

STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION

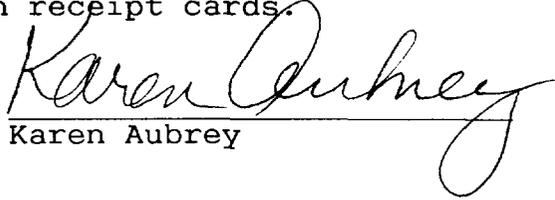
IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION
FOR THE PURPOSE OF CONSIDERING:

CASE NO. 10235

APPLICATION OF STRATA ENERGY RESOURCES
CORPORATION FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO

CERTIFICATE OF MAILING
AND
COMPLIANCE WITH ORDER R-8054

In accordance with Division Rule 1207 (Order R-8054) I hereby certify that on January 16, 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 February 7, 1991, to the parties shown in the application as evidenced by the attached copies of return receipt cards.


Karen Aubrey

SUBSCRIBED AND SWORN to before me this 1ST day of
February, 1991.


Notary Public

My Commission Expires:

7-6-91

BEFORE EXAMINER STOGNER

Oil Conservation Division

Strata Exhibit No. 1

Case No. 10235

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. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Donald Herring
Olney, TX 76374

4. Article Number
P 6766666119

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 *John Herring*

7. Date of Delivery
JAN 23 1991

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

RECEIVED JAN 29 1991

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.
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. (Extra charge) 2. Restricted Delivery (Extra charge)

Texaco, USA
Heritage Center
Midland, TX 79702

4. Article Number
P 6766666116

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
JAN 22 1991

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

RECEIVED JAN 24 1991

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.
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. (Extra charge) 2. Restricted Delivery (Extra charge)

Mary Lou H. Kinser
Rt 1, Box 9A
Newcastle, TX 76372

4. Article Number
P 6766666113

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 *Mary Lou Kinser*

6. Signature - Agent
X

7. Date of Delivery
1-22-91 *[Signature]*

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

RECEIVED JAN 29 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Jane B. Johnson
 c/o BJ's Pawn Shop
 122 Ferguson Village
 Dallas, TX 75228

4. Article Number
 PLOT6 Ldld 109

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
 RE: STRAWA Comp Pool (CHC)

6. Signature - Agent
 Bobby Wallace

7. Date of Delivery
 1-22-91

8. Addressee's Address (ONLY if requested and fee paid)
 RECEIVED JAN 24 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Gwendolyn B. Thompson
 1100 3rd Street
 Graham, TX 76046

4. Article Number
 PLOT6 Ldld 129

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
 Gwendolyn B. Thompson

6. Signature - Agent

7. Date of Delivery
 1-22-91

8. Addressee's Address (ONLY if requested and fee paid)
 RECEIVED JAN 24 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Bernice Thompson
 c/o C.S. Thompson
 1406 Alamosa
 Odessa, TX 79760

4. Article Number
 PLOT6 Ldld 106

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
 RE: STRAWA Comp Pool (CHC)
 Mrs. C.S. Thompson

6. Signature - Agent

7. Date of Delivery
 1-22-91

8. Addressee's Address (ONLY if requested and fee paid)
 RECEIVED JAN 25 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Charles Herring HC 52, Box 202 Willow Road Grafard, TX 76045	4. Article Number P16761d6112
	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.
	8. Addressee's Address (ONLY if requested and fee paid)
5. Signature - Addressee X	RECEIVED JAN 22 1991 JAN 2 - 1991
6. Signature - Agent X <i>Charles Herring</i>	
7. Date of Delivery	

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Ronnie Herring Box 53 Newcastle, TX 76372	4. Article Number P16761d6114
	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.
	8. Addressee's Address (ONLY if requested and fee paid)
5. Signature - Addressee X <i>Ronnie Herring by sister</i>	RECEIVED JAN 24 1991
6. Signature - Agent X <i>JAN 22 '91</i>	
7. Date of Delivery	

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Nelda H. Anderson P.O. Box 294 Newcastle, TX 76372	4. Article Number P16761d6123
	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.
	8. Addressee's Address (ONLY if requested and fee paid)
5. Signature - Addressee X <i>Nelda H. Anderson</i>	RECEIVED JAN 24 1991
6. Signature - Agent X	
7. Date of Delivery	

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:
 Mrs. Leo Pruitt
 9145 Live Oak
 Fontana, CA 92335

4. Article Number
 P 1676 100 117

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
 * Mrs. Leo Pruitt

6. Signature - Agent
 X

7. Date of Delivery

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

RECEIVED JAN 23 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
 Maggie T. G. Gray
 c/o Burnie R. Coleman
 H.C. 64 Box 128
 Big Lake, TX 76932

4. Article Number
 P 1676 100 102

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
 * Maggie T. G. Gray

6. Signature - Agent
 X

7. Date of Delivery
 1-23-91

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

RECEIVED JAN 23 1991

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:
 Iva Thompson Grissom
 146 FFM 3168
 Bldg 4, Apt F-1
 Raymondsville, TX 78580

4. Article Number
 P 1676 100 101

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 Iva Grissom

6. Signature - Agent
 X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)
 RECEIVED JAN 28 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Winnie Thompson
 600 Laurel Rd.
 Athens, TX 75751

4. Article Number
 P 1676 LdLdLd 108

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 Winnie Thompson

6. Signature - Agent
 X

7. Date of Delivery

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

RECEIVED JAN 20 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

June Webster Morrison
 14613 Spring Oaks Dr.
 Mesquite, TX 75180

4. Article Number
 P 1676 LdLdLd

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 Annie Husted

7. Date of Delivery
 1-22-91

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

RECEIVED JAN 24 1991

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)

C. Ledford Herring
 South Bend, TX 76081

4. Article Number
 P 1676 LdLdLd 115

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 C. Ledford Herring

6. Signature - Agent
 X

7. Date of Delivery
 1-22-91

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

RECEIVED JAN 25 1991

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.
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. (Extra charge) 2. Restricted Delivery (Extra charge)

Owana H. Mills
Helen Street, Box 471
Monahans, TX 79756

4. Article Number
P 1676 1666 128

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 *Owana H. Mills*

6. Signature - Agent
X

7. Date of Delivery
Jan 1-22-91

8. Addressee's Address (ONLY if requested and fee paid)
RECEIVED JAN 24 1991

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)

Billy Wayne McCarty
1632 Oxford
Santa Monica, CA 93454

4. Article Number
P 1676 1666 130

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 *Billy W. McCarty*

6. Signature - Agent
X

7. Date of Delivery
1/22

8. Addressee's Address (ONLY if requested and fee paid)
RECEIVED JAN 28 1991

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.
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. (Extra charge) 2. Restricted Delivery (Extra charge)

L.J. McCarty
1113 Gateway Circle
Borger, TX

4. Article Number
P 1676 1666 124

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 *Mildred C. McCarty*

6. Signature - Agent
X

7. Date of Delivery
1-22-91

8. Addressee's Address (ONLY if requested and fee paid)
RECEIVED JAN 24 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Virginia L.T. Tucker
 South Bend, TX 76081

4. Article Number
 P1676 L6L6L6 126

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 Virginia L. T. Tucker

6. Signature - Agent
 X

7. Date of Delivery
 1-22-91

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

RECEIVED JAN 28 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Bobby Joe McCarty
 7109 Vinewood
 Amarillo, TX 79108

4. Article Number
 P1676 L6L6L6 127

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 Mrs. B. McCarty

7. Date of Delivery
 JAN 23 1991

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

RECEIVED JAN 25 1991

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Holly Jean Morrow
 P.O. Box 307
 Newcastle, TX 76372

4. Article Number
 P1676 L6L6L6 125

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 Holly Jean Morrow

6. Signature - Agent
 X

7. Date of Delivery
 1-24-91

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

RECEIVED JAN 24 1991

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. 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Loberta T. Hunter
821 Weldon Road
Santa Barbara, CA 93109

4. Article Number
P 676 666 105

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
L. Hunter

6. Signature - Agent
X

7. Date of Delivery
JAN 3 1991

8. Addressee's Address (ONLY if requested and fee paid)
RECEIVED JAN 28 1991

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. 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Thelma E.H. Routen
4445 Arcady
Dallas, TX 75205

4. Article Number
P 676 666 132

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

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)
RECEIVED JAN 25 1991

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. 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Dena M. T. Hendricks
160 Gibson Road
P.O. Box 326
Athens, TX 75751

4. Article Number
P 676 666 103

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 *Linda Adams*

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)
RECEIVED FEB 1 1991

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.
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. (Extra charge) 2. Restricted Delivery (Extra charge)

Ada P. Thompson
1406 Sunset Blvd
Odessa, TX 79763

Article Number
P 107666104

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
Ada P. Thompson

6. Signature - Agent
X

7. Date of Delivery
1.31.91

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.
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. (Extra charge) 2. Restricted Delivery (Extra charge)

Fay Nell Willingham
Route 7
Athens, TX 75751

Article Number
P 107666123

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
Fay Nell Willingham

6. Signature - Agent
X

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 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. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
Lometa J. Campbell
Route 7
Athens, TX 75751

4. Article Number
P 676 666 097

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
Lometa Campbell

6. Signature - Agent
X

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 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Jolene H. McMillen
 Rt 1, Box 75
 Santo, TX 76472

Article Number
 P 676666131

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
 Jolene H. McMillen

6. Signature - Agent

7. Date of Delivery
 1-28-91

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.
 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. (Extra charge) 2. Restricted Delivery (Extra charge)

Beverly T. Ward
 7047 Bissonnett #24
 Houston, TX 77074

Article Number
 P 676666121

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
 Beverly Ward

6. Signature - Agent

7. Date of Delivery
 JAN 24 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

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. (Extra charge) 2. Restricted Delivery (Extra charge)

Choice Thompson
 Family Trust
 c/o Syble Thompson
 Rt 9, Box 55
 Sour Lake, TX 77659

Article Number
 P 676666111

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
 Choice Thompson

6. Signature - Agent

7. Date of Delivery
 1-28-91

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

P 676 666 099



Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Wesley Thompson, Jr.
2810 Brook River Ct.
Sugarland, TX 77478

PS Form 3800 June 1990

Postage	\$.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	.90
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$2.20
Postmark or Date	Re: Strata Comp Pool 1/16/91 (CHC)

P 676 666 098



Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Oscar Taylor
Rt 5, Box 702
Conroe, TX 77304

PS Form 3800 June 1990

Postage	\$.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	.90
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$2.20
Postmark or Date	Re: Strata Comp Pool 1/16/91 (CHC)

P 676 666 118



Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Bona Lou Conard
2226 Seagrape Circle
Cocoanut Creek, FL 33066

PS Form 3800 June 1990

Postage	\$.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	.90
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$2.20
Postmark or Date	Re: Strata Comp. Pool 1/16/91 (CHC)

P 676 666 100



Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Lois Ancil
Morrison Harris
P.O. Box 132
Malakoff, TX 75748

PS Form 3800 June 1990

Postage	\$.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	.90
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$2.20
Postmark or Date	Re: Strata Comp Pool 1/16/91 (CHC)

P 676 666 110



Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Leo Szczota
P.O. Box 851
Rancho Santa Fe,
CA 92067

PS Form 3800, June 1990

Postage	\$.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	.90
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$ 2.20

Postmark or Date

Re: Strata Comp. Pool
1/16/91 (CHC)

P 676 666 122



Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

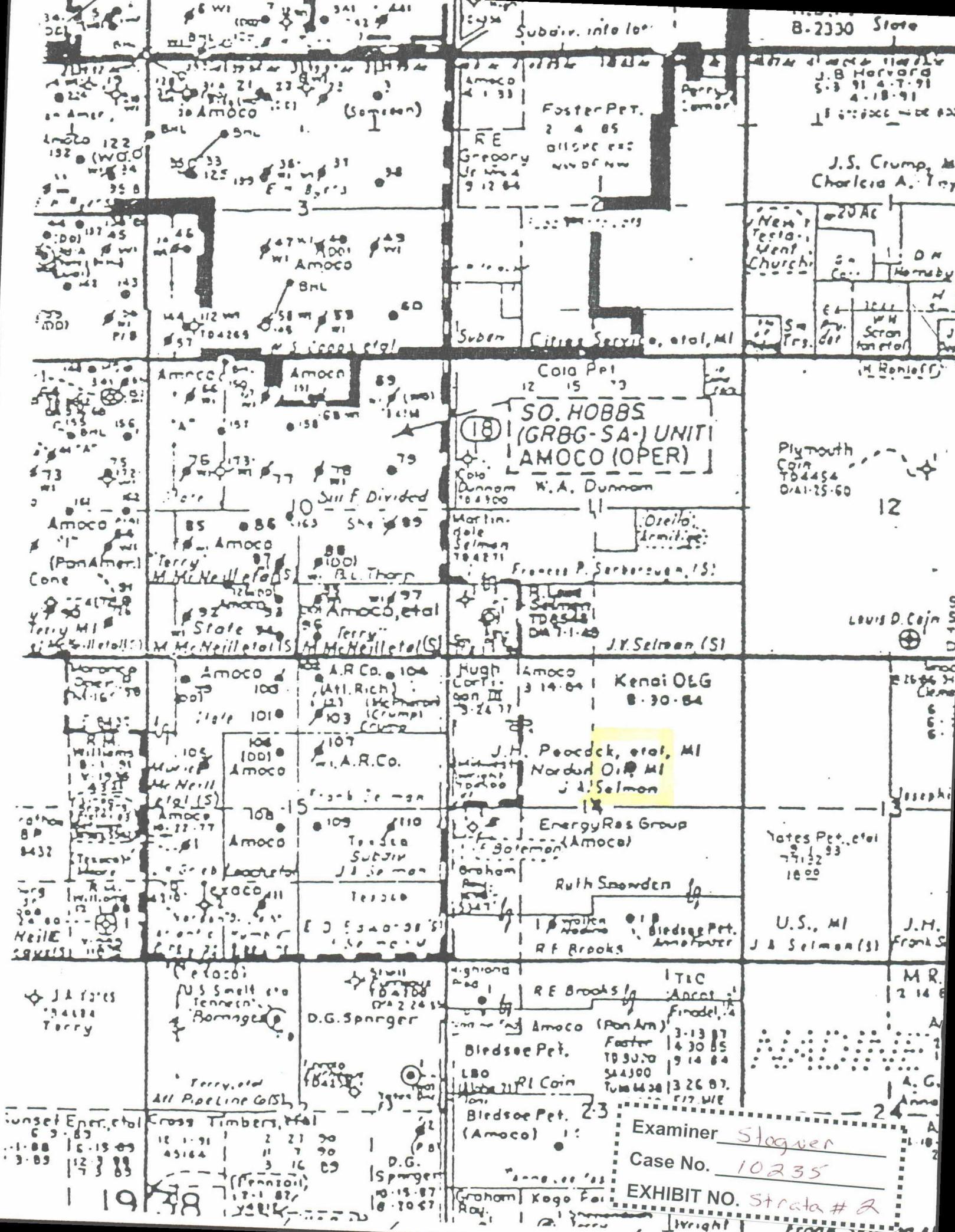
Gartha M. Jones
652 S. Ripple Creek
Houston, TX 77057

PS Form 3800, June 1990

Postage	\$.45
Certified Fee	.85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	.90
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$ 2.20

Postmark or Date

Re: Strata Comp. Pool
1/16/91 (CHC)



B-2330 State

Subdiv. info loc

J.B. Harvord
5.3 91 4.7.91
4.18.91

J.S. Crump, MI
Charleia A. Troy

Foster Pet.
2 4 85
allsvr etc
new of NW

Amoco
4 1 33
RE
Grocery
Jr Wms
9 12 84

New Testa-
Ment
Church
D.M.
Hornaby
S.M.
Troy
W.H.
Scraper
etc

Suben Citrus Service, etal, MI

Cola Pet
12 15 73

(18) SO. HOBBS
(GRBG-SA) UNIT
AMOCO (OPER)
W.A. Dunnam
104900

Plymouth
Co. Inc.
TD4454
041-25-60

Martin-
dale
Selman
704271

Orella
Amitege

Francis P. Serbergen, IS

J.Y. Selman (SI)

Louis D. Cain

Hugh
Lort
III
3-24-77

Amoco
3 14 84

Kenai OEG
8-30-84

J.H. Peacock, etal, MI
Nardus O. MI
J.A. Selman

Energy Res Group
(Amoco)

Yates Pet., etal
7-12-83
1800

Ruth Snowden

Bledsoe Pet.
RF Brooks

U.S., MI
J & Selman (SI)

J.M.
Frank S

RE Brooks

ITC
Ancof
Finadel, 4

Amoco (Pan Am)
3-13-87
Foster
10 30 85
9 14 84

Bledsoe Pet.
LBO
R.I. Cain
3 26 87

Examiner Stoguer
Case No. 10235

EXHIBIT NO. Strata # 2

unset Ener, etal
6 3 85
11-88
12-88

Cross Timbers, etal
12 1-91
45164
11 7 90
3 16 89

Bledsoe Pet. 2-3
(Amoco)

19 78

D.G. Spenger
10-15-87
8-20-87

Graham Kogo Fal

FROM SECTION 24

BEFORE EXAMINER STOGNER

Oil Conservation Division

Strata Exhibit No. 2

Case No. 10235