

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

IN THE MATTER OF THE APPLICATION
OF PENNZOIL COMPANY FOR
COMPULSORY POOLING
LEA COUNTY, NEW MEXICO.

CASE: 9266

CERTIFICATE OF MAILING
AND
COMPLIANCE WITH ORDER R-8054

In accordance with Division Rule 1207 (Order R-8054) I hereby certify that on October 26, 1987, notice of the hearing, and a copy of the application for the above referenced case, was mailed at least twenty days prior to hearings originally set for November 18, 1987 to the operators and interested parties listed in Exhibit "A".


W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me this 17th day of
November, 1987.


Notary Public

My Commission Expires:

9-26-91

BEFORE EXAMINER CATANACH OIL CONSERVATION DIVISION EXHIBIT NO. <u>2</u> CASE NO. _____

EXHIBIT "A"

ADDRESS LIST
#1 M. H. Medlin
Lea County, New Mexico

Rio Pecos Corporation 110 West Louisiana Suite 460 Midland, Texas 79701 Attention: Mr. Scott Wilson	18.1771% Working Interest
Inexco Oil Company c/o The Louisiana Land and Exploration Company 2950 North Loop West, Suite 1200 Houston, Texas 77092 Attention: Mr. Ken Steer	3.125% Working Interest
Terra Resources, Inc. 10 Desta Drive, Suite 500-West Midland, Texas 79705 Attention: Mr. Kevin T. Pfister	2.5145% Working Interest
Sabine Corporation LTV Center, Suite 1000 Lock Box #109 2001 Ross Avenue Dallas, Texas 75201-2993 Attention: Mr. Bobby Floyd	2.0833% Unleased Mineral Interest
Lynn Melton Medlin and Billy Medlin, Personal Representatives of the Estate of Buddy Melton Medlin, Deceased c/o Billy Medlin P. O. Box 50 Maljamar, New Mexico 88264	4.1667% Unleased Mineral Interest
Mrs. Minnie Taylor Hope, New Mexico 88250	6.25% Unleased Mineral Interest
Mr. Lynn R. Brown 5702 Woodlawn Avenue North Seattle, Washington 98103	.1157% Unleased Mineral Interest
The Heirs or Devisees of Alice G. Brown Huntington, Deceased c/o Lee Huntington 12651 High Bluff Drive #200 San Diego, California 92130	.1157% Unleased Mineral Interest

Exhibit "A" Continued:

Address List
#1 M. H. Medlin
Page 2

Ida Louise Brown McDonald
3210 Pauls Drive
Wheaton, Maryland 20902

.1157% Unleased Mineral Interest

Brady M. Lowe
308 Comet
Austin, Texas 78734

.0226% Unleased Mineral Interest

Pauline B. Lowe
308 Comet
Austin, Texas 78734

.0123% Unleased Mineral Interest

Odell L. Lowe
1500 Broadway; Suite 1230
Lubbock, Texas 79401

.0357% Unleased Mineral Interest

Nell P. Lowe
1500 Broadway; Suite 1230
Lubbock, Texas 79401

.0123% Unleased Mineral Interest

Kay Lowe Hughes
c/o Odell L. Lowe
1500 Broadway; Suite 1230
Lubbock, Texas 79401

.1314% Unleased Mineral Interest

Vivian Lowe Anselmi
c/o Odell L. Lowe
1500 Broadway; Suite 1230
Lubbock, Texas 79401

.1314% Unleased Mineral Interest

Debra Lowe Finn
c/o Odell L. Lowe
1500 Broadway; Suite 1230
Lubbock, Texas 79401

.1054% Unleased Mineral interest

M. Dion Lowe
2306 Cypress Point West
Austin, Texas 78746

.1054% Unleased Mineral Interest

Larry K. Lowe
2313 Broadway
Lubbock, Texas 79401

.2228% Unleased Mineral Interest

Shana Lowe Conine
405 Oak Forrest Circle
Waco, Texas 76710

.2162% Unleased Mineral Interest

Loretta D. Lowe
407 Arch Bluff
San Antonio, Texas 78216

.2228% Unleased Mineral Interest

Exhibit "A" Continued:

Address List
#1 M. H. Medlin
Page 3

Ronny P. Lowe
6400 Coors Rd. N. W.
Albuquerque, New Mexico 87120

.1314% Unleased Mineral Interest

Denise Lowe
3424 61st Street
Lubbock, Texas 79413

.0698% Unleased Mineral Interest

Clodette Maner, as Guardian
of the Estate of Haley Lowe
3424 61st Street
Lubbock, Texas 79413

.0488% Unleased Mineral Interest

Kay Salem, as Guardian
of Kelly Lowe
4513 13th Street
Lubbock, Texas 79416

.0488% Unleased Mineral Interest

Kay Salem, as Guardian
of Lauren Lowe
4513 13th Street
Lubbock, Texas 79416

.0488% Unleased Mineral Interest

Coy S. Lowe
3301 42nd Street
Lubbock, Texas 79413

.0862% Unleased Mineral Interest

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 return of your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent return of your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent return of your address in the "RETURN TO" space on the reverse side.

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

3. Article Addressed to:
 Ronny P. Leye
 6400 Coors Bld. N. W.
 Albuquerque, New Mexico 87120

5. Signature - Addressee
 Felicia Estroba
 Signature - Agent

7. Date of Delivery
 1-28-87
 1987, 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 return of your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent return of your address in the "RETURN TO" space on the reverse side.

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

3. Article Addressed to:
 PECO Pecos Corporation
 10 West Louisiana, #460
 Midland, Texas 79701

5. Signature - Addressee
 X
 6. Signature - Agent
 X
 7. Date of Delivery
 1-29-87

4. Article Number
 484-059 701
 Type of Service:
 Registered
 Certified
 Express Mail
 Insured
 COD
 Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid)
 TAMT

3 Form 3811, Feb. 1986
 Domestic Return Receipt
 Burmail. See 14

For your reference 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.

M. Dion Lowe
2306 Cypress Point West
Austin, Texas 78746

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

4. Article Number
484 059 729

Type of Service:
 Registered
 Certified
 Express Mail
 Insured
 COD

Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)

5. Signature - Addressee
X
6. Signature - Agent
X
7. Date of Delivery
11/2/87
8. Addressee's Address (ONLY if requested and fee paid)
Smackdown

PS Form 3811, Feb. 1986 *Perngail - See 14* 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.

Clodette Maner, as Guardian
of the Estate of Haley Lowe
3424 61st Street
Lubbock, Texas 79413

4. Article Number
484 059 723

Type of Service:
 Registered
 Certified
 Express Mail
 Insured
 COD

Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)

5. Signature - Addressee
X
6. Signature - Agent
X
7. Date of Delivery
1-2-87

PS Form 3811, Feb. 1986 *Perngail See 14* 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.

Denise Lowe
3424 61st Street
Lubbock, Texas 79413

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

4. Article Number
484 059 726

Type of Service:
 Registered
 Certified
 Express Mail
 Insured
 COD

Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)

5. Signature - Addressee
X
6. Signature - Agent
X
7. Date of Delivery
1-2-87

PS Form 3811, Feb. 1986 *Perngail See 14* 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.

Ida Louise Brown McDonald
3210 Pauls Drive
Wheaton, Maryland 20902

4. Article Number
484 059 729

Type of Service:
 Registered
 Certified
 Express Mail
 Insured
 COD

Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)

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

PS Form 3811, Feb. 1986 *Perngail - See 14* DOMESTIC RETURN RECEIPT



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.

Article Addressed to: Terra Resources, Inc.
10 Desta Dr. #500-West
Midland, Texas 79705

4. Article Number: 2484 059 703
Type of Service:
 Registered Certified Express Mail
 Insured COD

Signature - Addressee: Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)

Signature - Agent: M. C. McLean
Date of Delivery: 2-29-87
Form 3811, Feb. 1986
Burgail See 14 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.

Article Addressed to: Mrs. Minnie Taylor
Hope, New Mexico 88250

4. Article Number: 2484 059 708
Type of Service:
 Registered Certified Express Mail
 Insured COD

5. Signature - Addressee: Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)

6. Signature - Agent: Minnie Taylor
7. Date of Delivery: 2-29-87
Form 3811, Feb. 1986
Burgail See 14 DOMESTIC RETURN RECEIPT

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.

Article Addressed to: Kay Lowe Hughes
c/o Odell L. Love
1500 Broadway; Suite 1230
Lubbock, Texas 79401

4. Article Number: 2484 059 714
Type of Service:
 Registered Certified Express Mail
 Insured COD

5. Signature - Addressee: Kay Lowe Hughes
6. Signature - Agent: Kay Lowe Hughes
7. Date of Delivery: 2-29-87

PS Form 3811, Feb. 1986
Burgail - See 14 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.

Article Addressed to: Coy S. Lowe
3301 42nd Street
Lubbock, Texas 79413

4. Article Number: 2484 059 722
Type of Service:
 Registered Certified Express Mail
 Insured COD

5. Signature - Addressee: Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)

6. Signature - Agent: Coy S. Lowe
7. Date of Delivery: 2-30-87
PS Form 3811, Feb. 1986
Burgail - See 14 DOMESTIC RETURN RECEIPT

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 boxes for additional services requested.

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

3. Article Addressed to:
Odell L. Lowe
1500 Broadway; Suite 1230
Lubbock, Texas 79401

4. Article Number
P484 059 715
Type of Service:
 Registered
 Certified
 Insured
 COD
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
X
6. Signature - Agent
X
7. Date of Delivery
11-25-87

Form 3811, Feb. 1986 *Penngall - See 14* 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 boxes for additional services requested.

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

3. Article Addressed to:
Debra Lowe Finn
c/o Odell L. Lowe
1500 Broadway; Suite 1230
Lubbock, Texas 79401

4. Article Number
P484 059 712
Type of Service:
 Registered
 Certified
 Insured
 COD
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
Signature - Agent
Date of Delivery
11-24-87

Form 3811, Feb. 1986 *Penngall - See 14* DOMESTIC RETURN RECEIPT

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 boxes for additional services requested.

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

3. Article Addressed to:
Mr. Lynn R. Brown
5702 Woodlawn Avenue
North Seattle, Washington

4. Article Number
P484 059 707
Type of Service:
 Registered
 Certified
 Insured
 COD
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
X
6. Signature - Agent
X
7. Date of Delivery
OCT 30 1987

PS Form 3811, Feb. 1986 *Penngall - See 14* 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 boxes for additional services requested.

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

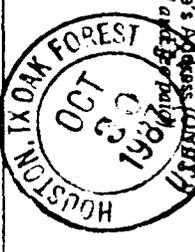
3. Article Addressed to:
Inexco Oil Company
2950 N. Loop West, #1200
Houston, Texas 77092

4. Article Number
P484 059 702
Type of Service:
 Registered
 Certified
 Insured
 COD
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
X
6. Signature - Agent
X
7. Date of Delivery

PS Form 3811, Feb. 1986 *Penngall - See 14* 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.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery.

Article Addressed to:
 Kay Salem, as Guardian
 of Lauren Lowe
 4513 13th Street
 Lubbock, Texas 79416

Signature - Addressee: *Kay Salem*
 Signature - Agent: *Key Salem* **OCT 29 1987**
 Date of Delivery: _____
 Form 3811, Feb. 1986 *Permgail See 14* **DOMESTIC RETURN RECEIPT**

4. Article Number: *484 059 725*

Type of Service:
 Registered Insured
 Certified COD
 Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid) *LAUREN LOWE 4513 13TH STREET LUBBOCK TEXAS 79407*

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. 2. Restricted Delivery.

Article Addressed to:
 Pauline B. Lowe
 308 Comet
 Austin, Texas 78734

Signature - Addressee: *Pauline B. Lowe*
 Signature - Agent: _____
 Date of Delivery: *30 1987*
 Form 3811, Feb. 1986 *Permgail - See 14* **DOMESTIC RETURN RECEIPT**

4. Article Number: *484 059 719*

Type of Service:
 Registered Insured
 Certified COD
 Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid) *not paid*

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. 2. Restricted Delivery.

Article Addressed to:
 Lynn & Billy Medlin
 P. O. Box 50
 Maljamar, New Mex. 88264

Signature - Addressee: _____
 Signature - Agent: *Bill Medlin*
 Date of Delivery: *10-30-87* *PL*
 Form 3811, Feb. 1986 *Permgail - See 14* **DOMESTIC RETURN RECEIPT**

4. Article Number: *484 059 705*

Type of Service:
 Registered Insured
 Certified COD
 Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid)

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. 2. Restricted Delivery.

Article Addressed to:
 Vivian Lowe Anselmi
 c/o Odell L. Lowe
 1500 Broadway; Suite 1230
 Lubbock, Texas 79401

Signature - Addressee: _____
 Signature - Agent: *Steve Anselmi*
 Date of Delivery: *11-29-87*
 PS Form 3811, Feb. 1986 *Permgail See 14* **DOMESTIC RETURN RECEIPT**

4. Article Number: *484 059 713*

Type of Service:
 Registered Insured
 Certified COD
 Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid)

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.

Article Addressed to: **484 059 716**

4. Article Number

Type of Service: Registered Insured Certified COD Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee

Signature Agent: *Loretta D. Lowe*

Date of Delivery: *Feb 29 1987*

Signature - Agent: *Loretta D. Lowe*

Date of Delivery: *Feb 29 1987*

Form 3811, Feb. 1986 *Pursail - See 14* 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.

Article Addressed to: **484 059 706**

4. Article Number

Type of Service: Registered Insured Certified COD Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee

Signature Agent: *Alice G. Brown*

Date of Delivery: *Feb 29 1987*

Signature - Agent: *Alice G. Brown*

Date of Delivery: *Feb 29 1987*

Form 3811, Feb. 1986 *Pursail - See 14* DOMESTIC RETURN RECEIPT

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.

Article Addressed to: **484 059 704**

4. Article Number

Type of Service: Registered Insured Certified COD Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee

Signature Agent: *Sabine Corporation*

Date of Delivery: *Feb 29 1987*

Signature - Agent: *Sabine Corporation*

Date of Delivery: *Feb 29 1987*

Form 3811, Feb. 1986 *Pursail - See 14* 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.

Article Addressed to: **484 059 720**

4. Article Number

Type of Service: Registered Insured Certified COD Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee

Signature Agent: *Brady M. Love*

Date of Delivery: *Feb 29 1987*

Signature - Agent: *Brady M. Love*

Date of Delivery: *Feb 29 1987*

Form 3811, Feb. 1986 *Pursail - See 14* DOMESTIC RETURN RECEIPT



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: Kay Salem, as Guardian of Kelly Lowe 4513 13th Street Lubbock, Texas 79416

4. Article Number: 2484059 2347
Type of Service: Registered Certified Express Mail Insured COD

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X *Kelly Salem* OCT 29
6. Signature - Agent: X
7. Date of Delivery: X

8. Addressee's Address (ONLY if requested and fee paid): 1921 FRANKFORD AVE. LUBBOCK, TX 79407

PS Form 3811, Feb. 1986 *Parngail - See 14* 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.

4. Article Addressed to: Shana Lowe Conine 405 Oak Forrest Circle Waco, Texas 76710

4. Article Number: 2484059 710
Type of Service: Registered Certified Express Mail Insured COD

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X *Shana Lowe Conine*
6. Signature - Agent: X
7. Date of Delivery: X *10-30-87*

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

PS Form 3811, Feb. 1986 *Parngail - See 14* DOMESTIC RETURN RECEIPT

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: Larry K. Lowe 2313 Broadway Lubbock, Texas 79401

4. Article Number: 2484059 711
Type of Service: Registered Certified Express Mail Insured COD

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X *Larry K. Lowe*
6. Signature - Agent: X
7. Date of Delivery: X *10-29*

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

PS Form 3811, Feb. 1986 *Parngail - See 14* 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.

4. Article Addressed to: Nell P. Lowe 1500 Broadway, Suite 1230 Lubbock, Texas 79401

4. Article Number: 2484059 718
Type of Service: Registered Certified Express Mail Insured COD

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: X
6. Signature - Agent: X *Nell P. Lowe*
7. Date of Delivery: X *10-29-87*

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

PS Form 3811, Feb. 1986 *Parngail - See 14* DOMESTIC RETURN RECEIPT