

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. 12,815
	)	
APPLICATION OF READ AND STEVENS, INC.,	)	
FOR POOL CREATION AND SPECIAL POOL	)	
RULES, LEA COUNTY, NEW MEXICO	)	
	)	

OFFICIAL EXHIBIT FILE

EXAMINER HEARING

BEFORE: MICHAEL E. STOGNER, Hearing Examiner

February 21st, 2002

Santa Fe, New Mexico

This matter came on for hearing before the New Mexico Oil Conservation Division, MICHAEL E. STOGNER, Hearing Examiner, on Thursday, February 21st, 2002, at the New Mexico Energy, Minerals and Natural Resources Department, 1220 South Saint Francis Drive, Room 102, Santa Fe, New Mexico, Steven T. Brenner, Certified Court Reporter No. 7 for the State of New Mexico.

* * *

STEVEN T. BRENNER, CCR
 (505) 989-9317

READ & STEVENS, INC.

ACREAGE PLAT

Petty Prospect

TOWNSHIP 19/20 SOUTH, RANGE 36 WEST

Lea County, New Mexico

5440 gr.ac. / 4100.52 net ac.

LEGEND

- Areas:
- 1) Area of Mutual Interest
 - 2) 3D Shoot Area (14 sections)
 - 3) Prospect

Acreage Ownership:

- 1) Read & Stevens 100%
- 2) Read & Stevens < 100%
- 3) Conoco, Arco, Chevron, Apache

19 36

OLD CONSERVATION

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BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF READ & STEVENS, INC.
FOR POOL CREATION AND SPECIAL
RULES, LEA COUNTY, NEW MEXICO.

Case No. 12815

AFFIDAVIT REGARDING NOTICE

STATE OF NEW MEXICO)
) ss.
COUNTY OF CHAVES)

Bob Watson, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters set forth herein.

2. I am a landman for Applicant.

3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the Application filed herein.

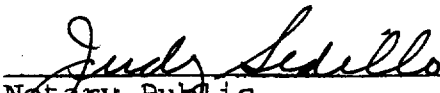
4. Notice of the Application was provided to the interest owners at their correct addresses by certified mail. Copies of the notice letters and certified return receipts are attached hereto as Exhibit A.

5. Applicant has complied with the notice provisions of Division Rule 1207.



Bob Watson

SUBSCRIBED AND SWORN TO before me this 19th day of February, 2002, by Bob Watson.



Notary Public

My Commission Expires:

6/13/04

OIL CONSERVATION DIVISION

CASE NUMBER _____

EXHIBIT 2

UNITED BANK PLAZA
400 N. PENN. SUITE 1000

CHARLES B. READ
PRESIDENT

Read & Stevens, Inc.

Oil Producers

P. O. Box 1518

Roswell, New Mexico 88202

PHONE 505 622-3770
FAX 505 622-8643

RECEIVED FEB 19 2002

January 29, 2002

CORRECTION LETTER TO
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

To: Persons on Exhibit "A"

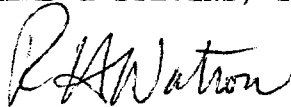
Ladies and Gentlemen:

Enclosed is a copy of an application for pool creation and special pool rules, filed with the New Mexico Oil Conservation Division by Read & Stevens, Inc., regarding the SW/4 of Section 4, Township 20 South, Range 36 East, NMPM, Lea County, New Mexico. This matter will be heard at 8:15 a.m. on Thursday, February 21, 2002 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the pool, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are requested to notify the Division and applicant's attorney by Friday, February 15, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,

READ & STEVENS, INC.



Robert H. Watson
Land Manager

RHW/jas

Enclosure



EXHIBIT "A"

Atlantic Richfield Company
200 Westlake Park Blvd.
Permian BU; 2nd Floor - WL4
Houston, TX 77079
ATTN: Mr. Lee Scarborough

Chevron U.S.A., Inc.
P.O. Box 1150
Midland, TX 79702
ATTN: Mr. James Baca, Sr.
Landman

Conoco, Inc.
10 Desta Dr., Suite 100W
Midland, TX. 79705

Apache Corporation
2000 Post Oak Blvd., Ste 100
Houston, TX 77056-4400
ATTN: Mario Moreno, Sr. Landman

EOG Resources, Inc.
P.O. Box 2267
Midland, TX 79701
ATTN: Mr. Patrick Tower

Cactus Operating Company
1907 W. Jefferson
Lovington, NM 88260

James B. Read
P.O. Box 638
Ardmore, OK 73402

CLM Production Company
P.O. Box 1518
Roswell, NM 88202

Robert H. Watson
P.O. Box 1518
Roswell, NM 88202

William A. Bradshaw, III
P.O. Box 1518
Roswell, NM 88202

Jerry N. Cox
52 Riverside Drive
Roswell, NM 88201

Harold L. Culpepper
3206 Stutz Dr.
Midland, TX 79705

Bryan Pollard
3100 Shell
Midland, TX 79705

Gerene Dianne Chase Crouch
P.O. Box 693
Artesia, NM 88211

Richard L. Chase and wife,
Karla Chase
P.O. Box 359
Artesia, NM 88211

Robert C. Chase and wife,
Deb E. Chase
2306 Sierra Vista
Artesia, NM 88210

Mack C. Chase, Trustee of the
Mack C. & Marilyn Chase Trust,
U/T/A dtd. 11/21/83
P.O. Box 693
Artesia, NM 88211

Chase Oil Corporation
P.O. Box 1767
Artesia, NM 88211

Charles B. Read
P.O. Box 1518
Roswell, NM 88202

EXHIBIT "A"

Page 2

First Century Oil, Inc.
P.O. Box 1518
Roswell, NM 88202

Dominion Oklahoma Texas
Exploration and Production,
Inc.
14000 Quail Springs Parkway,
Suite 600
Oklahoma City, OK 73134-2600
ATTN: Joe Hammond

Northern Oil Company
P.O. Box 2244
Midland, TX 79702

Douglas C. Koch
P.O. Box 10651
Midland, TX 79702

Wayne A. Bissett
P.O. Box 2101
Midland, TX 79702

Robert A. Wise
1822 Lilac Lane
Cedar Falls, IA 50613

JE Simmons Trust B
f/b/o Mary Jane Hand
1st Ntl. Bk. Lubbock Succ. Tr.
#101-3084-C/O Trust Dept.
P.O. Box 1241
Lubbock, TX 79408-1241

Beulah H. Simmons Trust A
f/b/o Jean S. Sullivan
1st Ntl. Bk. Lubbock Succ. Tr.
#101-3033-C/O Trust Dept.
P.O. Box 1241
Lubbock, TX 79408-1241

Norwest Bank Texas NA Succ. Tr.
JE Simmons Tr. A f/b/o Jean
S. Sullivan/Acct #101-3076
P.O. Box 5383
Denver, CO 80217-5383

Main Street Holding Co.
C/O Daniel J. Haake
11413 W. 104th St.
Overland Park, KS 66214-2715

J. Hiram Moore, Betty J. Moore,
& Michael H. Moore Tr U/I/Tr.
dtd 7/1/71, Richard Moore A/I/F
P.O. Box 10908
Midland, TX 79702-7908

June D. Speight
P.O. Drawer 1687
Lovington, NM 88260-1687

Kirby D. Schenck Trusts
Western Commerce Bank, Agent
P.O. Box 1627
Lovington, NM 88260-1627

Beulah H. Simmons Trust B
f/b/o Mary Jane Hand
Norwest Bk. Texas NA Succ Tr.
Acct. #101-3068
P.O. Box 5383
Denver, CO 80217-5383

Jones Robinson Ltd.
P.O. Box 2645
Roswell, NM 88202-2645

Thomas W. Pettit
151 W. Trinity Rd.
Glen Ellen, CA 95442-9603

Sandra Shaw Wienke
4126 E. Sunnyside Dr.
Phoenix, AZ 85028-1515

EXHIBIT "A"

Page 3

Curtis A. Kincer, Sr.
6340 Peppermill Dr.
Las Vegas, NV 89146-3016

Lawrence C. Brua
104 S. First Ave. West
Lake Mills, IA 50450-1511

Hazel Bruggman, Agent
1101 First Ave.
Ackley, IA 50601-1705

Jeannine H. Byron
P.O. Box 1562
Roswell, NM 88202-1562

Margaret Hard Clement
5386 Pine Terrace
Plantation, FL 33317-1319

Bickford Shaw
12 Cottondale Rd.
Austin, TX 78738-1513

Alfred E. Cooper
143 Arroyo Dr.
Danville, CA 94526-2716

June E. Grant
P.O. Box 344
Worden, IL 62097-0344

John S. Nichols, Trustee of the
John Nichols Family Trust
4810 Stallcup Drive
Mesquite, TX 75150-1144

Alice Schoening
721 Waterford Rd.
Louisville, KY 40207-1756

Richard M. Swansand
809 10th Ave.
Ackley, IA 50601-1601

Joseph F. Corcoran, Personal
Rep. Est. Bertha M. Rightmire
1302 N. 26th St.
St. Joseph, MO 64506-2747

Allen Ball
4615 Castor Dr.
Pueblo, CO 81001-1010

Republic Royalty Company
P.O. Box 840-127
Dallas, TX 75284-0127

Harry C. Hewes
9443 GSCHWind
El Paso, TX 79924-5826

Curtis Kincer, Jr.
6340 Peppermill
Las Vegas, NV 89146-3016

Jerry L. Hooper
P.O. Box 509
Socorro, NM 87801-0509

Jimmy J. Hooper
P.O. Box 817
Roswell, NM 88202-0817

Betty J. Casebolt
RR 1, Box 182
Albert Lea, MN 56007-9738

Lou Kirk Branham
Sterling City Route
Box 184A
Big Spring, TX 79720

Margaret K. Hunker
1710 West Third St.
Roswell, NM 88201-2065

Howard V. Kratz & Bernice
Kratz, JT
1201 4th Street NE
Hampton, IA 50441-1101

EXHIBIT "A"

Page 4

Ralph C. Ware & Richard Wright
CO-Trustees of Ralph C. Ware
Rev. Trust Dtd. 1/17/89
103 Ravenna Dr.
Long Beach, CA 90803-4051

Albert W. & George Ann Bjorkdal
1016 W. 15th Pl.
Kennewick, WA 99337-4144

David John Brewster
20810 Red Bay Rd.
Katy, TX 77449-6290

Joseph W. McBride and Agnes J.
McBride JT
416 4th Ave. NE
Oelwein, IA 50662-1848

Martha Slaughter
Slate Run Apt.
911 Minerva St.
Louisville, KY 40223-1270

Lois Hewes Sinclair
Route 7, Box 642H
Canyon Lake, TX 78133-9707

Joseph & Twila Goodding Living
Trust Dtd 7/12/89
Twila M. Goodding, Trustee
1009 Crestview Cr.
Farmington, NM 87401-9142

Fred. J. Lonergan
609 Washington Ct.
Guilderland, NY 12084-9541

Bobby W. Brewster
10097 Yukon St.
El Paso, TX 79924-4123

Mary Jewell Hard
2441 Sherry RD.
Louisville, KY 40217

Cecil F. Rooks & Ruby B. Rooks
904 16th Ave.
Eldora, IA 50627-2309

Albert Esten
(Address Unknown)

Paul Malcherak
10905 Sahler St.
Omaha, NE 68164-2314

June C. Waitman, Guardian
Dyan K. Ware - Minor
P.O. Box 2051E Paz Ln.
Prescott, AZ 86302-2051

June D. Speight
P.O. Drawer 1687
Lovington, NM 88260-1687

Mary Ann Hewes
1140 Ebb Tide Dr.
El Paso, TX 79936

George Frederick Kincer
1290 Cheryl Ct.
Clarksville, TN 37042-7253

Edward F. Hindman
(Address Unknown)

Richard A. Ware
308 Granada Ave.
Long Beach, CA 90814-3119

Helen A. Hensley
2638 Drayton Dr.
Louisville, KY 40205-2332

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF READ & STEVENS, INC.
FOR POOL CREATION AND SPECIAL POOL
RULES, LEA COUNTY, NEW MEXICO.

No. _____

APPLICATION

Read & Stevens, Inc. applies for an order creating the North Osudo-Devonian Pool, and instituting special rules and regulations therefor, and in support thereof, states:

1. Applicant is operator of the Liberty "4" Well No. 1 (the "Well"), located 1800 feet from the south line and 330 feet from the west line (Unit L) of Section 4, Township 20 South, Range 36 East, N.M.P.M.

2. The Well was recently completed as an oil well in the Devonian formation, and has discovered a new source of supply in the Devonian formation.

3. Applicant requests that a new pool, designated the North Osudo-Devonian Pool, be created, originally encompassing the SW $\frac{1}{4}$ of Section 4, and that temporary special pool rules be instituted for the pool providing for:

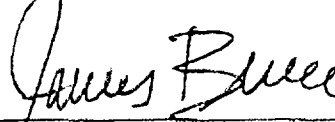
- (a) 160 acre spacing;
- (b) orthodox well locations no closer than 330 feet to a quarter section line; and
- (c) all other rules to comply with statewide rules.

4. Applicant requests that the special pool rules be made effective as of October 29, 2001, the completion date of the Well.

5. The granting of this application is in the interests of conservation, the prevention of waste, and the protection of correlative rights.

WHEREFORE, applicant requests that, after notice and hearing,
the relief requested above be granted.

Respectfully submitted,

A handwritten signature in cursive script, appearing to read "James Bruce", is written over a horizontal line.

James Bruce
Post Office Box 1056
Santa Fe, New Mexico 87504
(505) 982-2043

Attorney for Read & Stevens, Inc.

UNITED BANK PLAZA
400 N. PENN, SUITE 1000

CHARLES B. READ
PRESIDENT

Read & Stevens, Inc.

*Oil Producers
P. O. Box 1518
Roswell, New Mexico 88202*

PHONE 505 622-3770
FAX 505 622-8643

January 30, 2002

HAND DELIVERED
RETURN RECEIPT REQUESTED

RECEIVED
AND RETURN TO
READ & STEVENS, INC.

To: First Century Oil, Inc.

Ladies and Gentlemen:

Enclosed is a copy of an application for pool creation and special pool rules, filed with the New Mexico Oil Conservation Division by Read & Stevens, Inc., regarding the SW/4 of Section 4, Township 20 South, Range 36 East, NMPM, Lea County, New Mexico. This matter will be heard at 8:15 a.m. on Thursday, February 21, 2002 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the pool, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are requested to notify the Division and applicant's attorney by Friday, February 15, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,

READ & STEVENS, INC.

Robert H. Watson /js

Robert H. Watson
Land Manager

RHW/jas

First Century Oil, Inc.

Received By: *Charles B. Read*
Charles B. Read, President

Date: *2/4/02*

UNITED BANK PLAZA
400 N. PENN. SUITE 1000

CHARLES B. READ
PRESIDENT

PHONE 505 622 3770
FAX 505 622-8643

Read & Stevens, Inc.

*Oil Producers
P. O. Box 1518
Roswell, New Mexico 88202*

January 30, 2002

HAND DELIVERED
RETURN RECEIPT REQUESTED

To: Charles B. Read

Ladies and Gentlemen:

Enclosed is a copy of an application for pool creation and special pool rules, filed with the New Mexico Oil Conservation Division by Read & Stevens, Inc., regarding the SW/4 of Section 4, Township 20 South, Range 36 East, NMPM, Lea County, New Mexico. This matter will be heard at 8:15 a.m. on Thursday, February 21, 2002 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the pool, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are requested to notify the Division and applicant's attorney by Friday, February 15, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,

READ & STEVENS, INC.

Robert H. Watson/gs

Robert H. Watson
Land Manager

RHW/jas

Received By: *Charles B. Read*
Charles B. Read

Date: 2/4/02

UNITED BANK PLAZA
400 N. PENN, SUITE 1000

CHARLES B. READ
PRESIDENT

PHONE 505 622-3770
FAX 505 623-0262

Read & Stevens, Inc.

*Oil Producers
P. O. Box 1518
Roswell, New Mexico 88202*

January 30, 2002

HAND DELIVERED
RETURN RECEIPT REQUESTED

To: CLM Production Company

Ladies and Gentlemen:

R+S Inc

Enclosed is a copy of an application for pool creation and special pool rules, filed with the New Mexico Oil Conservation Division by ~~GHI Energy, Inc.~~, regarding the SW/4 of Section 4, Township 20 South, Range 36 East, NMPM, Lea County, New Mexico. This matter will be heard at 8:15 a.m. on Thursday, February 21, 2002 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the pool, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are requested to notify the Division and applicant's attorney by Friday, February 15, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,

READ & STEVENS, INC.

Robert H. Watson /RS

Robert H. Watson
Land Manager

RHW/jas

Received By: *J. Maly*

Date: *1/30/02*

UNITED BANK PLAZA
400 N. PENN, SUITE 1000

CHARLES B. READ
PRESIDENT

PHONE 505 622 3770
FAX 505 622-8643

Read & Stevens, Inc.

Oil Producers

P. O. Box 1518

Roswell, New Mexico 88202

January 30, 2002

HAND DELIVERED
RETURN RECEIPT REQUESTED

To: William A. Bradshaw, III

Ladies and Gentlemen:

Enclosed is a copy of an application for pool creation and special pool rules, filed with the New Mexico Oil Conservation Division by Read & Stevens, Inc., regarding the SW/4 of Section 4, Township 20 South, Range 36 East, NMPM, Lea County, New Mexico. This matter will be heard at 8:15 a.m. on Thursday, February 21, 2002 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the pool, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are requested to notify the Division and applicant's attorney by Friday, February 15, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,

READ & STEVENS, INC.

Robert H. Watson / JS

Robert H. Watson
Land Manager

RHW/jas

Received By: *Bill Bradshaw*

Date: *2-01-02*

UNITED BANK PLAZA
400 N. PENN, SUITE 1000

CHARLES B. READ
PRESIDENT

PHONE 505 622-3770
FAX 505 622-3643

Read & Stevens, Inc.

*Oil Producers
P. O. Box 1518
Roswell, New Mexico 88202*

January 30, 2002

HAND DELIVERED
RETURN RECEIPT REQUESTED

To: Robert H. Watson

Ladies and Gentlemen:

Enclosed is a copy of an application for pool creation and special pool rules, filed with the New Mexico Oil Conservation Division by Read & Stevens, Inc., regarding the SW/4 of Section 4, Township 20 South, Range 36 East, NMPM, Lea County, New Mexico. This matter will be heard at 8:15 a.m. on Thursday, February 21, 2002 at the Division's offices at 1220 South St. Francis Drive, Santa Fe, New Mexico 87505. As an interest owner in the pool, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

You are requested to notify the Division and applicant's attorney by Friday, February 15, 2002, if you intend to enter an appearance and participate in the case.

Very truly yours,

READ & STEVENS, INC.

Robert H. Watson/jas

Robert H. Watson
Land Manager

RHW/jas

Received By: *RH Watson*

Date: *Feb. 1, 2002*

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) <u>EFFIO TOTTEN</u> C. Date of Delivery <u>1-31-02</u> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Gerene Diane Chase Crouch P.O. Box 693 Artesia, NM 88211		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label) 7001 1940 0001 9970 4134			
PS Form 3811, August 2001		Domestic Return Receipt 102595-01-M-2509	

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) <u>Jeannine H. Byron</u> C. Date of Delivery <u>1-31-02</u> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Jeannine H. Byron P.O. Box 1562 Roswell, NM 88202-1562		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label) 7001 1940 0001 9970 3892			
PS Form 3811, August 2001		Domestic Return Receipt 102595-01-M-2509	

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☒ Agent ☐ Addressee B. Received by (Printed Name) <u>Deb Chase</u> C. Date of Delivery <u>1-31-02</u> D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Robert & Deb Chase 2306 Sierra Vista Artesia, NM 88210		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes	
2. Article Number (Transfer from service label) 7001 1940 0001 9970 4158			
PS Form 3811, August 2001		Domestic Return Receipt 102595-01-M-2509	

4. Restricted Delivery? (Extra Fee)	☒ Yes
40 0001 9970 4035 102595-01-M-2509	
COMPLETE THIS SECTION ON DELIVERY	
A. Signature	☐ Agent ☐ Addressee
B. Received by (Printed Name)	C. Date of Delivery
 1-31-02	
D. Is delivery address different from item 1?	
If YES, enter delivery address below:	
3. Service Type	
☒ Certified Mail ☐ Registered ☐ Insured Mail ☐ Express Mail ☐ Return Receipt for Merchandise ☐ C.O.D.	

COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired. your name and address on the reverse that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Received by (Please Print Clearly) B. Date of Delivery CHRIS B. NICHOLS 10/15/02 C. Signature X [Signature] ☐ Agent ☐ Addressee D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: John S. Nichols, Trustee John Nichols Family Trust 4010 Stallcup Drive Mesquite, TX 75150-1144		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
2. Article Number (Copy from service label) 7099 3400 0018 5405 4911		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, July 1999		Domestic Return Receipt 102595-00-M-0952	
COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired. your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Received by (Please Print Clearly) B. Date of Delivery George Frederick Kincer 2/4/02 C. Signature X [Signature] ☐ Agent ☐ Addressee D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: George Frederick Kincer 1290 Cheryl Ct. Clarksville, TN 37042-7253		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
2. Article Number (Copy from service label) 7001 0360 0001 2959 6641		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, July 1999		Domestic Return Receipt 102595-00-M-0952	
COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired. your name and address on the reverse that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X [Signature] ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery 1/31/02 D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Kirby D. Schenck Trusts Western Commerce Bank, Agent P.O. Box 1627 Lovington, NM 88260-1627		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
2. Article Number (Transfer from service label) 7001 1940 0001 9970 3977		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, August 2001		Domestic Return Receipt 102595-01-M-2509	
COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
Items 1, 2, and 3. Also complete Restricted Delivery is desired. your name and address on the reverse that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature X [Signature] ☐ Agent ☐ Addressee B. Received by (Printed Name) C. Date of Delivery EFFIE R. TEL 1-31-02 D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below:	
1. Article Addressed to: Chase Oil Corporation P.O. Box 1767 Artesia, NM 88211		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
2. Article Number 7001 1940 0001 9970 3977		4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, August 2001		Domestic Return Receipt 102595-01-M-2509	

mail Provides:
A unique identifier for your mailpiece
A signature upon delivery
A record of delivery kept by the Postal Service for two years
Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
Important Reminders:
Certified Mail is not available for any class of international mail.
Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
NO INSURANCE COVERAGE IS PROVIDED with Certified Mail.
For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.

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For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
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For an additional fee, delivery may be restricted to the addressee or addressee's authorized agent. Advise the clerk or mark the mailpiece with the endorsement "Restricted Delivery".
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A signature upon delivery
A record of delivery kept by the Postal Service for two years
Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
Important Reminders:
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COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

James B. Read
P.O. Box 638
Ardmore, OK 73402

2. Article Number (Transfer from service label) **7001 1940 0001 9970 4097**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Helen A. Hensley
2638 Drayton Drive
Louisville, KY 40205-2332

2. Article Number (Transfer from service label) **7001 0360 0001 2959 6627**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jerry L. Hooper
P.O. Box 509
Socorro, NM 87801-0509

2. Article Number (Transfer from service label) **7001 0360 0001 2959 6856**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

June C. Waitman, Guardian
Dylan K. Ware - Minor
P.O. Box 2051F Paz Lane
Prescott, AZ 86302-2051

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Doris Sheu** B. Date of Delivery **2-5-02**

C. Signature **[Signature]** ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature **[Signature]** ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **MERRY HARRIN** B. Date of Delivery

C. Signature **[Signature]** ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Important Reminders:
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NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpieces "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
For an additional fee, delivery may be restricted to the addressee's endorsement.

Important Reminders:
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For an additional fee, delivery may be restricted to the addressee's endorsement.

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Albert & George Ann Bjorkdal
1016 W. 15th Place
Kennewick, WA 99337-4144

2. Article Number (Copy from service label)
7001 0360 0001 2959 6788

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
47 02 02 021 PASCO WA 99301 2/2/02

C. Signature
X [Signature] ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Curtis C. Kincer, Jr.
6340 Peppermill
Las Vegas, NV 89146-3016

2. Article Number (Copy from service label)
7000 0520 0023 4983 3217

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
[Signature] 2-5-02

C. Signature
X [Signature] ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Apache Corporation
2000 Post Oak Blvd., Ste. 100
Houston, Tx 77056-4400
ATTN: Mario Moreno

2. Article Number (Transfer from service label)
7001 1940 0001 9970 4196

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Marcus Cortez 2/4/00

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.

Print your name and address on the reverse so that we can return the card to you.

Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
Bickford Shaw
12 Cottondale Rd.
Austin, TX 78738-1513

2. Article Number (Transfer from service label)
7001 1940 0001 9970 3878

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X [Signature] ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
[Signature]

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

THIS SECTION

1. Article Addressed to:

Curtis A. Kincer, Sr.
6340 Peppermill Dr.
Las Vegas, NV 89146-3016

2. Article Number
(Transfer from service label) **7001 1940 0001 9970 3922**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Curtis A. Kincer, Sr.* ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
2-5-02

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

1. Article Addressed to:

Atlantic Richfield Co.
200 Westlake Park Blvd.
Permian BU; 2nd Flr-WL4
Houston, TX 77079
ATTN: Lee Scarborough

2. Article Number
(Transfer from service label) **7001 1940 0001 9970 4165**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Joe Carroll* ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
2-5-02

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

1. Article Addressed to:

Alice Schoening
721 Waterford Rd.
Louisville, KY 40207-1756

2. Article Number (Copy from service label)
7099 3400 0018 5405 4928

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-1

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
Alice Schoening 2/6/02

C. Signature
X *Alice Schoening* ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

1. Article Addressed to:

Malcherek
10905 Sahler Street
Omaha, NE 68164-2314

2. **7001 0360 0001 2959 6689**

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
Malcherek 2/8

C. Signature
X *Malcherek* ☐ Agent ☒ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☒ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

NO INSURANCE COVERAGE
Certified Mail is not insured for loss or damage.
For an additional fee, delivery may be restricted to the addressee only.
For an additional fee, delivery may be restricted to the addressee only.
For an additional fee, delivery may be restricted to the addressee only.

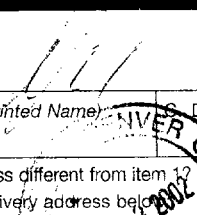
COMPLETE THIS SECTION

1. Article Addressed to:
**Norwest Bank Texas NA Succ Tr.
Beulah H. Simmons Trust
P.O. Box 5383
Denver, CO 80217-5383**

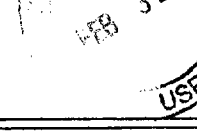
2. Article Number
(Transfer from service label) **7001 1940 0001 9970 3960**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X  ☐ Agent ☐ Addressee

B. Received by (Printed Name) **Mary Ann Hewes** Date of Delivery **2-17-22**

C. Signature
X  ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

NO INSURANCE COVERAGE
Certified Mail is not insured for loss or damage.
For an additional fee, delivery may be restricted to the addressee only.
For an additional fee, delivery may be restricted to the addressee only.
For an additional fee, delivery may be restricted to the addressee only.

SENDER: COMPLETE THIS SECTION

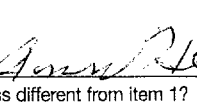
1. Article Addressed to:
**Mary Ann Hewes
2036 Ocean Side Drive
El Paso, TX 79936-3626**

2. Article Number (Copy from service label)
7099 3400 0018 5405 4881

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Mary Ann Hewes** B. Date of Delivery **2-17-22**

C. Signature
X  ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

NO INSURANCE COVERAGE
Certified Mail is not insured for loss or damage.
For an additional fee, delivery may be restricted to the addressee only.
For an additional fee, delivery may be restricted to the addressee only.
For an additional fee, delivery may be restricted to the addressee only.

COMPLETE THIS SECTION

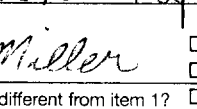
1. Article Addressed to:
**David Jane Brewster
20810 Red Bay Road
Katy, TX 77449-6290**

2. Article Number
7001 0360 0001 2959 6771

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Judy Miller** B. Date of Delivery **2/12/02**

C. Signature
X  ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

NO INSURANCE COVERAGE
Certified Mail is not insured for loss or damage.
For an additional fee, delivery may be restricted to the addressee only.
For an additional fee, delivery may be restricted to the addressee only.
For an additional fee, delivery may be restricted to the addressee only.

COMPLETE THIS SECTION

1. Article Addressed to:
**Margaret Hard Clement
5386 Pine Terrace
Plantation, FL 33317-1319**

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X  ☐ Agent ☐ Addressee

B. Received by (Printed Name) **M. D. Clement** C. Date of Delivery **2-1-02**

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise

102595-00-M-0952
PS Form 3811, July 1999
Domestic Return Receipt
102595-00-M-0952

Mail Provides:
A mailing receipt
A unique identifier for your mailpiece
A signature upon delivery
A record of delivery
Certified Mail may ONLY be combined with First-Class Mail.
NO INSURANCE COVERAGE IS PROVIDED for any class of mail.
For an additional fee, a Return Receipt (PS Form 3811) may be obtained.
For an additional fee, a duplicate receipt may be obtained.

When making an inquiry:
A unique identifier for your mailpiece
A signature upon delivery
A record of delivery
Certified Mail may ONLY be combined with First-Class Mail.
NO INSURANCE COVERAGE IS PROVIDED for any class of mail.
For an additional fee, a Return Receipt (PS Form 3811) may be obtained.
For an additional fee, a duplicate receipt may be obtained.

Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Cecil F. Rooks & Ruby B. Rooks
904 16th Ave.
Eldora, IA 50627-2309

A. Received by (Please Print Clearly) Cecil F Rooks B. Date of Delivery 2-4-02
C. Signature [Signature] ☐ Agent ☒ Addressee
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. A 7001 0360 0001 2959 6696

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard M. Swansand
809 10th Ave.
Ackley, IA 50601-1601

A. Received by (Please Print Clearly) MARY SWANSAND B. Date of Delivery 2-4-02
C. Signature [Signature] ☐ Agent ☒ Addressee
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label) 7099 3400 0018 5405 4935

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mary Jewell Hard
2441 Sherry Road
Louisville, KY 40217

A. Received by (Please Print Clearly) MARY HARD B. Date of Delivery 2-4-02
C. Signature [Signature] ☐ Agent ☒ Addressee
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. A 7001 0360 0001 2959 6702

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Thomas W. Pettit
151 W. Trinity Rd.
Glen Ellen, CA 95442-9603

A. Signature [Signature] ☐ Agent ☒ Addressee
B. Received by (Printed Name) T. Pettit C. Date of Delivery 2-4-02
D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) 7001 1940 0001 9920 3946

Certified Mail

- A mailing receipt
 - A unique identifier
 - A signature upon delivery
 - A record of delivery kept by the Postal Service for two years
- Important Reminders:**
- Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
 - NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail is required.
 - For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail is required.

Certified Mail Provides:

- A mailing receipt
- A unique identifier
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail is required.
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Certified Mail Provides:

- A mailing receipt
- A unique identifier
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail is required.
- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail is required.

Certified Mail Provides:

- A mailing receipt
- A unique identifier
- A signature upon delivery
- A record of delivery kept by the Postal Service for two years

Important Reminders:

- Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
- NO INSURANCE COVERAGE IS PROVIDED with Certified Mail. For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail is required.
- For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail is required.

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete Restricted Delivery is desired. your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Alfred Cooper
143 Arroyo Dr.
Danville, CA 94526-2716

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) **7001 1940 0001 9970 3861**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete Restricted Delivery is desired. your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Main Street Holding Co.
11413 W. 104th St.
Overland Park, KS 66214-2715

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) **7001 1940 0001 9970 4004**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete Restricted Delivery is desired. your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dominion Oklahoma Texas Explor.
and Production, Inc.
14000 Quail springs Parkway
Suite 600
Oklahoma City, OK 73134-2600
ATTN: Joe Hammond

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) **7001 1940 0001 9970 4059**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete Restricted Delivery is desired. your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Robert A. Wise
1822 Lilac Lane
Cedar Falls, IA 50613

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Transfer from service label) **7001 1940 0001 9970 402A**

For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent. For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent. For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent.

For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent. For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent. For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent.

For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent. For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent. For an additional fee, a duplicate return receipt may be obtained by the addressee's authorized agent.

COMPLETE THIS SECTION

1. Article Addressed to:

Sandra Shaw Wienke
4126 E. Sunnyside Dr.
Phoenix, AZ 85028-1515

2. Article Number
(Transfer from service label) **7001 1940 0001 9970 3939**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X Sandra Shaw Wienke** ☐ Agent ☒ Addressee

B. Received by (Printed Name) **Sandra Wienke** C. Date of Delivery **2/2/03**

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

1. Article Addressed to:

June D. Speight
P.O. Drawer 1687
Lovington, NM 88260-1687

2. Article Number
(Transfer from service label) **7001 1940 0001 9970 3984**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X June D. Speight** ☐ Agent ☒ Addressee

B. Received by (Printed Name) C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

1. Article Addressed to:

June D. Speight
P.O. Drawer 1687
Lovington, NM 88260-1687

2. Article Number
(Transfer from service label) **7001 0360 0001 2959 6665**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature **X June D. Speight** ☐ Agent ☒ Addressee

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

1. Article Addressed to:

Betty J. Casebolt
RR 1, Box 182
Albert Lea, MN 56007-9738

2. Article Number
(Transfer from service label) **7001 0360 0001 2959 6832**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery **2/02/02**

C. Signature **X Betty Casebolt** ☐ Agent ☒ Addressee

D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Important Reminders:
Certified Mail may ONLY be combined with First-Class Mail or Priority Mail.
NO INSURANCE COVERAGE IS PROVIDED with Certified Mail.
For an additional fee, a Return Receipt may be requested to provide proof of delivery. To obtain Return Receipt service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Return Receipt Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
For an additional fee, an addressee's authorization to restrict delivery may be requested. To obtain Restricted Delivery service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Restricted Delivery Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.
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For an additional fee, an addressee's authorization to restrict delivery may be requested. To obtain Restricted Delivery service, please complete and attach a Return Receipt (PS Form 3811) to the article and add applicable postage to cover the fee. Endorse mailpiece "Restricted Delivery Requested". To receive a fee waiver for a duplicate return receipt, a USPS postmark on your Certified Mail receipt is required.

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Richard & Karla Chase
P.O. Box 359
Artesia, NM 88211

2. Article Number
(Transfer from service label) **7001 1940 0001 9970 4141**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Jeffie Potter* ☐ Agent ☐ Addressee

B. Received by (Printed Name) **JEFFIE POTTER** C. Date of Delivery **1-31-02**

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jerry N. Cox
52 Riverside Dr.
Roswell, NM 88201

2. Article Number
(Transfer from service label) **7001 1940 0001 9970 4103**

PS Form 3811, August 2001 Domestic Return Receipt 102595-01-M-2509

COMPLETE THIS SECTION ON DELIVERY

A. Signature
X *Jerry Cox* ☐ Agent ☐ Addressee

B. Received by (Printed Name) **Jerry Cox** C. Date of Delivery **01-31-02**

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Margaret K. Hunker
1710 West Third St.
Roswell, NM 88201-2065

2. Article Number
(Transfer from service label) **7001 0360 0001 2959 6818**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Margaret K. Hunker** B. Date of Delivery **1-31-02**

C. Signature
X *Margaret Hunker* ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
Print your name and address on the reverse so that we can return the card to you.
Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bobby J. Brewster
10097 Yken St.
El Paso, TX 79924-4123

2. Article Number
(Transfer from service label) **7001 0360 0001 2959 6719**

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Bobby J. Brewster** B. Date of Delivery **1 Feb 02**

C. Signature
X *Bobby Brewster* ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

Postage	\$ 5.17
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17

Postmark Here

Sent To: *Ralph Ware & Richard Wright*
 Street, Apt. No.: *103 Ravenna Dr.*
 or PO Box No.: *103*
 City, State, ZIP+4: *Long Beach, CA 90803-4051*

PS Form 3800, January 2001

COMPLETE THIS SECTION

See items 1, 2, and 3. Also complete Restricted Delivery is desired. For name and address on the reverse we can return the card to you. Write this card to the back of the mailpiece, on the front if space permits.

Addressed to:
 Ralph C. Ware & Richard Wright
 Co-Trustees Ralph Ware Rev. Trust
 103 Ravenna Drive
 Long Beach, CA 90803-4051

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery <i>2-14-02</i>
C. Signature X	
☐ Agent ☐ Addressee	
D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
4. Restricted Delivery? (Extra Fee) ☐ Yes	

2/13/02

READ & STEVENS, INC.
 P.O. BOX 1518
 400 N. PENN - SUITE 1000
 ROSWELL, NEW MEXICO 88202-1518

To Ralph C. Ware & Richard Wright
 Co-Trustees Ralph Ware Rev. Tr.
 103 Ravenna Dr.
 Long Beach, CA 90803-4051

☐ NO SUFFICIENT ADDRESS
☐ ATTEMPTED DELIVERY
☐ INSUFFICIENT ADDRESS
☐ VACANT
☐ REFUSED
☒ NOT DELIVERABLE AS ADDRESSED
 UNABLE TO FORWARD

ROUTE NUMBER *312* **INITIALS** *SW*

OF THE RETURN ADDRESS. FOLD AT DOTTED LINE.

Postal Service
POSTED MAIL RECEIPT
Postage Mail Only; No Insurance Coverage Provided

Postage	\$ 1.57	Postmark Here
Certified Fee	\$ 2.10	
Receipt Fee (if required)	\$ 1.50	
Delivery Fee (if required)		
Stage & Fees	\$ 4.17	

Read & Bernice Kratz JT
1201 4th St. NE
Hampton, IA 50441-1101
3800, January 2001

COMPLETE THIS SECTION

Items 1, 2, and 3. Also complete Restricted Delivery is desired. For name and address on the reverse we can return the card to you. This card to the back of the mailpiece, front if space permits.

Addressed to:

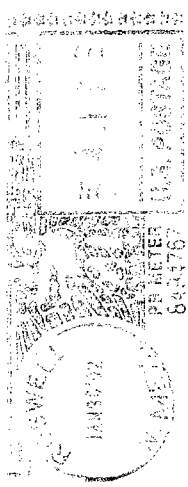
Howard V. Kratz & Bernice Kratz
1201 4th Street NE
Hampton, IA 50441-1101

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)
B. Date of Delivery 2-14-02
C. Signature X
D. Is delivery address different from item 1? If YES, enter delivery address below:
Agent Addressee Yes No

3. Service Type
Certified Mail Express Mail
Registered Return Receipt for Merchandise

LN
2-13-02



READ & STEVENS, INC.
P.O. BOX 1518
400 N. PENN - SUITE 1000
ROSWELL, NEW MEXICO 88202-1518

To
Howard V. Kratz & Bernice Kratz
1201 4th Street NE
Hampton, IA 50441-1101

- ☒ Not Deliverable As Addressed
- ☒ Unable To Forward
- ☒ Restricted Address
- ☒ Moved, Let No Address
- ☒ Undelivered, Refused
- ☒ Attempted, Not Known
- ☒ No Such Street Number
- ☒ Vacant, Illegible
- ☒ No Mail Recastable
- ☒ Box Closed-No Order
- ☒ Returned For Better Address
- ☒ Postage Due

1950 JAN 10

P.O. BOX 1518
400 N. PENN - SUITE 1000
ROSSELL, NEW MEXICO 88202-1518

Louis Hewes Sinclair
Route 7, Box 642H
Canyon Lake, TX 78133-9707

007

RETURNED TO SENDER

REASON: UNDELIVERED

Unclassified

Attempted but failed

Insufficient Address

No such street

No such office in suite

Do not re-mail in this envelope

e items 1, 2, and 3. Also complete
 Restricted Delivery is desired.
 or name and address on the reverse
 we can return the card to you.
 is card to the back of the mailpiece,
 front if space permits.

Addressed to:

Hewes Sinclair
7, Box 642H
En Lake, TX 78133-9707

A. Received by (Please Print Clearly)	B. Date of Delivery
---------------------------------------	---------------------

C. Signature

x

D. Is delivery address different from item 1?
If YES, enter delivery address below:

☐ Agent
☐ Addressee

3. Service Type

☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

0429 6562 T000 09E0 T002 2000 0360 0001 2959 6740

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

OFFICIAL USE

Postage	\$ 5.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17

Postmark
Here

Sent To
Martha Slaughter
Street, Apt. No.
Slate Run Apt., 911 Minerva St.
City, State, ZIP
Louisville, KY 40223-1270
PS Form 3800, January 2001

See Reverse for Instructions

COMPLETE THIS SECTION

State items 1, 2, and 3. Also complete if Restricted Delivery is desired. Your name and address on the reverse we can return the card to you. Attach this card to the back of the mailpiece, the front if space permits.

Addressed to:

Martha Slaughter
Slate Run Apt.
Minerva Street
Louisville, KY 40223-1270

COMPLETE THIS SECTION ON DELIVERY

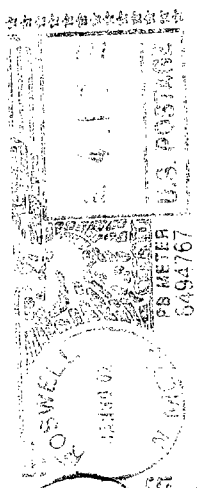
A. Received by (Please Print Clearly) B. Date of Delivery
2-12-02

C. Signature
X ☐ Agent
☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes



2/11

READ & STEVENS, INC.

P.O. BOX 1518
400 N. PENN - SUITE 1000
ROSWELL, NEW MEXICO 88202-1518

To

Martha Slaughter
Slate Run Apt.
911 Minerva St.
Louisville, KY 40223-1270

40243
RETURNED TO
SENDER
Attempted Not Known

AK-303

2529 6562 7000 0950 7007

RECEIVED FEB 11 2002

Postmark
Here

Postage	\$ 1.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17

Sent To Joseph & Agnes McBride
Street, Apt. No.,
or PO Box No. 416 4th Ave. NE
City, State, ZIP+4® Oelwein, IA 50662-1848
PS Form 3800, January 2001 See Reverse for Instructions

READ & STEVENS, INC.
P.O. BOX 1518
400 N. PENN - SUITE 1000
ROSWELL, NEW MEXICO 88202-1518

To Joseph W. McBride & Agnes McBride
416 4th Ave
Oelwein, IA 50662-1848

- ☐ Attempted - Not Known
☐ No Such Street or Number
☐ No. or Street in Wrong
☐ Not Delivered - No Order
☐ Postage Due
- ☐ Not Deliverable As Addressed
☐ Unable To Forward
☐ Insufficient Address
☐ Moved, Left No Address
☐ Unclaimed
☐ Refused

3. COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Your name and address on the reverse of this card to the back of the mailpiece, the front if space permits.

Addressed to:

ph W, McBride & Agnes
McBride
416 4th Ave. NE
Oelwein, IA 50662-1848

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
RTS 2-11-02
- C. Signature ☐ Agent
X ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. 7001 0360 0001 2959 6764

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

7001 191 0204 0266 1000 0467 1002

7001 191 0204 0266 1000 0467 1002

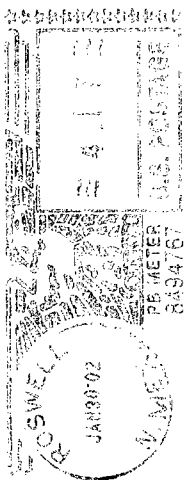
Postage	\$ 1.57	Postmark Here
Certified Fee	2.10	
Return Receipt Fee (Endorsement Required)	1.50	
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.17	

Sent To DOUGLAS C. KOCH

Street, Apt. No., or PO Box No. P.O. Box 10651

City, State, ZIP+4 MIDLAND, TX 79702

PS Form 3800, January 2003 See Reverse for Instructions



15901

NOT DELIVERABLE
AS ADDRESSED,
UNABLE TO FORWARD

READ & STEVENS, INC.
P.O. BOX 1518
400 N. PENN - SUITE 1000
ROSWELL, NEW MEXICO 88202-1518

To
Douglas C. Koch
P.O. Box 10651
Midland, TX 79702

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:

Douglas C. Koch
P.O. Box 10651
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent

B. Received by (Printed Name) ☒ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type ☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise

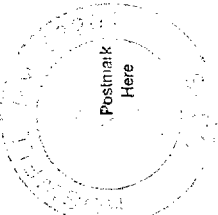


7001 036 6562 0000 0960 0002

0 1 2 3 4 5 6 7 8 9

7001 036

Postage	\$ 5.57
Certified Fee	\$ 2.10
Return Receipt Fee (Endorsement Required)	\$ 1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17



Sent To
Lou Kirk Branham
Sterling City Rt. Box 184A
Big Spring, TX 79720
City, State, ZIP+4

PS Form 3800, January 2001 See Reverse for Instructions

TO: COMPLETE THIS SECTION

Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Write your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, with the front if space permits.

Addressed to:
Kirk Branham
Sterling City Route
184A
Big Spring, TX 79720

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)		B. Date of Delivery	
C. Signature		☐ Agent ☐ Addressee	
☒ X			
D. Is delivery address different from item 1? If YES, enter delivery address below:		☐ Yes ☐ No	
3. Service Type			
☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.			
4. Restricted Delivery? (Extra Fee) ☐ Yes			

2 7001 0360 0001 2959 6825

RECEIVED FEB - 5 2002

6-12 FEB - 2 AM

READ & STEVENS, INC.

P.O. BOX 1518
400 N. PENN - SUITE 1000
ROSWELL, NEW MEXICO 88202-1518

To

Lou Kirk Branham
Sterling City Route
Box 184A
Big Spring, TX 79720



THE RIA ADDRESS HAS
BEEN CHANGED BY 911
AUTHORITY ONE YEAR
TIME LIMIT HAS EXPIRED

Name
1st Notice
2nd Notice
Return

MS
2/12/11

7001 1940 0001 9970 3

Postage	\$.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17

PS Form 3800, January 2001 See Reverse for Instructions

Postmark
ROSWELL, NM
88201
30
2002

Postage paid by addressee

Postmark
ROSWELL, NM
88201
30
2002

READ & STEVENS, INC.
P.O. BOX 1518
400 N. PENN. - SUITE 1000
ROSWELL, NEW MEXICO 88202-1518

TO
Lawrence C. Brua
104 S. First Ave. West
Lake Mills, IA 50450-1511

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lawrence C. Brua
104 S. First Ave. West
Lake Mills, IA 50450-1511

COMPLETE THIS SECTION ON DELIVERY

A. Signature

☒ X

☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

2-8-02

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☒ X Certified Mail

☐ Express Mail

☐ Registered

☐ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number
(Transfer from service label)

7001 1940 0001 9970 3915

PS Form 3811, August 2001

Domestic Return Receipt

102595-01-MA-2509

delivered

RECEIVED FEB - 8 2002

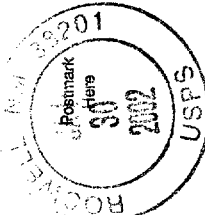
First Class
Return
104

(Domestic Mail Only: No Insurance Coverage Provided)

Figure 1 illustrates the steps of the proposed algorithm for finding a minimum spanning tree. The process starts with a graph with 10 nodes and 15 edges. The algorithm iteratively selects edges with the lowest weight that do not create a cycle or result in a vertex with a degree greater than 2. The steps are as follows:

- (a) Initial graph with 10 nodes and 15 edges.
- (b) Select edge (1,2) with weight 1.
- (c) Select edge (2,3) with weight 2.
- (d) Select edge (3,4) with weight 3.
- (e) Select edge (4,5) with weight 4.
- (f) Select edge (5,6) with weight 5.
- (g) Select edge (6,7) with weight 6.
- (h) Select edge (7,8) with weight 7.
- (i) Select edge (8,9) with weight 8.
- (j) Select edge (9,10) with weight 9.
- (k) Final minimum spanning tree with 9 edges and total weight 45.

Postage	\$.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17



Sent To _____
Hazel Bruggman-Agent
Street, Apt. No.;
1101 First Ave.
City, State, ZIP+ 4
Ackley, IA 50601-1705

See Reverse for Instructions

3-1

See reverse for instructions

NOT AT THIS ADDRESS

DEAD & STEVENS, INC.

P.O. BOX 1518
400 N. PENN - SUITE 1000
ROSWELL, NEW MEXICO 88202-1518

TO Hazel Bruggman, Agent
1101 First Ave.
Ackley, IA 50601-1705

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hazel Bruggman, Agent
1101 First Ave.
Ackley, IA 50601-1705

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X**

B. Received by (Printed Name)	C. Date of Delivery
	2-14-02

D. Is delivery address different from item 1? ☐ Yes ☐ No

If YES, enter delivery address below:

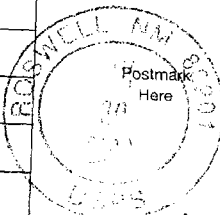
3. Service Type

☒ Certified Mail	☐ Express Mail
☐ Registered	☐ Return Receipt for Merchandise
☐ Insured Mail	☐ C.O.D.

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7099 3400 001A 5405 4942

Postage	\$.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17



Recipient's Name (Please Print Clearly) (To be completed by mailer)
Joseph Corcoran Rep. Guthrie
Street, Apt. No., or PO Box No. *1302 N. 76th St.*
City, State, ZIP+4 *St. Joseph, MO 64506-2747*

PS Form 3800, February 2000 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0023 4983 3224

Postage	\$.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17



Recipient's Name (Please Print Clearly) (To be completed by mailer)
Harry Hewes
Street, Apt. No., or PO Box No. *9443 CSCHWind*
City, State, ZIP+4 *El Paso, TX 79924-5826*

PS Form 3800, February 2000 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7001 0360 0001 2959 6726

OFFICIAL USE

Postage	\$.57
Certified Fee	2.10
Return Receipt Fee (Endorsement Required)	1.50
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.17



Sent To *Fred Lonergan*
Street, Apt. No., or PO Box No. *609 Washington Ct.*
City, State, ZIP+4 *Quiverland, NY 12884-5541*

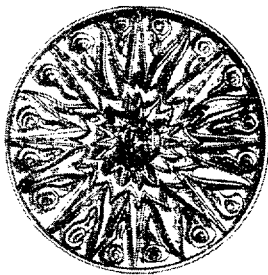
PS Form 3800, January 2001 See Reverse for Instructions

Read & Stevens, Inc.

Oil Producers

P. O. Box 1518

Alameda, New Mexico 88202

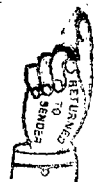
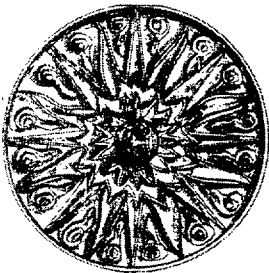


Read & Stevens, Inc.

Oil Producers

P. O. Box 1518

Alameda, New Mexico 88202



ATTEMPTED
NOT KNOWN

Received

forwarded to Daughter

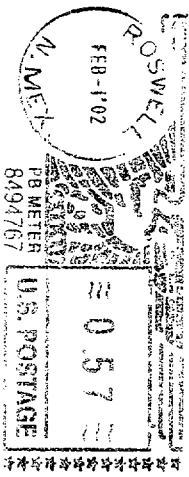
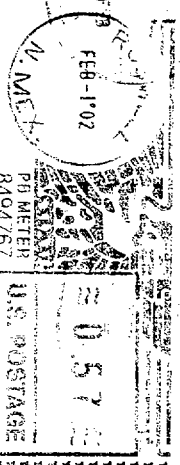
Harry C. Hayes
9443-GSCHWIND
El Paso, TX 79924-5826

Station Underwood
1102 Grande
Albany, New Mexico

88240

88240+0893283

|||||



FOF

Hazel Ruggman, Agent
1101 Fifth Ave.
Ackley, IA 50601-1705

UNITED STATES POSTAL SERVICE
FIRST CLASS PERMIT NO. 1000
ALAMEDA, NEW MEXICO 88202
POSTAGE WILL BE PAID BY ADDRESSEE
NO POSTAGE NEEDED IF MAILED IN THE UNITED STATES

151A

|||||

Read & Stevens, Inc.

Oil Producers

P. O. Box 1518

Roswell, New Mexico 88202



NO SUCH NUMBER
ATTEMPTED NOT KNOWN
INSUFFICIENT ADDRESS
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

✓ ☐ VACANT C. Ware & Richard Wright Co-Trustees
☐ REFUSED
C. WARE Rev. Trust
103 Ravenna Dr.
Long Beach, CA 90803-4051

8820291312

|||||

Read & Stevens, Inc.

Oil Producers

P. O. Box 1518

Roswell, New Mexico 88202



Not Deliverable As Addressed
Unable To Forward
☐ Insufficient Address
☐ Moved, Left No Address
☐ Unclaimed ☐ Refused
☐ Attempted-Not Known
☐ No Such Street ☐ Number
☐ Vacant ☐ Illegible
☐ No Mail Receptacle
☐ Box Closed-No Order
☐ Returned For Better Address
☐ Postage Due

Howard V. Kratz & Bernice Kratz, JT
1201 4th St. NE
Hampton, IA 50441-1101

8820291312

|||||

Read & Stevens, Inc.

Oil Producers

P. O. Box 1518

Roswell, New Mexico 88202



Martha Slaughter
Slate Run Apt.
911 Minerva St.
Louisville, KY 40223-1270

Am
2/20/03

A
C
S
☐ INSUFFICIENT ADDRESS
☒ ATTEMPTED NOT KNOWN
☐ NO SUCH NUMBER/ STREET
☐ NOT DELIVERABLE AS ADDRESSED
- UNABLE TO FORWARD
☐ OTHER
R
RETURN

8820291312

|||||

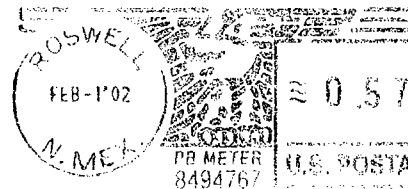
Read & Stevens, Inc.

Oil Producers

P. O. Box 1518

Roswell, New Mexico 88202

NOT DELIVERABLE
AS ADDRESSED,
UNABLE TO FORWARD



Lois Hewes Sinclair
Route 7, Box 642H
Canyon Lake, TX 78133-9707



78133/87

Read & Stevens, Inc.

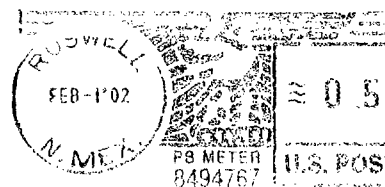
Oil Producers

P. O. Box 1518

Roswell, New Mexico 88202

FOE
deceased

Lawrence C. Brua
104 S. First Ave. West
Lake Mills, IA 50450-1511



50450-1511 1A

Read & Stevens, Inc.

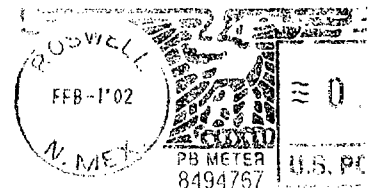
Oil Producers

P. O. Box 1518

Roswell, New Mexico 88202



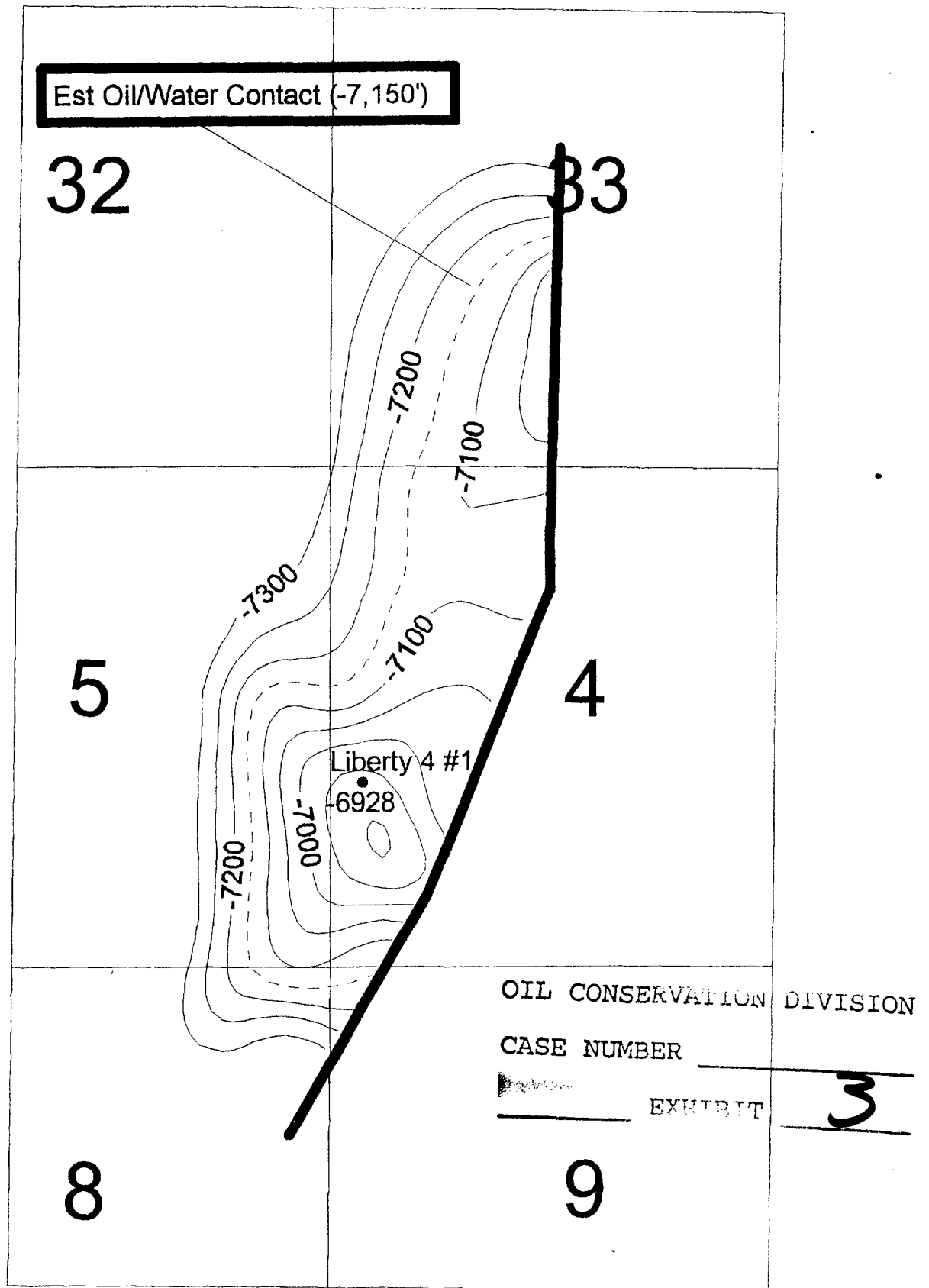
NOT DELIVERABLE
AS ADDRESSED,
UNABLE TO FORWARD



Joseph W. Corcoran, Personal Rep.
Estate Bertha M. Rightmire
1302 N. 26th St.
St. Joseph, MO 64506-2747



64506-2747 1A



Read & Stevens, Inc.
Liberty 4 #1 Devonian Disc
T19S & 20S, R36E Lea Co., NM
Dated 2/4/2002 - By: JCM

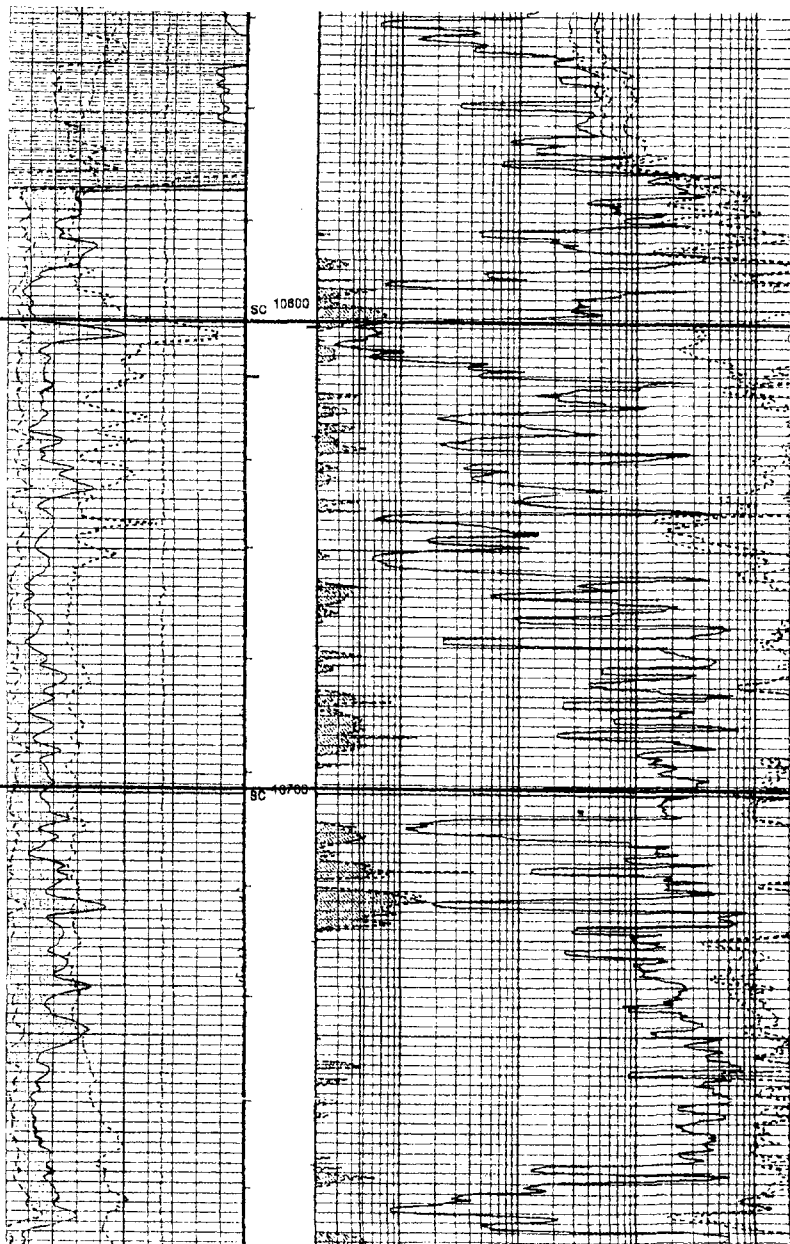
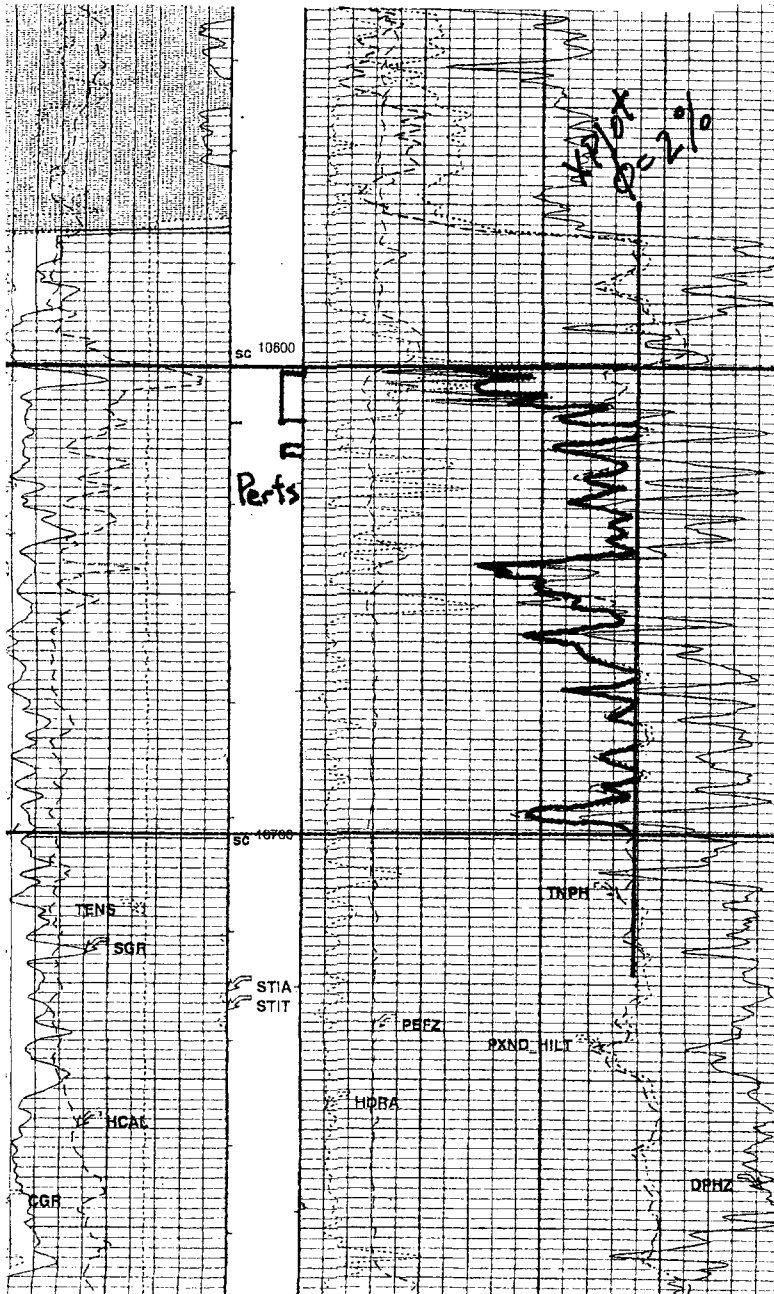
Devonian Structure Map
based upon 3D seismic
contour Interval = 50'

WELL: Liberty "4" Fed. Cam. #1
FIELD: Wildcat
COUNTY: Lea STATE: New Mexico

Schlumberger		PLATFORM EXPRESS Three Detector Litho Density Compensated Neutron/NGT	
1800' FSL & 330' FWL Section 4, Township 20-S, Range 36-E	Elev.: K.B. 3648 ft G.L. 3629 ft D.F. 3648 ft	Permanent Datum: GROUND LEVEL Log Measured From: KELLY BUSHING Drilling Measured From: KELLY BUSHING	
API Serial No. 30-025-35371	SECTION 4	TOWNSHIP 20-S	RANGE 36-E
Logging Date: 14-JUL-2001			
Run Number: 3			
Depth Driller: 13630 ft			
Schlumberger Depth: 13602 ft			
Bottom Log Interval: 13572 ft			
Top Log Interval: 9100 ft			
Casing Driller Size @ Depth: 9.625 in @ 9510 ft			
Casing Schlumberger: 9512 ft			
Bit Size: 8.200 in			
Type Fluid in Hole: BRINE/KCD			
Density: 9.3 lbm/gal			
Viscosity: 44 s			
Fluid Loss: 18 cm3			
PH: 9.5			
Source Of Sample: Circulation Pit			
RM @ Measured Temperature: 0.064 ohm.m @ 108 degF			
RMF @ Measured Temperature: 0.048 ohm.m @ 106 degF			
RMC @ Measured Temperature: @			
Source RMF: RMC			
RM @ MRT: 0.043 @ 163 0.032 @ 163			
RMF @ MRT: 163 degF			
Maximum Recorded Temperatures: 14:00			
Circulation Stopped: 05:40			
Logger On Bottom: 3112 Hobbs, New Mexico			
Unit Number: 3112 Hobbs, New Mexico			
Recorded By: D. Jimenez			
Witnessed By: Mr. Bud Thorpe			

COMPANY: Read & Stevens, Inc.
WELL: Liberty "4" Fed. Cam. #1
FIELD: Wildcat
COUNTY: Lea STATE: New Mexico

Schlumberger		PLATFORM EXPRESS/ARRAY INDUCTION/DUAL AND AZIMUTHAL LATEROLOG/MIC FINAL COMPOSITE	
1800' FSL & 330' FWL Section 4, Township 20-S, Range 36-E	Elev.: K.B. 3648 ft G.L. 3629 ft D.F. 3648 ft	Permanent Datum: GROUND LEVEL Log Measured From: KELLY BUSHING Drilling Measured From: KELLY BUSHING	
API Serial No. 30-025-35371	SECTION 4	TOWNSHIP 20-S	RANGE 36-E
Logging Date: 19-MAY-2001			
Run Number: 2			
Depth Driller: 4636 ft			
Schlumberger Depth: 4632 ft			
Bottom Log Interval: 4517 ft			
Top Log Interval: 408 ft			
Casing Driller Size @ Depth: 20.000 in @ 408 ft			
Casing Schlumberger: 4630 ft			
Bit Size: 12.500 in			
Type Fluid in Hole: FRESH WATER/CM			
Density: 10.8 lbm/gal			
Viscosity: 31 s			
Fluid Loss: 19			
PH: 11			
Source Of Sample: Circulation Pit			
RM @ Measured Temperature: 0.040 ohm.m @ 80 degF			
RMF @ Measured Temperature: 0.040 ohm.m @ 80 degF			
RMC @ Measured Temperature: @			
Source RMF: RMC			
RM @ MRT: 0.028 @ 113 0.029 @ 113			
RMF @ MRT: 152 degF			
Maximum Recorded Temperatures: 14:00			
Circulation Stopped: 10:30			
Logger On Bottom: 3125 Hobbs, New Mexico			
Unit Number: 3125 Hobbs, New Mexico			
Recorded By: Rocio Maldonado, Juan Ortiz			
Witnessed By: Mr. Bud Thorpe			



Liberty 4 #1 Devonian Discovery
Sec 4 & 5, 20S 36E, Sec 33 19S 36E
Lea Co., NM
By: JCM 2/4/2002

Date of Discovery	October 28, 2001
Number of Producing Wells	1
Cum Oil Production (production through Jan 2002)	33,069 bbl
Cum Gas Production	5,220 Mcf
Cum Water Production	- bbl
GOR Initial	158 cu ft/bbl
Current Oil Rate	330 BOPD
Current Gas Rate	50 MCFD
Current Water Rate	0 BWPD
Avg Water Cut (life)	- %
Drive Mechanism	Est Water Drive

Area of Oil Column above estimated o/w contact at (-7,150)	276 acres
Amount of Closure above o/w contact	254 feet
Avg thickness of net pay in well/across field	85/64 feet
Average Porosity (xplot from log)	6.4 %
Average Water Saturation (from log calc)	35 %
Formation Volume Factor (Standing correlation)	1.124 res bbl/bbl
Soln GOR (est)	158 cu ft/bbl
Oil Gravity @ 60°F	47.0
Bubble Point Pressure (Standing correlation)	391 psi
Permeability from DST #7 (Ko)	16.3 md
BHP(initial @ midpoint of pay)	4,244 psi
Press Gradient (midpoint of pay (10,650'))	0.398 psi/ft

Calculated Original Oil in Place	5,071,707 bbl
Calculated Original Oil in Place	287.1 bbl/acre-ft
Recovery Factor (estimate)	50 %
Recoverable Reserves (ultimate)	2,535,854 bbl
Recoverable Reserves (ultimate)	143.6 bbl/acre-ft

Comments: DST 10,590' - 10,651' (upper 1/2 of Devonian pay). 15 min IFP 501-650, 60 min ISIP 4,249, 120 min FFP 889 - 1,515, 240 min FSIP 4,240. Rec 3,438' HGCO. Treated in tank to 15.3 BO. Perf 10,604 - 614' & 10,619 - 621' (12' perfs, 17' overall). Acidize w/ 500 gal 15% NEFe. IPP 482 BOPD, Gas TSTM, 0 BWPD.

Drilling/Recomplete AFE

Well Name: Klein 5 #1	Well Type: Oil
Date Prepared: 2/4/2002	Location: SE/4 Sec 5 T20S R36E
Prospect:	Co/St: Lea/NM
Begin Date:	TD: 10,900'
Purpose: D & C Devonian	Prepared By: JCM

<i>Intangibles</i>	<i>Code</i>	<i>Drill</i>	<i>Code</i>	<i>Comp</i>	<i>Total</i>
Loc Prep & Dmge (Including Conductor)	203	\$35,000	303	\$1,500	\$36,500
Drig Footage	206	\$293,500	306		\$293,500
Drig Day	209	\$40,000	309	\$16,000	\$56,000
Bits/Reamers	212	\$7,500	312		\$7,500
Mud/Chem	215	\$55,000	315		\$55,000
Water (including transportation)	218	\$15,000	318	\$2,500	\$17,500
Eq Rentals (surface & downhole)	221	\$45,000	321	\$13,000	\$58,000
Elec Logs/Wireline	224	\$55,000	324	\$6,500	\$61,500
Core/Test (3 DST, 250' Full Diam Core)	227	\$52,500	327		\$52,500
Mud Log	230	\$17,500	330		\$17,500
Haul/Freight	233	\$1,000	333	\$1,000	\$2,000
Supervision	236	\$20,000	336	\$4,000	\$24,000
Cmt & Serv	239	\$33,000	339	\$35,000	\$68,000
Perforate	242		342	\$4,500	\$4,500
Acidize	245		345	\$7,500	\$7,500
Frac	269		369		
Completion Unit	248		348	\$13,300	\$13,300
Contract Serv (inspection, battery install, etc)	251	\$15,000	351	\$14,000	\$29,000
Overhead	257	\$7,000	357	\$3,500	\$10,500
Contingency (Directional 4 days)	263	\$30,000	363		\$30,000

Total Intangibles		\$722,000		\$122,300	\$844,300
--------------------------	--	------------------	--	------------------	------------------

<i>Tangibles</i>	<i>Code</i>	<i>Drill</i>	<i>Code</i>	<i>Comp</i>	<i>Total</i>
Casing:					
Surf 400' of 13 3/8"	403	\$7,100			\$7,100
Prot 5,200' of 8 5/8"		\$59,800			\$59,800
Prod 10,800' of 5 1/2"	406			\$85,800	\$85,800
			503		
	416				
Tubing			509	\$37,100	\$37,100
Rods			512	\$20,000	\$20,000
Wellhead	415	\$7,500	515	\$2,500	\$10,000
Subsurf Eq (Liner hangers, prod eq,etc)	418		518	\$8,500	\$8,500
Surf Eq	421		521	\$2,000	\$2,000
Flowline			524	\$2,000	\$2,000
Pump Eq			527	\$45,000	\$45,000
Tankage			530	\$15,000	\$15,000
Separator			533		
Dehydrator			536		
Heater-treater			539	\$7,500	\$7,500
Misc Fittings			540	\$2,500	\$2,500
Compressor			541		
Other Tang	442		542		
Contingency			563		

Total Tangibles		\$74,400		\$227,900	\$302,300
------------------------	--	-----------------	--	------------------	------------------

Total AFE		\$796,400		\$350,200	\$1,146,600
------------------	--	------------------	--	------------------	--------------------

Lease: UNECONOMIC WELL
 Well No: 000001
 Location: SEC 4 20S 34E
 County: LEA State: NM

DATE : 02/14/02
 TIME : 16:16:51
 DBS FILE : READOPER
 SETUP FILE : NLEA
 SEQ NUMBER : 285

R E S E R V E S A N D E C O N O M I C S

EFFECTIVE DATE: 3/02

~END- MO-YR	GROSS OIL PRODUCTION -----MMBLS-----	GROSS GAS PRODUCTION -----MMCF-----	NET OIL PRODUCTION -----MMBLS-----	NET GAS PRODUCTION -----MMCF-----	NET OIL PRICE -----\$/BBL-----	NET GAS PRICE -----\$/MCF-----	NET OIL SALES -----M\$-----	NET GAS SALES -----M\$-----	TOTAL NET SALES -----M\$-----
12-02	21.908	3.337	16.431	2.503	20.170	2.521	331.419	6.311	337.730
12-03	28.718	4.544	21.538	3.408	20.669	2.584	445.170	8.805	453.975
12-04	24.410	4.036	18.308	3.027	21.289	2.661	389.747	8.056	397.802
12-05	20.749	3.578	15.561	2.684	21.928	2.741	341.223	7.356	348.580
12-06	17.636	3.167	13.227	2.375	22.585	2.823	298.741	6.707	305.447
12-07	14.991	2.799	11.243	2.099	23.263	2.908	261.548	6.104	267.652
12-08	12.742	2.470	9.557	1.852	23.961	2.995	228.985	5.548	234.533
12-09	10.831	2.176	8.123	1.632	24.680	3.085	200.476	5.036	205.512
12-10	9.206	1.915	6.905	1.437	25.420	3.178	175.517	4.565	180.082
12-11	7.825	1.684	5.869	1.263	26.183	3.273	153.665	4.134	157.799
12-12	5.617	1.245	4.212	.934	26.905	3.363	113.335	3.142	116.477
12-13									
12-14									
12-15									
12-16									
S TOT	174.633	30.952	130.975	23.214	22.446	2.833	2939.825	65.764	3005.589
AFTER	.000	.000	.000	.000	.000	.000	.000	.000	.000
TOTAL	174.633	30.952	130.975	23.214	22.446	2.833	2939.825	65.764	3005.589

~END- MO-YR	WINDFALL PROFIT TAX -----M\$-----	NET ADVAL & PROD. TAXES -----M\$-----	DIRECT OPER EXPENSE -----M\$-----	INTEREST PAID -----M\$-----	CAPITAL REPAYMENT -----M\$-----	EQUITY INVESTMENT -----M\$-----	FUTURE NET CASHFLOW -----M\$-----	CUMULATIVE CASHFLOW -----M\$-----	10.0% CUM DISC CF -----M\$-----
12-02	.000	27.018	20.921	.000	.000	1146.600	-856.810	-856.810	-870.890
12-03	.000	36.318	35.108	.000	.000	.000	382.549	-474.261	-535.948
12-04	.000	31.824	40.147	.000	.000	.000	325.831	-148.429	-277.810
12-05	.000	27.886	45.909	.000	.000	.000	274.784	126.355	-80.827
12-06	.000	24.436	52.498	.000	.000	.000	228.513	354.868	67.399
12-07	.000	21.412	60.033	.000	.000	.000	186.207	541.075	176.690
12-08	.000	18.763	68.650	.000	.000	.000	147.121	688.196	254.824
12-09	.000	16.441	78.503	.000	.000	.000	110.568	798.764	307.957
12-10	.000	14.407	89.771	.000	.000	.000	75.905	874.669	340.963
12-11	.000	12.624	102.655	.000	.000	.000	42.519	917.188	357.692
12-12	.000	9.318	96.715	.000	.000	.000	10.443	927.631	361.441
12-13									
12-14									
12-15									
12-16									
S TOT	.000	240.447	690.911	.000	.000	1146.600	927.631	927.631	361.441
AFTER	.000	.000	.000	.000	.000	.000	.000	927.631	361.441
TOTAL	.000	240.447	690.911	.000	.000	1146.600	927.631	927.631	361.441

	OIL -----	GAS -----		P.W. % -----	P.W., M\$ -----
GROSS WELLS	1.0	.0	LIFE, YRS.	5.00	610.044
GROSS ULT., MB & MMF	174.633	30.952	DISCOUNT %	10.00	361.441
GROSS CUM., MB & MMF	.000	.000	UNDISCOUNTED PAYOUT, YRS.	15.00	164.068
GROSS RES., MB & MMF	174.633	30.952	DISCOUNTED PAYOUT, YRS.	20.00	5.210
NET RES., MB & MMF	130.975	23.214	UNDISCOUNTED NET/INVEST.	25.00	-124.332
NET REVENUE, M\$	2939.825	65.764	DISCOUNTED NET/INVEST.	30.00	-231.284
INITIAL PRICE, \$	20.000	2.500	RATE-OF-RETURN, PCT.	40.00	-396.055
INITIAL N.I., PCT.	75.000	75.000	INITIAL W.I., PCT.	60.00	-605.954
				80.00	-731.648
				100.00	-814.419

Quail KF Fed #1

-11081

OIL CONSERVATION DIVISION

CASE NUMBER

EXHIBIT

4

U. S. Smelting Fed #1

-10812

Lea Unit #4

-10680

Lea Unit #2

-10630

Lea Unit #8

-10867

Lea Unit #6

-10674

Lea Unit #1

-10611

Lea Unit #5

-10660

Lea Unit #7

-10600

Lea Unit #9

-10620

Lea Unit #10

-10601

Lea Unit #12

-10626

Whitten Fed #1

-10723

Lea Unit #3

-10609

Lea Unit #17

-10676

Lea Unit #11

-10679

Est Oil/Water Contact (-10,700')

23

24

Read & Stevens, Inc.
Lea Devonian Field
T20S R34E Lea Co., NM
Dated 2/4/2002 - By: JCM

Devonian Structure Map
contour interval = 25'

Lea Devonian Field
Sec 11, 12, 13, & 14, 20S 36E
Lea Co., NM
By: JCM 2/4/2002

Date of Discovery	July 8, 1960
Number of Producing Wells	12
Cum Oil Production (production through Oct 2001)	7,812,919 bbl
Cum Gas Production	3,847,499 Mcf
Cum Water Production	94,149,743 bbl
GOR Int/Avg (life)	321/492 cu ft/bbl
Avg Water Cut (life)	92.3 %
Drive Mechanism	Water Drive

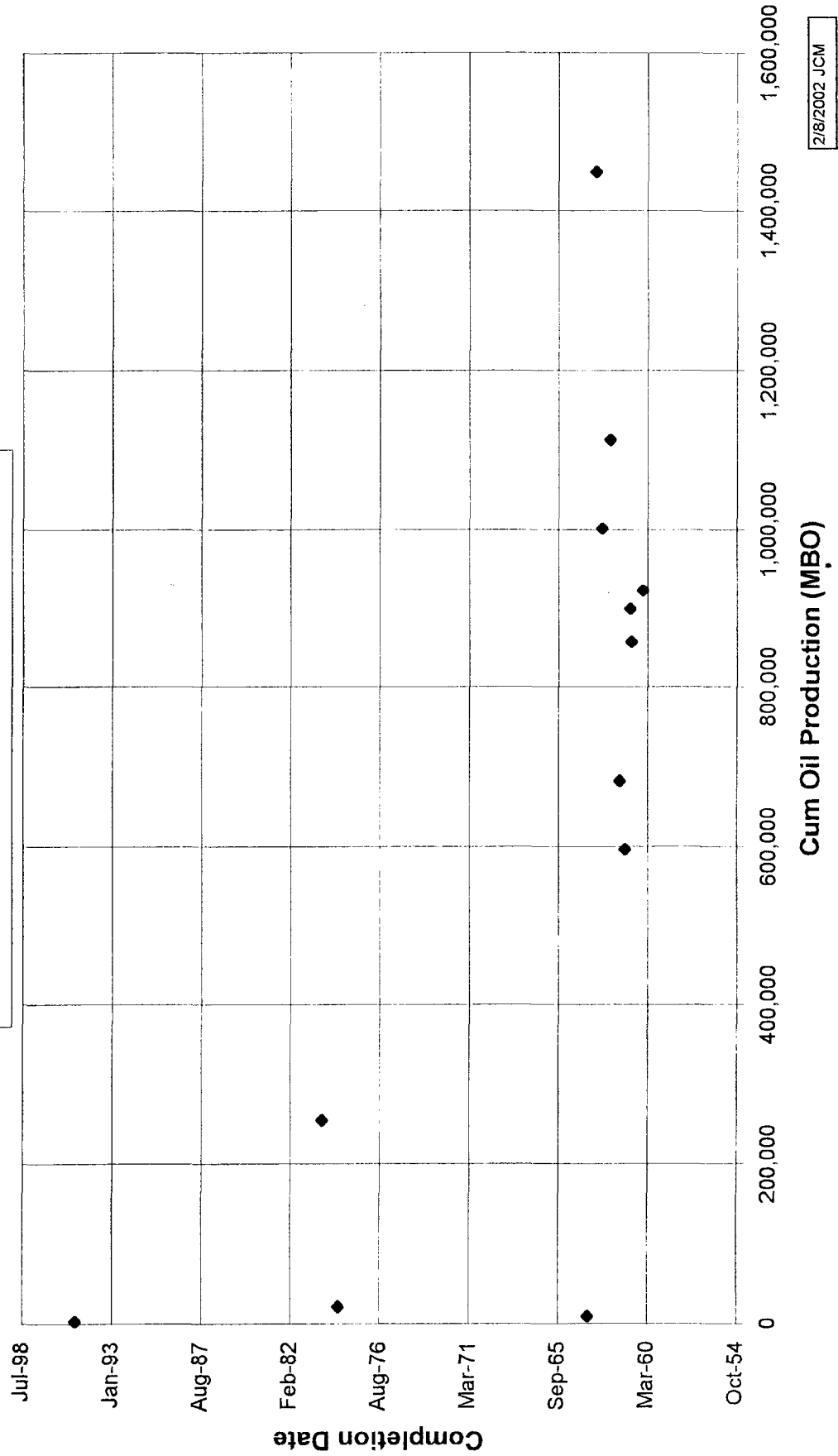
Area of Oil Column above estimated o/w contact at (-10,700)	1,350 acres
Amount of Closure above o/w contact	111 feet
Avg thickness of net pay across field	61.2 feet
Porosity (from whole core data)	5.5 %
Water Saturation (from capillary work on whole core)	43 %
Formation Volume Factor	1.185 res bbl/bbl
Soln GOR	321 cu ft/bbl
Oil Gravity @ 60°F	58.2
Bubble Point Pressure	567 psi
Permeability from Drawdown Test (Discovery Well)	9.6 md
BHP(initial)	6,046 psi
Press Gradient (midpoint of pay (14,410'))	0.420 psi/ft

Calculated Original Oil in Place	16,914,299 bbl
Calculated Original Oil in Place	204.9 bbl/acre-ft
Recovered Oil	94.6 bbl/acre-ft
Recovery Factor (cum oil/calc OOIP)	46.2 %
Regulatory Spacing	160 acres/well
Actual Spacing	112.5 acres/well

Comments: In case 2118 & 2459, results of interference testing indicated pressure communication and drainage of the Devonian pay was taking place between wells located 1,867' apart. This distance represents a circular drainage area of 251 acres. The decrease in bottom hole pressure in the reservoir after the field produced 996 MBO (12.7% of recoverable oil) in the first 28 months of life was less than 100 psi.

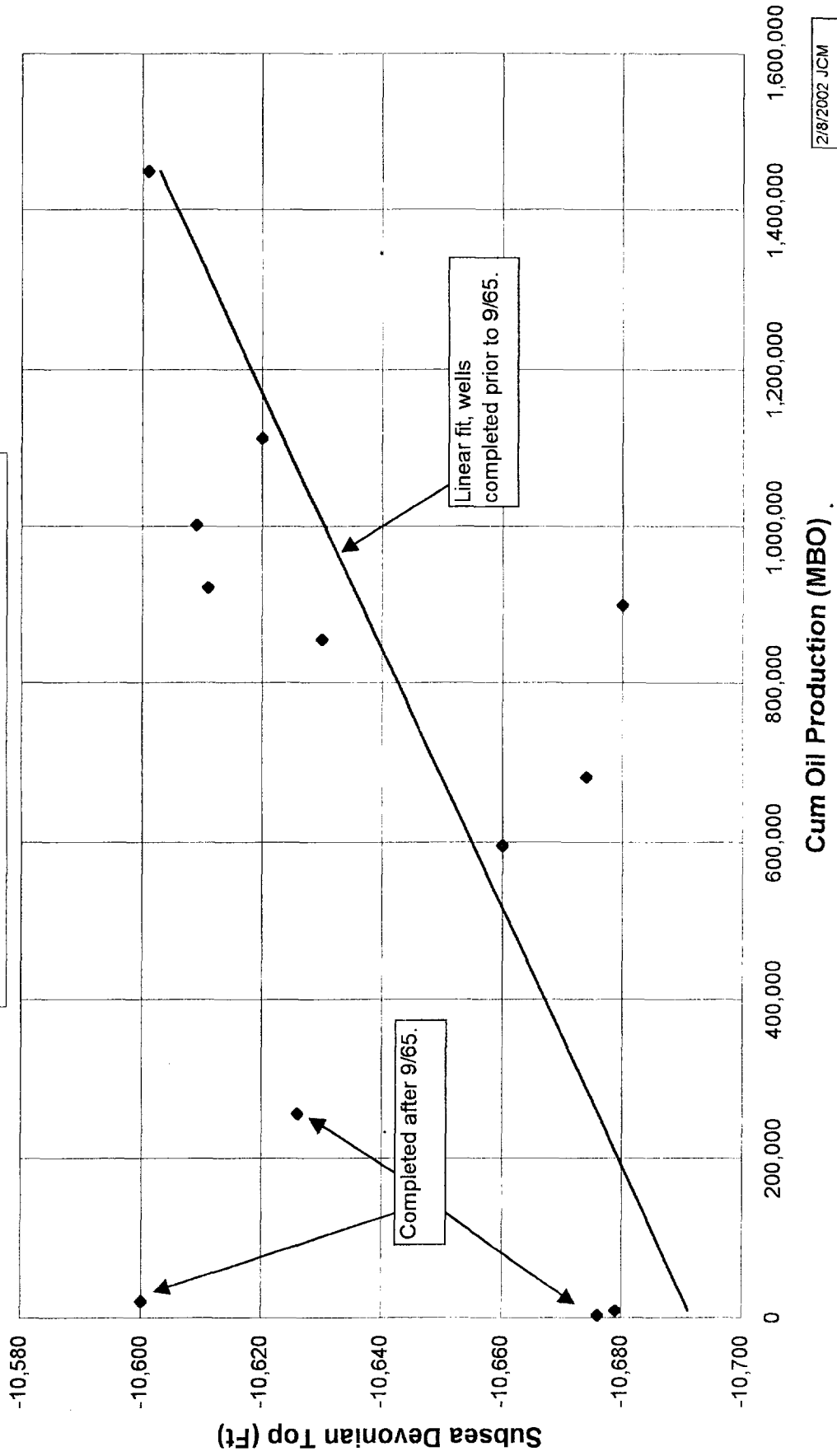
Lea Unit #1 (discovery well) DST 14,275' - 14,468' (upper 3/4 of Devonian pay). Open 2 hrs rec 2,110' gas, 2,000' OCWB, 2,700' HG + OCM, and 510' HGCM. FP 1,005 - 2,220 psi, 1 hr SIP 5,905 psi. Perf 14,347 - 375' & 14,383 - 489' (134' perms, 142' overall). Acidize w/ 4,000 gal HCl. IPF 516 BOPD, 10 BWPD, Gas NR. Choke 8/64" w/ FTP 1,570 psi.

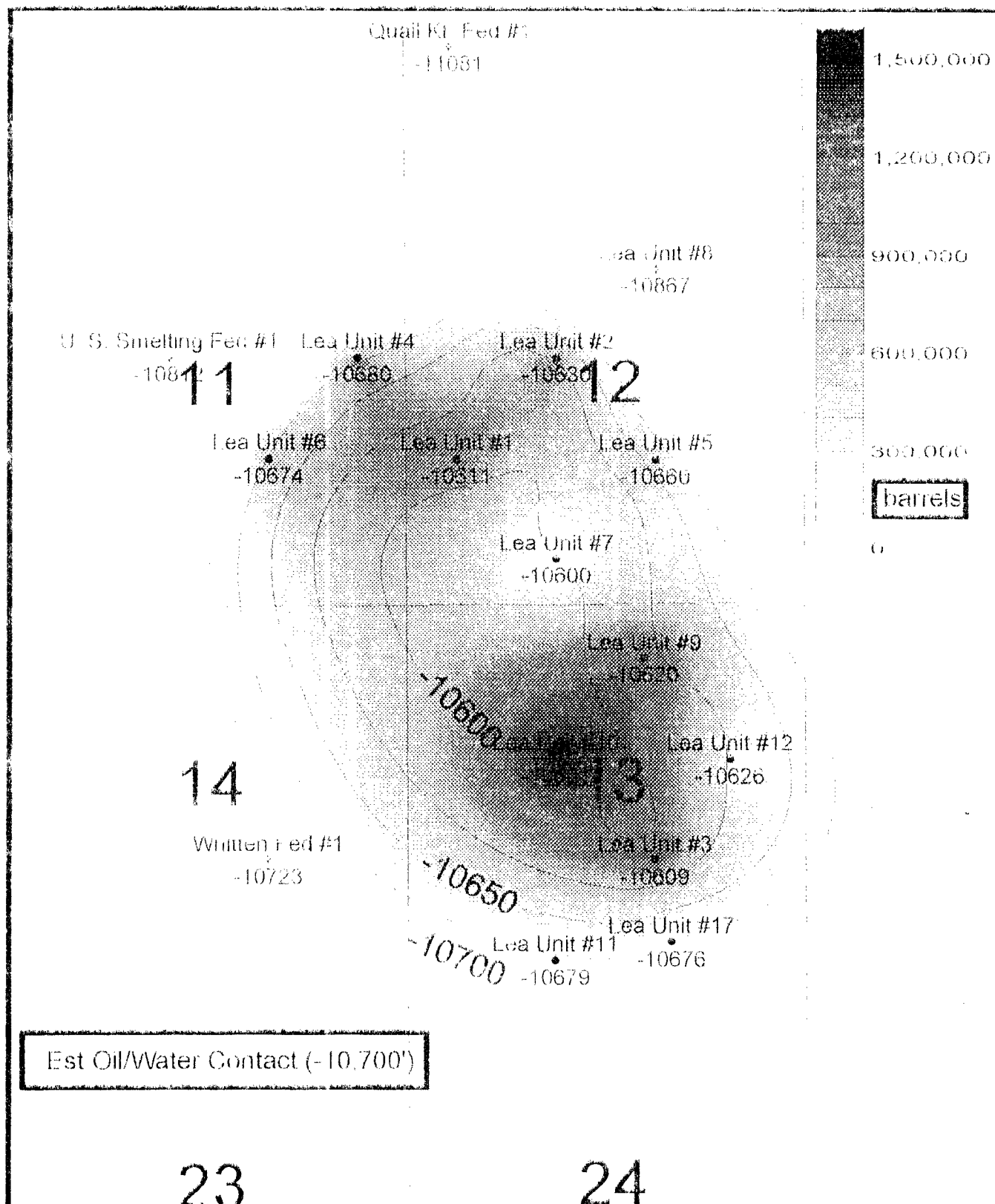
Lea Devonian Field
Well Completion Date vs Cum Oil Production
T20S R34E Lea Co., NM



2/8/2002 JCM

Lea Devonian Field
Devonian Well Tops vs Cum Oil Production
T20S R34E Lea Co., NM





Read & Stevens, Inc
Lea Devonian Field
120S R34E Lea Co., NM
Dated 2/4/2002 - By: JCM

Devonian Structural Contours (lines)
overlaying Devonian Oil Cum Contours (shades)
Structure on 25' CI.
Oil Cum scale at upper right.

Lea Devonian Field
2/4/2002 by JCM

Lease Name	Well #	Location (Twp-Rge-Sec)	Cum Oil (bbl)	Cum Gas (Mcf)	Water Cum (bbl)	Last 12 Mo Oil (bbl)	Last 12 Mo Gas (Mcf)	Last 12 Mo Water (bbl)	Comp Date (Mo-Yr)	Top of Devonian Subsea (Ft)	Individual Well % of Cum Oil	Cum % of Wells Drilled	Uneco Wells
LEA UNIT	10	20S34E13F	1,449,441	631,744	12,873,184	10,597	9,662	476,467	Jun-63	-10601	18.6%	18.6%	8.3%
LEA UNIT	9	20S34E13B	1,113,837	516,574	5,409,933	2,107	2,291	30	Jul-62	-10620	14.3%	32.8%	16.7%
LEA UNIT	3	20S34E13J	1,002,039	639,268	20,366,443	-	-	-	Jan-63	-10609	12.8%	45.6%	25.0%
LEA UNIT	1	20S34E12L	922,826	295,231	6,692,818	-	-	-	Jul-60	-10611	11.8%	57.4%	33.3%
LEA UNIT	4	20S34E11H	899,528	392,737	13,054,978	-	-	-	Apr-61	-10680	11.5%	69.0%	41.7%
LEA UNIT	2	20S34E12F	856,318	534,142	9,272,832	6,293	6,153	393,962	Mar-61	-10630	11.0%	79.9%	50.0%
LEA UNIT	6	20S34E11J	682,517	383,727	14,689,692	-	-	-	Dec-61	-10674	8.7%	88.7%	58.3%
LEA UNIT	5	20S34E12J	596,545	161,828	1,110,319	-	-	-	Aug-61	-10660	7.6%	96.3%	66.7%
LEA UNIT	12	20S34E13H	255,801	271,042	10,088,745	-	-	-	Mar-80	-10626	3.3%	99.6%	75.0%
LEA UNIT	7	20S34E12N	21,277	7,016	465,972	-	-	-	Mar-79	-10600	0.3%	99.8%	83.3%
LEA UNIT	11	20S34E13N	9,207	11,982	30,449	-	-	-	Nov-63	-10679	0.1%	100.0%	91.7%
LEA UNIT	17	20S34E13O	3,583	2,208	94,378	-	-	-	Apr-95	-10676	0.0%	100.0%	100.0%
Totals			7,812,919	3,847,499	94,149,743	18,997	18,106	870,459			100.0%		

Current Producing Rate:	52	BOPD	GOR initial	321	CF/BO
	50	MCFD	GOR current	953	CF/BO
	2,385	BWPD	Currently 3 active wells.		
	97.8%	Water Cut			

South Vacuum Field
Sec 21, 22, 26, 27, & 35, T18S 35E
Lea Co., NM
By: JCM 2/4/2002

Date of Discovery	January 26, 1958
Number of Producing Wells	17
Cum Oil Production (production through Oct 2001)	9,163,787 bbl
Cum Gas Production	384,527 Mcf
Cum Water Production	117,273,158 bbl
GOR Int/Avg (life) (int from scout ticket)	35/42 cu ft/bbl
Avg Water Cut (life)	92.8 %
Drive Mechanism	Water Drive

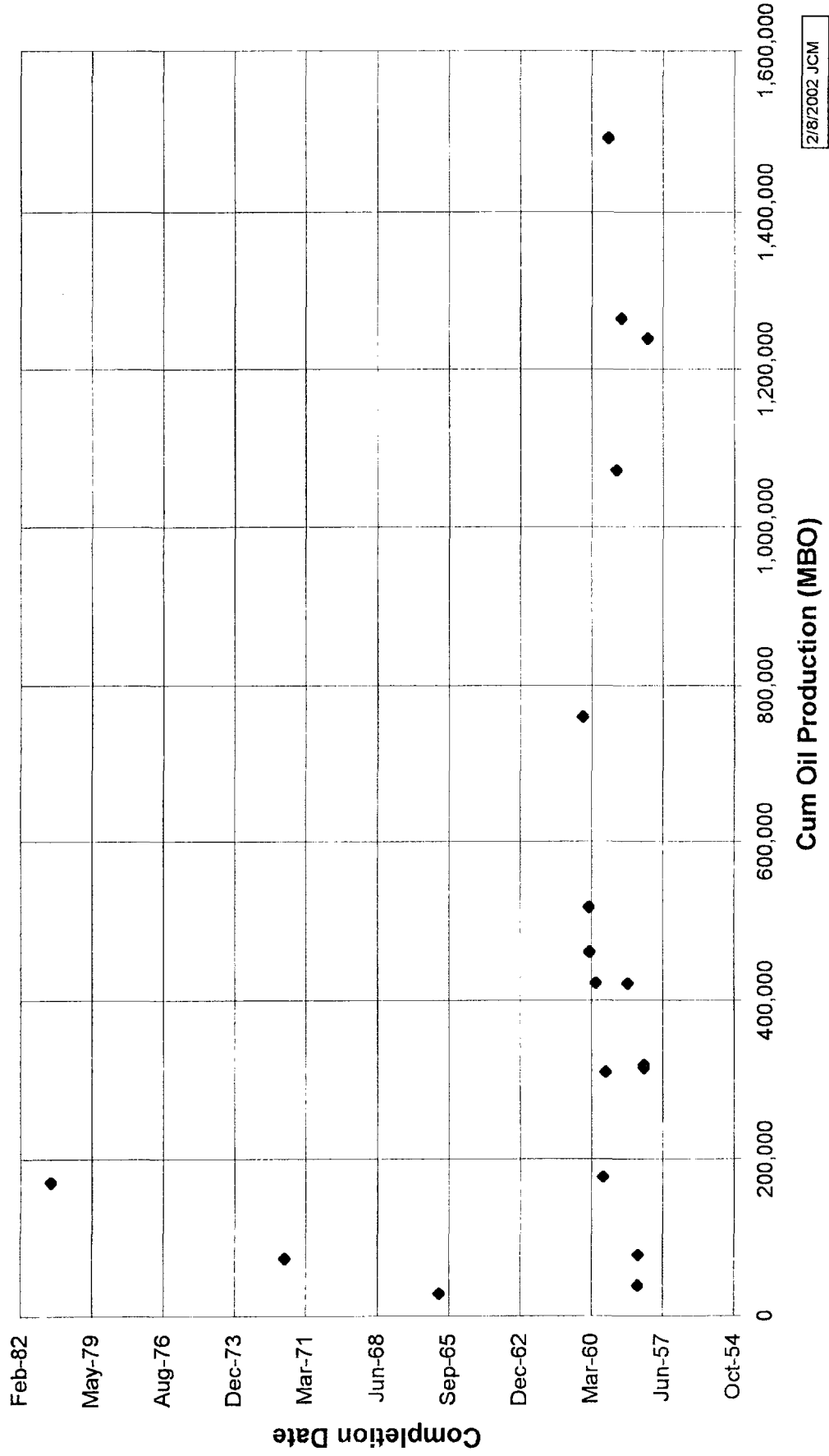
Area of Oil Column above estimated o/w contact at (-7,900)	1,251 acres
Amount of Closure above o/w contact	367 feet
Avg thickness of net pay across field (est from Lea Devonian Field)	61.2 feet
Porosity (core data, RGS symposium, Mobil Oil Co.)	5.9 %
Water Saturation (estimate from Lea field)	43.0 %
Formation Volume Factor (1.05+(Rs/100)*0.05)	1.068 res bbl/bbl
Soln GOR (est)	35 cu ft/bbl
Oil Gravity @ 60°F	49
Bubble Point Pressure	- psi
Permeability	- md
BHP(initial from DST of discovery well)	4,810 psi
Press Gradient (midpoint of closure (-7,716'))	0.414 psi/ft

Calculated Original Oil in Place	18,711,380 bbl
Calculated Original Oil in Place	244.4 bbl/acre-ft
Recovered Oil	119.7 bbl/acre-ft
Recovery Factor (cum oil/calc OOIP)	49.0 %
Regulatory Spacing	80 acres/well
Actual Spacing	73.6 acres/well

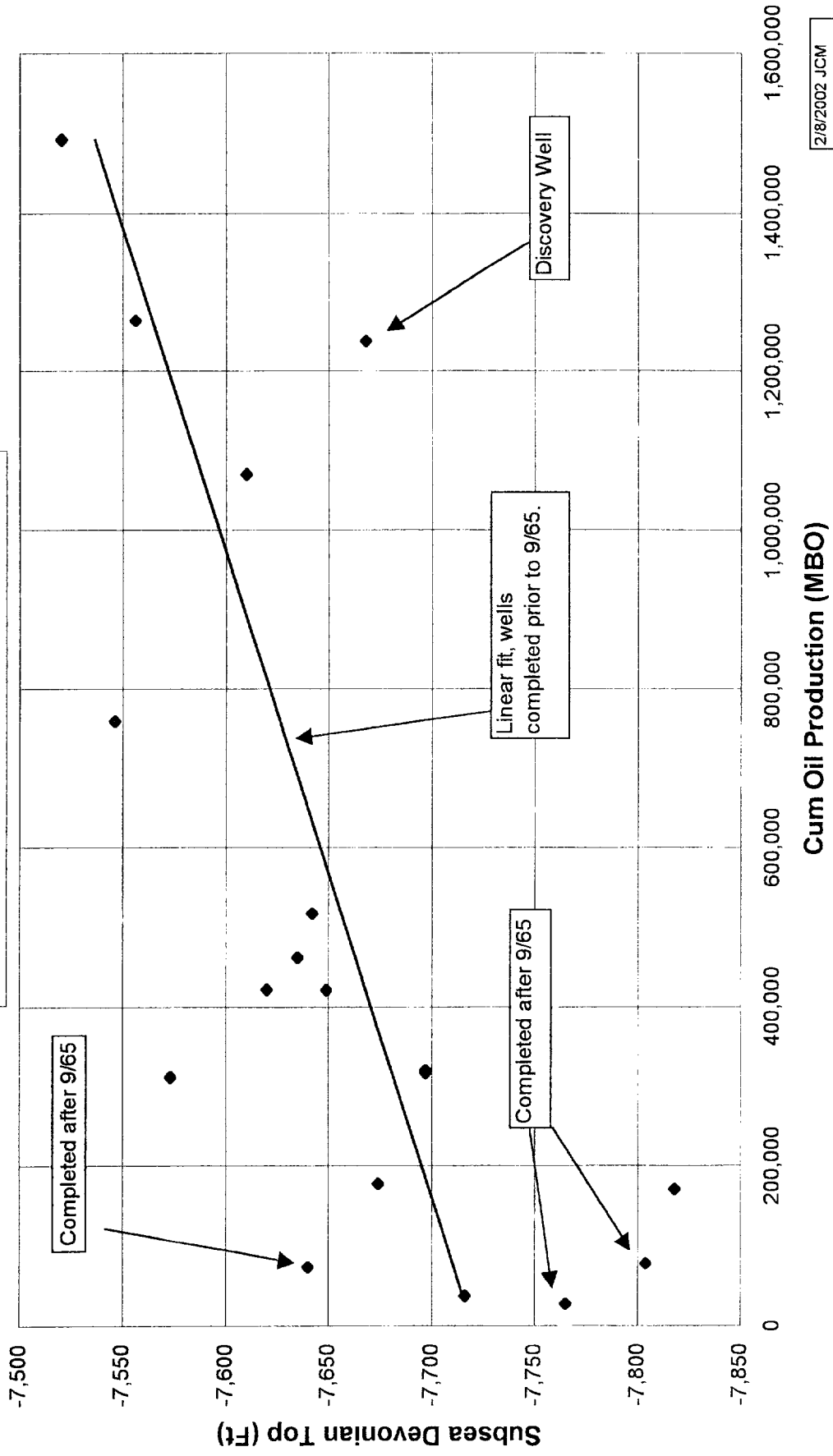
Comments: Core 11,577' - 635', rec 57.5' lime & dolo w/ good oil stain. DST 11,580' - 635', op 3 hrs, rec 2,000' WB, 1,220' sli MCO & 460' O. FP 1,540 psi, SIP 4,810 psi. Perf 11,643' - 80' (37' overall). Acidize w/ 500 gal, IPF 1,733 BOPD on 1/2" ck w/ FTP 250 psi. Oil Grav 49.

Recovery factor for hydraulically controlled reservoirs: $RF = (1 - Sw - Sor)/(1 - Sw)$.
Core data from RGS symposium, Mobil Oil Company had $Sor = 25.3\%$. Therefore,
 RF is $(1 - 0.43 - 0.253)/(1 - 0.43) = 55.6\%$. Compared to 49.0% calculated above.

South Vacuum Devonian Field
Well Completion Date vs Cum Oil Production
T18S R35E Lea Co., NM



South Vacuum Devonian Field
Devonian Well Tops vs Cum Oil Production
T18S R35E Lea Co., NM



South Vacuum Devonian Field

2/4/2002 by JCM

Lease Name	Well #	Location (Typ-Rge-Sec)	Cum Oil (bbl)	Cum Gas (Mcf)	Water Cum (bbl)	Last 12 Mo Oil (bbl)	Last 12 Mo Gas (Mcf)	Last 12 Mo Water (bbl)	Comp Date (Mo-Yr)	Top of Devonian Subsea (Ft)	Individual Well % of Cum Oil	Cum % of Wells Drilled	Uneco Wells
REEVES 26	2	18S35E26N	1,491,608	61,756	18,076,420	10,711	4,210	880,250	Jul-59	-7520	16.3%	16.3%	5.9%
SOUTH VACUUM UNIT	353	18S35E35C	1,264,729	50,851	26,442,614	4,904	-	1,011,792	Jan-59	-7556	13.8%	30.1%	11.8%
SOUTH VACUUM UNIT	351	18S35E35G	1,239,230	55,354	17,954,266	-	-	-	Jan-58	-7668	13.5%	43.6%	17.6%
SOUTH VACUUM UNIT	261	18S35E26M	1,070,442	35,802	20,692,115	-	-	-	Apr-59	-7610	11.7%	55.3%	23.5%
LEA J STATE	1	18S35E26E	760,241	17,528	13,630,207	6,834	-	639,171	Jul-60	-7546	8.3%	63.6%	29.4%
SOUTH VACUUM UNIT 35	2	18S35E35I	638,282	14,816	5,372,272	-	-	-	Mar-58	-7697	7.0%	70.5%	35.3%
LEA 403 STATE	3	18S35E22N	517,362	46,021	2,870,533	-	-	-	Apr-60	-7642	5.6%	76.2%	41.2%
REEVES A 26	4	18S35E26K	461,228	7,103	3,387,621	-	-	-	Apr-60	-7635	5.0%	81.2%	47.1%
LEA F STATE	2	18S35E22O	422,475	44,162	2,576,858	-	-	-	Jan-60	-7620	4.6%	85.8%	52.9%
STATE SEC 27	1	18S35E27B	421,381	20,584	1,748,459	-	-	-	Oct-58	-7649	4.6%	90.4%	58.8%
STATE SEC 27	2	18S35E27H	311,568	13,437	1,330,029	-	-	-	Sep-59	-7573	3.4%	93.8%	64.7%
SOUTH VACUUM UNIT	1	18S35E27I	177,512	-	-	-	-	-	Oct-59	-7674	1.9%	95.8%	70.6%
HONEYSUCKLE	1	18S35E21B	170,790	35	324,452	10	-	-	Dec-80	-7818	1.9%	97.6%	76.5%
LEA 405 STATE	1	18S35E27C	77,792	-	-	-	-	-	Jun-58	-7804	0.8%	98.5%	82.4%
STATE 26	2	18S35E26L	73,036	-	2,841,965	-	-	-	Jan-72	-7640	0.8%	99.3%	88.2%
LEA 401 STATE	2	18S35E21A	37,956	-	-	-	-	-	Jun-58	-7716	0.4%	99.7%	94.1%
LEA 403 STATE	8	18S35E22K	28,155	2,262	25,977	-	-	-	Jan-66	-7765	0.3%	100.0%	100.0%
Totals			9,163,787	369,711	117,273,788	22,459	4,210	2,531,213			100.0%		

Current Producing Rate:	62	BOPD	GOR initial	35	CF/BO
	12	MCFD	GOR current	187	CF/BO
	6,935	BWPD	Currently 4 active wells.		
	99.1%	Water Cut			

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

CONTINUED AND DISMISSED CASES

REPORTER'S TRANSCRIPT OF PROCEEDINGS

RECEIVED

MAY 8 2003

Oil Conservation Division

BEFORE: WILLIAM V. JONES, JR., Hearing Examiner

May 8th, 2003

Santa Fe, New Mexico

These matters came on for hearing before the New Mexico Oil Conservation Division, WILLIAM V. JONES, JR., Hearing Examiner, on Thursday, May 8th, 2003, at the New Mexico Energy, Minerals and Natural Resources Department, 1220 South Saint Francis Drive, Room 102, Santa Fe, New Mexico, Steven T. Brenner, Certified Court Reporter No. 7 for the State of New Mexico.

* * *

STEVEN T. BRENNER, CCR
(505) 989-9317

I N D E X

May 8th, 2003
Continued and Dismissed Cases

PAGE

REPORTER'S CERTIFICATE

5

* * *

1 WHEREUPON, the following proceedings were had at
2 8:16 a.m.:
3
4

5 EXAMINER JONES: Let's call Hearing Docket Number
6 13-03, May 8th, 2003, Examiner Hearing, to order this
7 morning and call the continuances and the dismissals.

8 Case 13,064 is continued to May 22nd.

9 Case 13,060 is dismissed.

10 Case 13,038 continued to June 19th.

11 Case 12,815 continued to June 5th.

12 Case 13,050 continued to June 5th.

13 Case 12,919 continued to June 5th.

14 Case 13,065 continued to July the 10th.

15 Case 13,066 continued to May 22nd.

16 Case 13,061 continued to May 22nd.

17 I think we're ready for our first case.

18 MR. CARR: With that, may I be excused?

19 EXAMINER BROOKS: I thought you had a statement
20 you wanted to make, so...

21 MR. CARR: Since you went and continued them, I
22 didn't get a written motion in on the Rice Operating case,
23 and I just wanted to be sure it's going to be continued.

24 EXAMINER BROOKS: Okay.

25 MR. CARR: I had hoped to oppose Mr. Owen, but

1 I'm not going to.

2 (Thereupon, these proceedings were concluded at
3 8:17 a.m.)

4 * * *

18 I do hereby certify that the foregoing
19 is a true and correct copy of the
20 record of the hearing held on the
21 5/18/2003

21 *Will Jones*
22 Oil Conservation Division

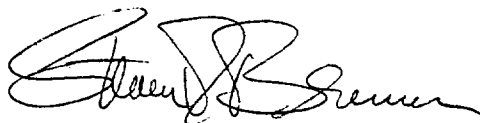
CERTIFICATE OF REPORTER

STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

I, Steven T. Brenner, Certified Court Reporter and Notary Public, HEREBY CERTIFY that the foregoing transcript of proceedings before the Oil Conservation Division was reported by me; that I transcribed my notes; and that the foregoing is a true and accurate record of the proceedings.

I FURTHER CERTIFY that I am not a relative or employee of any of the parties or attorneys involved in this matter and that I have no personal interest in the final disposition of this matter.

WITNESS MY HAND AND SEAL May 8th, 2003.



STEVEN T. BRENNER.
CCR No. 7

My commission expires: October 16th, 2006