.G.P.O. 1984-446-014

PS Form 3800, Feb. 1982

Sent to <i>Union Oil</i>	
Street and No.	
P.O., State and ZIP Code	
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	