OIL CONSERVATION COMMISSION
Santa Fe, New Mexico
Case No8399 Exhibit No. 40

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

RECE

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

8. Addressee & Address ONLY if requested and fee paid

RECE

DOMESTIC RETURN RECEIPT

6. Signarue

7. Date of Delivery

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

6.

RETURN

RECEIPT

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8. Addressee s Address (ONL)

if requested and fee paid)

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

RECE

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<sup>o</sup> S Form 3811, July 1983	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.	
983	Show to whom, date a     Restricted Delivery.	nd address of delivery.
	3. Article Addressed to: Delbert D. Cooper Box 421 Eunice, New Mexico	o 88231
1.	4. Type of Service:    Registered   Insured   Certified   COD   Express Mail	48702
	Always obtain signature of addressee or agent and DATE DELIVERED.  5. Signature – Addressee	
S. Signature - Addressee  X  6. Signature - Agent  X  7. Date of Delivery  8. Addressee's Address (ONLY if requested and approximately approxi		Y if requested and fee paid)
EIPT		

	<del>-</del>			
S	SENDER: Complete item	s 1, 2, 3 and 4.		
PS Form 3811, July 1983	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.			
1983	1.  Show to whom, date and address of delivery.			
	2. Restricted Delivery.			
	3. Article Addressed to: Ms. Suzanne H. Klein 1980 South Post Oak Suite 1075 Houston, Texas 77056			
	4. Type of Service:	Article Number		
!	Registered Insured COD Express Mail	48709		
MOG	Always obtain signature of addressee or agent and DATE DELIVERED.			
	5. Signature – Addressee	2tac		
EST	6. Signature - Agent	SILIUS MELCO		
C R	7. Date of Delivery	12/800 12h		
ETU				
Z	B. Addressee's Address (O.V.	LY if requeried and fee paid		
DOMESTIC RETURN RECE		OF TO		

PS Form 3811, July 1983	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:  The Misson Oil Community.			
	The Wiser Oil Company P. O. Box 192 Sistersville, W. VA. 26175 Attn: Mr. Charles P. LaRue			
	4. Type of Service: Article Number  Registered Insured Certified COD  Express Mail			
DOME	Always obtain signature of addressee or agent and DATE DELIVERED.			
	5. Signature - Addressee  X/lartha Hazl Od			
STIC	6. Signature - Agent X			
DOMESTIC RETURN	7. Date of Delivery  10: 4-84  735			
~	8. Addressee s Address (ONLY if requested and fee paid)			

RETURN RECEIPT

7. Date of Delivery

RECEIPT

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

DOMESTIC RETURN RECEIPT

7. Date of Delivery

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

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SENDER: Complete items 1, 2, 3 and 4. Form 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 boxtes) July 1983 for service(s) requested. 1. A Show to whom, date and address of delivery. 2. Restricted Delivery. 3. Article Addressed to: Exxon Company, U.S.A. P. O. Box 1700 Midland, Texas 79702 Attn: Mr. R. R. Hickman 4. Type of Service: Article Number ☐ Insured☐ COD Registered 48720 Certified Express Mail Always obtain signature of addressee or agent and DATÉ DELIVERED. 5. Signature - Addressee DOMESTIC 6. Signature / Agent 7. Date of Delivery RETURN 8. Addressee's Address (ONLY if equested and fee paid)

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PS	SENDER: Complete item	s 1, 2, 3 and 4.		
PS Form 3811, July 1983	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.			
<b>8</b> 3	<ol> <li>Show to whom, date and address of delivery.</li> <li>Restricted Delivery.</li> </ol>			
	3. Article Addressed to:			
	Marathon Oil Co. P. O. Box 552			
	Midland, Texas 797	702		
	4. Type of Service:	Article Number		
	Registered Insured Certified COD	47692/		
	Always obtain signature of addressee or agent and DATE DELIVERED.			
Ö	5. Signarure – Addressee	11/1/1/20		
DOMESTIC	Jammy-	detitud		
	6. Signature - Agent	(C) - (C)		
	X	COT		
RETUR	7. Date of Delivery	5 1984		
20	8 Addresses a Address (OM)	V if requested and fee maid!		

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PS Form 3811, July 1983	SENDER: Complete items 1, 2, 3 and 4.  Put your address in the reverse side. Failure to being returned to you. The FOST CEFFICE you the name of the politicary. For additions available. Consult post for service(s) requester  1. Show to whom  2. Restricted Delia  3. Article Addressed to:  But 3725
DOMESTIC RETURN RECEIPT	4. Type of Service: Article Number  Registered Insured

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