1R - 426 - 40

GENERAL CORRESPONDENCE

YEAR(S): 2006 -2003

RICE Operating Company

PM 12 23

R 20

122 West Taylor • Hobbs, New Mexico 88240 Phone: (505)393-9174 • Fax: (505) 397-1471

CERTIFIED MAIL RETURN SECIEPT NO. 7005 1820 0001 6804 7715

AP-57- Prèse New précord

April 17, 2006

Mr. Wayne Price New Mexico Energy, Minerals, & Natural Resources Oil Conservation Division, Environmental Bureau 1220 S. St. Francis Drive Santa Fe, New Mexico 87504

> RE: BD jct. J-26 PUBLIC NOTIFICATION NMOCD CASE #1R0426-40

Mr. Price:

In accordance with Rule 19 (Section 19.15.1.19 NMAC, Subsection G) Public Notice requirements, please accept the enclosed copies of proof that the appropriate individuals and entities were notified of the Stage 1 Abatement Plan submitted by the consulting firm of R.T. Hicks Consultants of Albuquerque for the J-26 Junction Box Site.

Notices were sent via certified mail to landowners within the prescribed radius. Mailings were also sent to the Lea County Commission and the list of Interested Parties found on the New Mexico Oil Conservation Division (OCD) website. Two mail deliveries could not be confirmed so the document was sent via electronic mail (e-mail). Eighty-five total notifications were sent and eleven were not able to be delivered; some were attempted two or more times.

As directed by OCD, the Stage 1 Abatement Plan notifications were published in the *Albuquerque Journal* and the *Hobbs News-Sun* newspapers. Affidavits for these publications are enclosed.

ROC requests that OCD consider public notice complete for this site. Should you have any further questions regarding this request, do not hesitate to contact me. Thank you for your consideration.

ROC is the service provider (operator) for the Blinebry-Drinkard (BD) SWD System and has no ownership of any portion of the pipeline, well, or facility. The System is owned by a consortium of oil producers, System Partners, who provide all operating capital on a percentage ownership/usage basis.

RICE OPERATING COMPANY

Knistin Famis Pope

Kristin Farris Pope Project Scientist

enclosures:

summary table of notifications, newspaper affidavits, return receipt copies, e-mail copies

cc: CDH, Hicks Consultants, file, Daniel Sanchez (OCD),

Mr. Chris Williams OCD, District I Office 1625 N. French Drive Hobbs, NM 88240

AFFIDAVIT OF PUBLICATION

State of New Mexico, County of Lea.

I, Daniel Russell

Editor

of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not a supplement thereof for a period

of _

1 __issue(s).__

Beginning with the issue dated5

January 14 , 2006 and ending with the issue dated

Januarv 14 2006

Editor Sworn and subscribed to before

17th day of

January, 2006 Notary Public.

My Commission expires February 07, 2009 (Seal)



OFFICIAL SEAL DORA MONTZ NOTARY PUBLIC STATE OF NEW MEXICO My Commission Expires: _____

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937, and payment of fees for said publication has been made. 01104367000 67535573 RICE OPERATING COMPANY 122 WEST TAYLOR HOBBS NM 88240

LEGAL NOTICE January 14, 2006

NOTICE OF PUBLICATION

State of New Mexico Energy, Minerals and Natural Resources Department Oll Conservation Division

Notice is hereby given that pursuant to New Mexico Oil Conservation Division Regulations, the following Stage 1 and 2 Abatement Plan has been submitted to the Director of the Oil Conservation Division, 1220 S. St. Francis Dr., Santa Fe, New Mexico 87504, Telephone (505) 476-3440:

Rice Operating Company, Carolyn Doran Haynes, Engineering Manager, Telephone (505) 393-9174, 122 West Taylor, Hobbs, New Mexico 88240, has submitted a Stage 1 and 2 Abatement Plan for the J-26 Junction Box site, Blinebry Drinkard Salt Water Disposal System located 1 mile north-northwest of the intersection of NM State Highway 18 and County Highway 176 near Eunice, NM in the NWE 1/4, SE 1/4 of Section 26, Township 21 South, Range 37 East, Lea County, New Mexico. Rice Operating Company operates a saltwater disposal system at the site. Chlorides and total dissolved solids have been observed in the ground water and remedial efforts have been ongoing since discovery. The Stage 1 and 2 Abatement Plan addresses further proposed actions for site closure.

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The Stage 1 and 2 Abatement Plan may be viewed at the above address or at the Oil Conservation Division District Office, 1625 N. French Drive, Hobbs, New Mexico 88240, Telephone (505) 393-6161 between 8:00 a.m. and 4:00 p.m., Monday through Friday. Prior to ruling on any proposed Abatement Plan, the Director of the Oil Conservation Division shall allow at least thirty (30) days after the date of publication of this notice during which written comments may be submitted to him. #22070

STATE OF NEW MEXICO County of Bernalillo SS

Bill Tafoya, being duly sworn, declares and says that he is Classified Advertising Manager of The Albuquerque Journal, and that this newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Session Laws of 1937, and that payment therefore has been made of assessed as court cost; that the notice, copy of which is hereto attached, was published in said paper in the regular daily edition, for first publication being times. the on the H day of \mathcal{M} 20 Grand the subsequent consecutive publications on C 20 Sworn and subscribed to before me, a Notary Public, in and for the County of Bernalillo and State of New Mexico this lav of 2Mof 200

75 PRICE

Statement to come at end of month.

ACCOUNT NUMBER <u>C822</u>

ST My Commission

CLA-22-A (R-1/93)

NOTICE OF PUBLICATION

State of New Mexico Energy, Minerals and Natural Resources Department Oil Conservation Division

Notice is hereby given that pursuant to New Mexico Oil Conservation Division Regulations, the foilowing Stage 1 and 2 Abatement Plan has been submitted to the Director of the Oil Conservation Division, 1220 S. St. Francis Dr., Santa Fe, New Mexico 87504, Telephone (505) 476-3440:

elephone (505) 476-3440: Rice Operating Company, Carolyn Doran Haynes, Englineering Manager, Telephone (505) 33-9174, 122 West Taylor, Hobbs, New Mexico 88240, has submitted a Stage 1 and 2 Abatement Plan for the J-26 Junction Box sile, Blinebry Drinkard Salt Water Disposal System, located 1 mile northnorthwest of the intersection of NM State Highway 18 and County Highway 176 near Eunice, NM in the NWE ¼, SE ¼ of Section 26, Township 21 South, Range 37 East, Lea County, New Mexico. Rice Operating Company operates a saltwater disposal system at the site. Chlorides and total dissolved solids have been observed in the ground water and remedial efforts have been ongoing since discovery. The Stage 1 and 2 Abatement Plan addresses turther proposed actions for site closure.

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The Stage 1 and 2 Abatement Plan may be viewed at the above address or at the Oil Conservation Division District Office, 1625 N. French Drive, Hobbs, New Mexico 88240, Telephone (505) 393-6161 between 8:00 a.m. and 4:00 p.m., Monday through Friday. Prior to ruling on any proposed Abatement Plan, the Director of the Oil Conservation Division shall allow at least thirty (30) days after the date of publication of this notice during which written comments may be submitted to him. Journal: January 14, 2006

<u>BD jct. J-26</u>

ā

×

Unit 'F, Sec. 26, T21S, R37E

Public Notice Mailings (1/10/2005) Stage 1 and 2 Abatement Plan

		D	elivery Sta	tus	
	Landowner or Interested Party	Delivered US Mail	Delivered E-mail	Not Delivered	Comments
1	City of Eunice P.O. Box 147 Eunice, NM 88260	x			Return Receipt Received
2	Delrose Scott 2000 N. Fowler Hobbs, NM 88220		х		Unclaimed Mail; e-mailed 4/5/2006
3	Geraldine Osborne P.O. Box 1285 Jal, NM 88252			x	Return receipt was not received
4	Patricia House P.O. Box 3715 Midland, TX 79702	x			Return Receipt Received
5	Richard Don and Cathy Jones P.O. Box 21 Eunice, NM 88231	x			Return Receipt Received
6	William O. Stephens P.O. Box 115 Eunice, NM 88231	x			Return Receipt Received
7	Lea County Administration Office Attn: Lue Ethridge 100 N. Main Street, Suite 4 Lovington, NM 88260	x			Return Receipt Received
8	Texas - New Mexico Railroad P.O. Box 409783 Atlanta, GA 30384 - 9782	x			Return Receipt Received
9	Jonhston Construction Inc P.O. Drawer 1769 Eunice, NM 88231	X			Return Receipt Received
10	Gilbert's Leasing Service Inc. P.O. Box 1597 Lovington, NM 88260	x			Return Receipt Received
11	Fall Properties Inc. P. O. Drawer T Elephant Butte, NM 87935	x			Return Receipt Received
12	Richard F. Anderson 2900 Vista Del Rey #20C Albuquerque, NM 87112			x	Undeliverable mail, not able to forward; re-sent 3/1/06, Unclaimed
13	Kenneth V. Blackwell P.O. Box 53180 Lubbock, TX 79453	x			Return Receipt Received

14	B. W. Caperton P.O. Box 391 Eunice, NM 88231	x		Return Receipt Received
15	Maria Collins Johnny Collins 300 Rincor De Ramos Rio Rancho, NM 87124	x		Return Receipt Received
16	New Mexico State Hwy. & Trans. Dept. P. O. Box 1149 Santa Fe, NM 87504	x		Return Receipt Received
17	Calico Properties LLC 500 Zia Drive Hobbs, NM 88240	X		Return Receipt Received
18	Mark Owen Estate William Owen P.O. Box 115 Eunice, NM 88231	x		Return Receipt Received
19	Wayne Aderson P.O. Box 1491 Eunice, NM 88231	X		Return Receipt Received
20	Runco Inc. 8100 W. Alabama Hobbs, NM 88240	X		Return Receipt Received
21	Joe Alden Bayes P.O. Box 173 Eunice, NM 88231	X		Return Receipt Received
22	Mary E. Brewer ET AL P.O. Box 821 Eunice, NM 88231	x		Return Receipt Received
23	Joe Allen Caperton P.O. Box 1028 Eunice, NM 88231	X		Return Receipt Received
24	Royce Crowell P.O. Box 146 Eunice, NM 88231	X		Return Receipt Received
25	James E. Gardner P. O. Box 1244 Eunice, NM 88231	X		Return Receipt Received
26	Glen A. Teaque P.O. Box 533 Eunice, NM 88231	x		Return Receipt Received
27	Eddie J. Harpier P.O. Box 124 Eunice, NM 88231	x		Return Receipt Received
28	Patricia House ET AL P.O. Box 3715 Midland, TX 79702	X		Return Receipt Received
29	Richard Don Jones P.O. Box 21 Eunice, NM 88231	x		Return Receipt Received
30	Elmer K. Logan P.O. Box 21 Eunice, NM 88231		x	Undeliverable mail, not able to forward

ĩ

31	Patrick McCasland Linda L. McCasland P.O. Box 218 Eunice, NM 88231	x		Return Receipt Received
32	G. Nicely ET UX Linda Linda Nicely P.O. Box 567 Eunice, NM 88231		x	Unclaimed mail
33	Eva Owens Heirs Of Stephens FM ATT P.O. Box 115 Eunice, NM 88231	X		Return Receipt Received
34	Bart D. Parker P.O. Box 846 Eunice, NM 88231	X		Return Receipt Received
35	Jose G. Gonzalez P.O. Box 462 Eunice, NM 88231		x	Undeliverable mail, not able to forward
36	Jose Hernandez P.O. Box 413 Eunice, NM 88231	x		Return Receipt Received
37	Phifer Hollis P.O. Box 38 Eunice, NM 88231	x		Return Receipt Received
38	H. J. Jenkins P.O. Box 97 Eunice, NM 88231		X	Undeliverable mail, not able to forward
39	Tom Kennan P.O. Box 202 Eunice, NM 88231	x		Return Receipt Received
40	Jimmy D. Martin P.O. Box 416 Eunice, NM 88231	x		Re-sent 3/1/06 Return Receipt Received
41	Eva Owens William Owen Stephens P.O. Box 115 Eunice, NM 88231	X		Return Receipt Received
42	Kathleen Parker P.O. Box 1291 Eunice, NM 88231	x		Return Receipt Received
43	Duayne Parker Eoyce Crowell P.O. Box 1334 Eunice, NM 88231	X		Return Receipt Received
44	Bobby L. Pearce Trust P.O. Box 316 Eunice. NM 88231	X		Return Receipt Received
45	W. H. Robbins P.O. Box 1643 Eunice, NM 88231	x		Return Receipt Received

ŝ

.

Joel W. Sisk P.O. Box 1013 Eunice, NM 88231	x			Return Receipt Received
Robert Soukup P.O. Box 1094 Eunice, NM 88231			X	Undeliverable mail, not able to forward
Carol Thorton P.O. Box 3 Tex - NM Camp Eunice, NM 88231	x			Return Receipt Received
Mitchell R. Tyree P.O. Box 665 Eunice, NM 88231	x			Return Receipt Received
Ruth L. Willard P.O. Box 589 Eunice, NM 88231	x			Return Receipt Received
Tommie Williams P.O. Box 1355 Eunice, NM 88231	x			Return Receipt Received
Traci Reams 2000 N. Fowler Hobbs, NM 88240			X	Unclaimed mail
Richard Robinson P.O. Box 1334 Eunice, NM 88231	x			Return Receipt Received
E. A. Smith P.O. Box 1778 Eunice, NM 88231			Х	Undeliverable mail, not able to forward; re-sent 3/1/06, not deliverable as addressed/insufficient address
John B. Stewart P.O. Box 657 Eunice, NM 88231			Х	Undeliverable mail, not able to forward
Eva Toussaint 1761 Colavita Reno, NV 89521	x			Return Receipt Received
Jimmie Weir P.O. Box 184 Center Point, TX 78010	x			Return Receipt Received
Attorney General's Office P.O. Box 1508 Santa Fe, NM 87504	x			Return Receipt Received
	P.O. Box 1013 Eunice, NM 88231 Robert Soukup P.O. Box 1094 Eunice, NM 88231 Carol Thorton P.O. Box 3 Tex - NM Camp Eunice, NM 88231 Mitchell R. Tyree P.O. Box 665 Eunice, NM 88231 Ruth L. Willard P.O. Box 589 Eunice, NM 88231 Tommie Williams P.O. Box 1355 Eunice, NM 88231 Traci Reams 2000 N. Fowler Hobbs, NM 88240 Richard Robinson P.O. Box 1334 Eunice, NM 88231 E. A. Smith P.O. Box 1778 Eunice, NM 88231 E. A. Smith P.O. Box 1778 Eunice, NM 88231 John B. Stewart P.O. Box 657 Eunice, NM 88231 John B. Stewart P.O. Box 587 Eunice, NM 88231 John B. Stewart P.O. Box 587 Eunice, NM 88231 John B. Stewart P.O. Box 57 Eunice, NM 88231 John B. Stewart P.O. Box 57 Eunice, NM 88231 Jimmie Weir P.O. Box 184 Center Point, TX 78010 Attorney General's Office P.O. Box 1508	P.O. Box 1013 Eunice, NM 88231XRobert Soukup P.O. Box 1094 Eunice, NM 88231XCarol Thorton P.O. Box 3 Tex - NM Camp Eunice, NM 88231XMitchell R. Tyree P.O. Box 665 Eunice, NM 88231XRuth L. Willard P.O. Box 589 Eunice, NM 88231XTommie Williams P.O. Box 1355 Eunice, NM 88231XTraci Reams 2000 N. Fowler Hobbs, NM 88240XRichard Robinson P.O. Box 1334 Eunice, NM 88231XEinice, NM 88231XTraci Reams 2000 N. Fowler Hobbs, NM 88240XRichard Robinson P.O. Box 1334 Eunice, NM 88231XE. A. Smith P.O. Box 1778 Eunice, NM 88231XEva Toussaint 1761 Colavita Reno, NV 89521XJimmie Weir P.O. Box 1584 Center Point, TX 78010XAttorney General's Office P.O. Box 1508X	P.O. Box 1013 Eunice, NM 88231XRobert Soukup P.O. Box 1094 Eunice, NM 88231	P.O. Box 1013 Ennice, NM 88231XXRobert Soukup P.O. Box 1094 Eunice, NM 88231XXCarol Thorton P.O. Box 3 Tex - NM Camp Eunice, NM 88231XXMitchell R. Tyree P.O. Box 665 Eunice, NM 88231XXRuth L. Willard P.O. Box 355 Eunice, NM 88231XXTommie Williams P.O. Box 1355 Eunice, NM 88231XXTraci Reams 2000 N. Fowler Hobbs, NM 88240XXRichard Robinson P.O. Box 1334 Eunice, NM 88231XXE. A. Smith P.O. Box 657 Eunice, NM 88231XXE. A. Smith P.O. Box 657 Eunice, NM 88231XXJohn B. Stewart P.O. Box 657 Eunice, NM 88231XXImmie Weir P.O. Box 1778 Eunice, NM 88231XXJohn B. Stewart P.O. Box 1778 Eunice, NM 88231XXLingen M. S8231XXJohn B. Stewart P.O. Box 1778 Eunice, NM 88231XXLingen M. S8231XXJohn B. Stewart P.O. Box 1778 Eunice, NM 88231XXLingen M. S8231XXLingen M. S8231XXLingen M. S8231XXLingen M. S8231XXJohn B. Stewart P.O. Box 184 Center Point, TX 78010XAttorney General's Office P.O. Box 184 Center Point, TX 78010X

L

	1			
59	Bruce S. Garber Attorney at Law P.O. Box 0850 Santa Fe, NM 87504-0850 Email: bsg@garbhall.com	x		Return Receipt Received
60	State Director Bureau of Land Management P.O. Box 27115 Santa Fe, NM 87502-0115	x		Return Receipt Received
61	Chief Groundwater Bureau Runnels Building Santa Fe, NM 87504 Email: Bill.Olsen@state.nm.us	x		Return Receipt Received
62	Chief Hazardous Waste Bureau Runnels Building Santa Fe, NM 87504 E-Mail: James.Bearzi@state.nm.us	x		Return Receipt Received
63	Gerald R. Zimmerman Colorado River Board of Calif. 770 Fairmont Ave. Ste 100 Glendale, CA 91203-1035 E-mail: jcc_crb@pacbell.net	x		Return Receipt Received
64	Jack A Barnett Colorado River Basin Ctrl. Forum 106 West 500 South Suite 101 Bountiful, UT 84010 Email: James.Bearzi@state.nm.us	x		Return Receipt Received
65	Department of Game & Fish Director Villagra Building Santa Fe, NM 87503	x		Return Receipt Received
66	Dr. Harry Bishara P.O. Box 748 Cuba, NM 78013	x		Return Receipt Received
67	Colin Adams Environmental Counsel Public Service Company of new Mexico 414 Silver, Southwest Albuquerque, NM 87158 Email: cadams@pnm.com	x		Return Receipt Received
68	Mike Schulz International Technology Corp. 5301 Central Avenue, N.E. Suite 700 Albuquerque, NM 87108 E-mail: mschulz@theitgroup.com		х	Undeliverable mail, not able to forward
69	Jay Lazarus P.O. Box 5727 Santa Fe, NM 87502 E-mail: Lazarus@glorietageo.com	x		Return Receipt Received

í.

5

.

			
70	Ken Marsh CRI PO BOX 388 Hobbs NM 88240 E-mail: ken@crihobbs.com	X	Return Receipt Received
71	Lee Wilson & Associates P.O. Box 931 Santa Fe, N.M. 87501 E-mail: lwa@lwasf.com	x	Return Receipt Received
72	Ned Kendrick Attorney at Law 325 Paseo de Peralta Santa Fe, NM 87501 E-mail: ekendrick@montand.com	x	Return Receipt Received
73	Secretary New Mexico Environment Department P.O. Box 26110 Santa Fe, NM 87504 E-mail: Cathy.Tyson@state.nm.us	x	Return Receipt Received
74	Lynn Brandvold NM Bureau of Mines & Mineral Resources NM Institute of Mining & Tech. Socorro, NM 87801	x	Return Receipt Received
75	NM Oil & Gas Association P.O. Box 1864 Santa Fe, NM 87504-1864	x	Return Receipt Received
76	Randy Hicks E-mail: r@rthicksconsult.com	x	Return Receipt Received
77	Soil and Water Conservation Bureau New Mexico Department of Agriculture Programs and Resources Division Box 30005/APR Las Cruces, NM 88003-8005	x	Return Receipt Received
78	Chris Shuey Southwest Research & Information Center P.O. Box 4524 Albuquerque, NM 87106 E-mail: sricdon@earthlink.net	x	Return Receipt Received
79	Ron Dutton Southwestern Public Service P.O. Box 1261 Amarillo, Texas 79170 E-mail: ron.dutton@xcelenergy.com	x	Return Receipt Received
80	Elmo Baca State Historic Preservation Officer 228 East palace Avenue Villa Rivera Room 101 Santa Fe, NM 87503 Wishes to be notified via regular mail	x	Return Receipt Received
81	Director State Parks & Recreation 1220 S. St. Francis Santa Fe, NM 87505	x	Return Receipt Received

2

	TOTALS	72	2	11	
85	William Turner New Mexico Trustee for Natural Resources C/O American Ground Water Consultants 610 Gold St. SW, Suite 111 Albuquerque, NM 87102	X			Return Receipt Received
84	State Engineer Water Resources Division Bataan Building Santa Fe, NM 87503	X			Return Receipt Received
83	Regional Forester USFS Regional Office 517 Gold Avenue SW Albuquerque, NM 87102 E-mail: cgarcia@fs.fed.us		X		Undeliverable mail, not able to forward; e-mailed 4/10/2006
82	Field Supervisor US Fish & Wildlife Service 2105 Osuna Road, Northeast Albuquerque, NM 87113-1001	X			Return Receipt Received

, ·

-i

Kristin Pope

From:	"Kristin Pope" <kpope@riceswd.com></kpope@riceswd.com>
To:	<gscott4444@aol.com></gscott4444@aol.com>
Cc:	"Ron Anderson" <randerson@riceswd.com></randerson@riceswd.com>
Sent:	Wednesday, April 05, 2006 2:03 PM
Attach:	J26_Public_Notice.doc
Subject:	J-26 Public Notice

Mrs. Scott:

In accordance with the NMOCD Rule 19 Public Notice requirements, please find the attached public notification document. This document was originally mailed to you on January 10, 2006 but a the two attempted mailing were left unclaimed. Please contact ROC or NMOCD with any comments. Thank you.

Kristin Farris Pope Project Scientist RICE Operating Company Hobbs, New Mexico (505) 393-9174

Kristin Pope

From:	"Kristin Pope" <kpope@riceswd.com></kpope@riceswd.com>
To:	<cgarcia@fs.fed.us></cgarcia@fs.fed.us>
Sent:	Monday, April 10, 2006 2:44 PM
Attach:	J26 Public Notice.doc
Subject:	Rule 19 Public Notice (J-26)

Regional Forester:

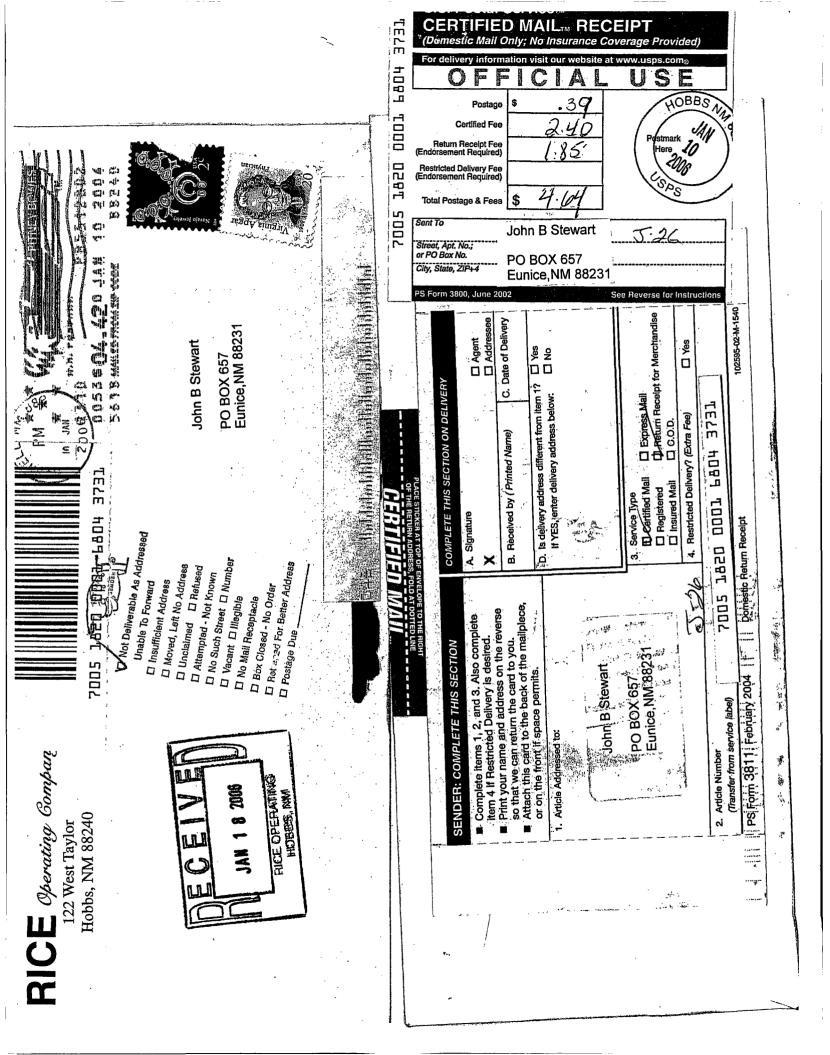
In accordance with the NMOCD Rule 19 Public Notice requirements, please find the attached public notification document. This document was originally mailed to you on January 10, 2006 but a return receipt was not received. Thank you.

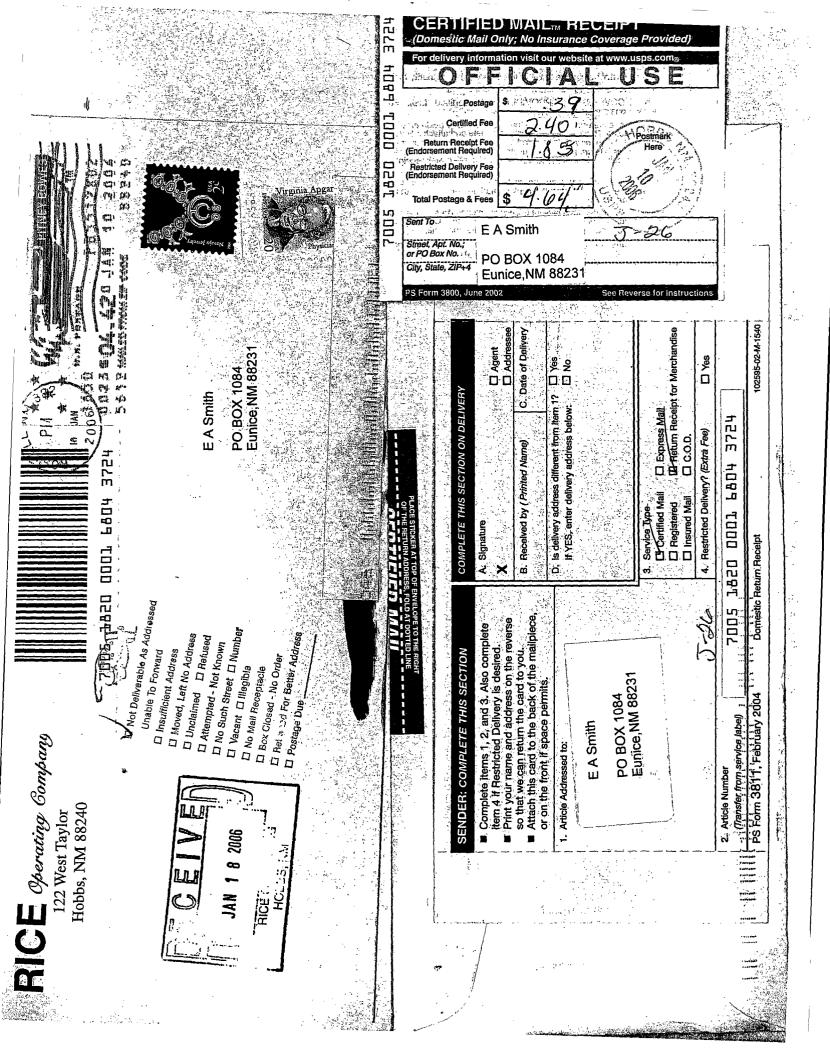
Kristin Farris Pope Project Scientist RICE Operating Company Hobbs, New Mexico (505) 393-9174

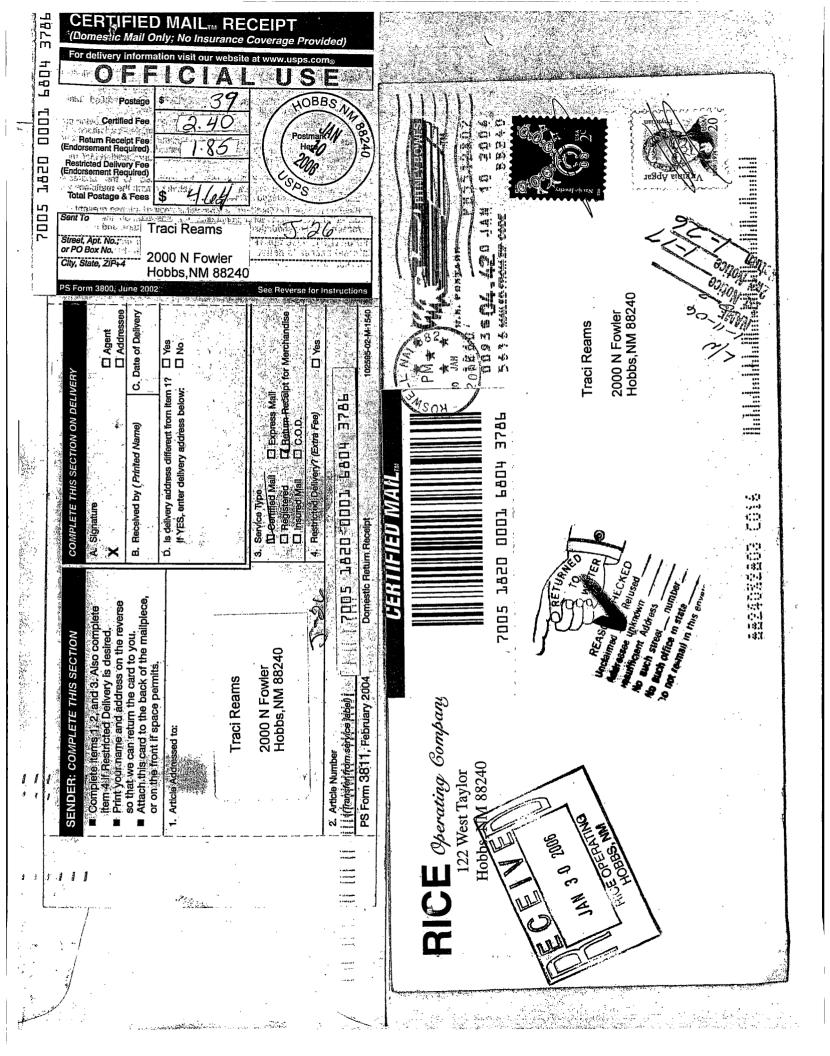
4/10/2006

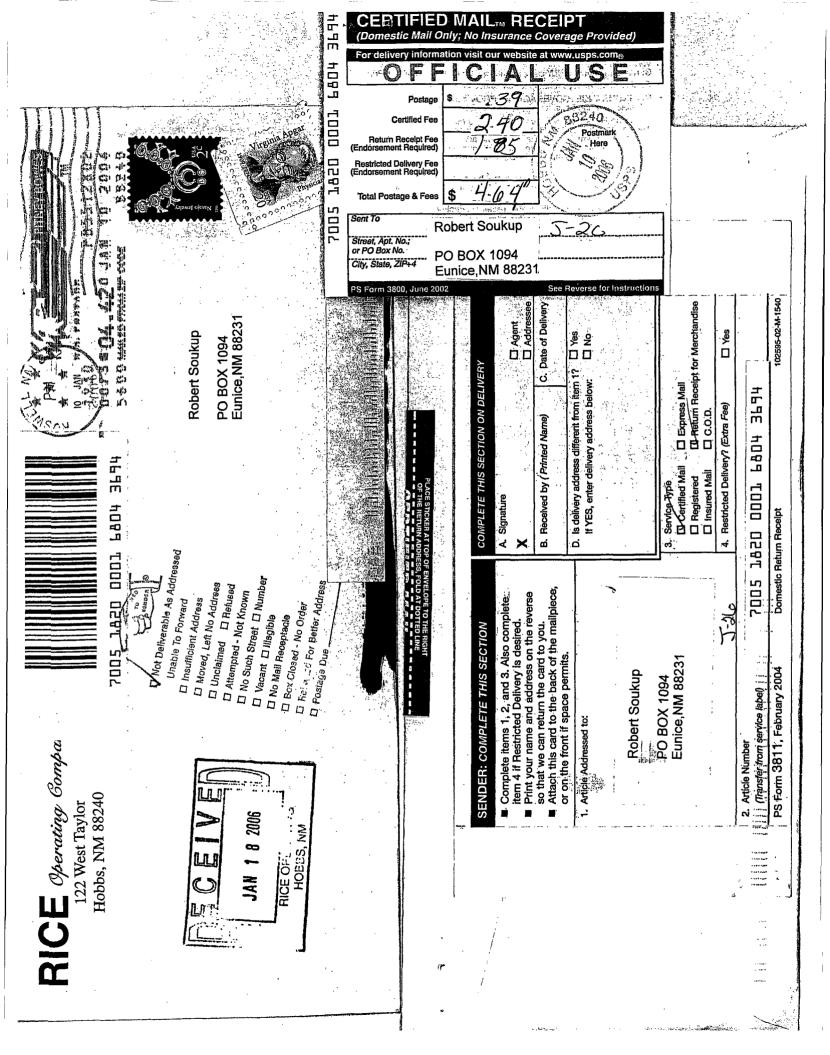
FIED MAIL RECEIPT 2109 С Provided) **Only: No Insurance** (Do S E 6804 Postage 1000 8240 Certified Fee Postmark **** Return Receipt Fee orsement Required) ななないです。 1820 Restricted Delivery Fee (Endorsement Required) ∞ μþ ÷., \$ Total Postage & Fees 7005 USFS Regional Office BD WT OTS 1993 HEREI HEREI 1992 Street, Apt. No.; or PO Box No. **Reginal Forester** 5-26 517 Gold Avenue SW City, State, ZIP Albuquerque, NM 87102 12、12、14.00mm+4.04 erse for Instruction 108280V × C Agent 02595-02-M-1540 C. Date of Delivery Express Mail
 Express Mail
 Express Mail
 Express Mail
 Express Mail
 Express Mail ғочиане Albuquerque, NM 87102 Yes D. Is delivery address different from item 17. Crosses of the sector of **USFS Regional Office** 517 Gold Avenue SW COMPLETE THIS SECTION ON DELIVERY Reginal Forester e S E C If YES, enter delivery address below: 7005, 1620, 0001, 6804, 2109 7005 1820 0001 6804 2109 4. Restricted Delivery? (Extra Fee) B. Received by (Printed Name) の主要が見てい 「「ないいい」である C Registered CENTRE DEVICE **Deerned** Mail Service Type A. Signature Domestic Return Receipt 7 <u>Ln s</u> Attach this card to the back of the mallplece. RICE OPERATING **JAN 2 3 2006** Print your name and address on the reverse \geq HOBBS, NM and 3. Also complet so that we can return the card to you. Item 4 if Restricted Delivery is desired SENDER: COMPLETE THIS SECTION Ø 81 JJ or on the front if space permits. C ą. February 2004 Albuquerque, NM 87102 JE Operating Comp. ervice label) UL USFS Regional Office 517 Gold Avenue SW I. Article Addressed to:3 Hobbs, NM 88240 Reginal Foreste 122 West Taylor Number PS Form 3811 (Transfer from Article

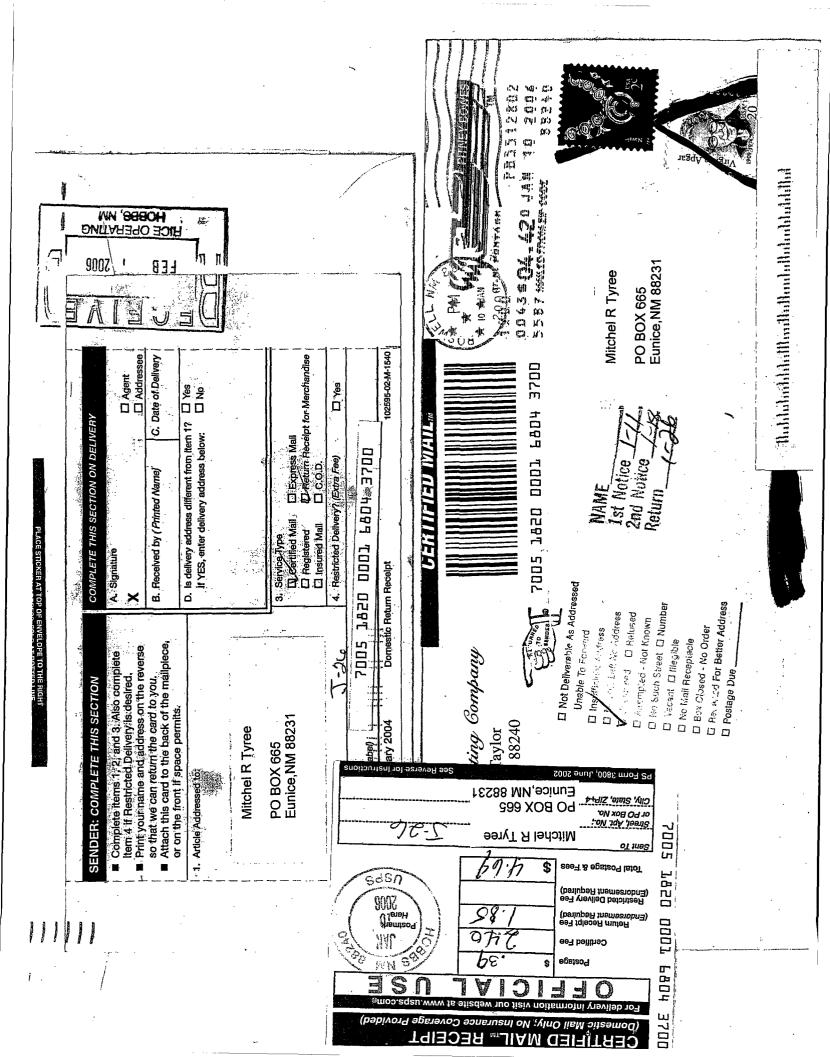
PLACE STICKER AT TOP OF ENVELOPE TO THE HIGHT



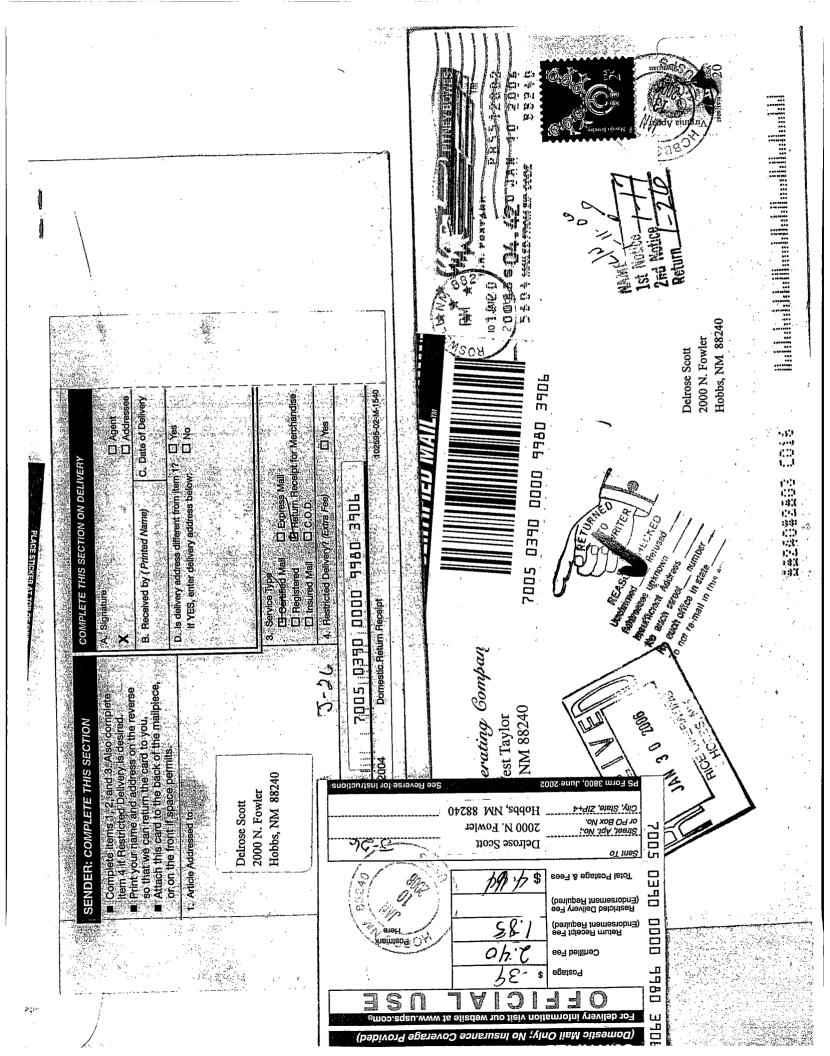


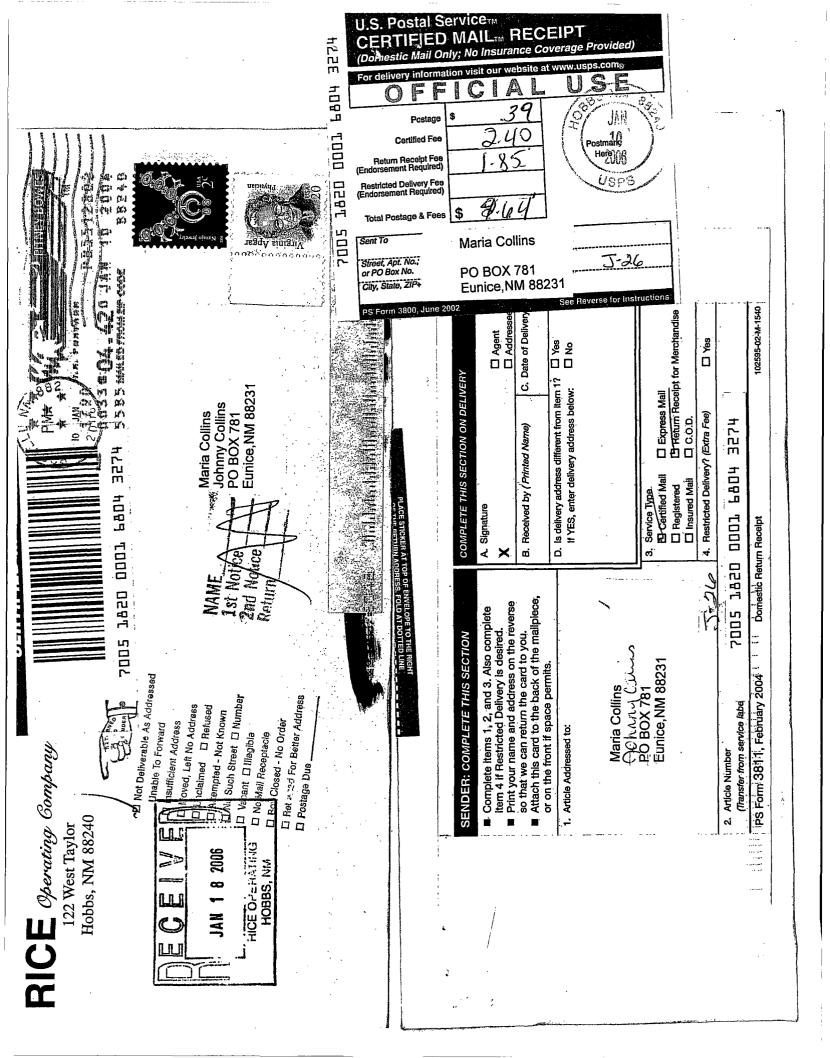


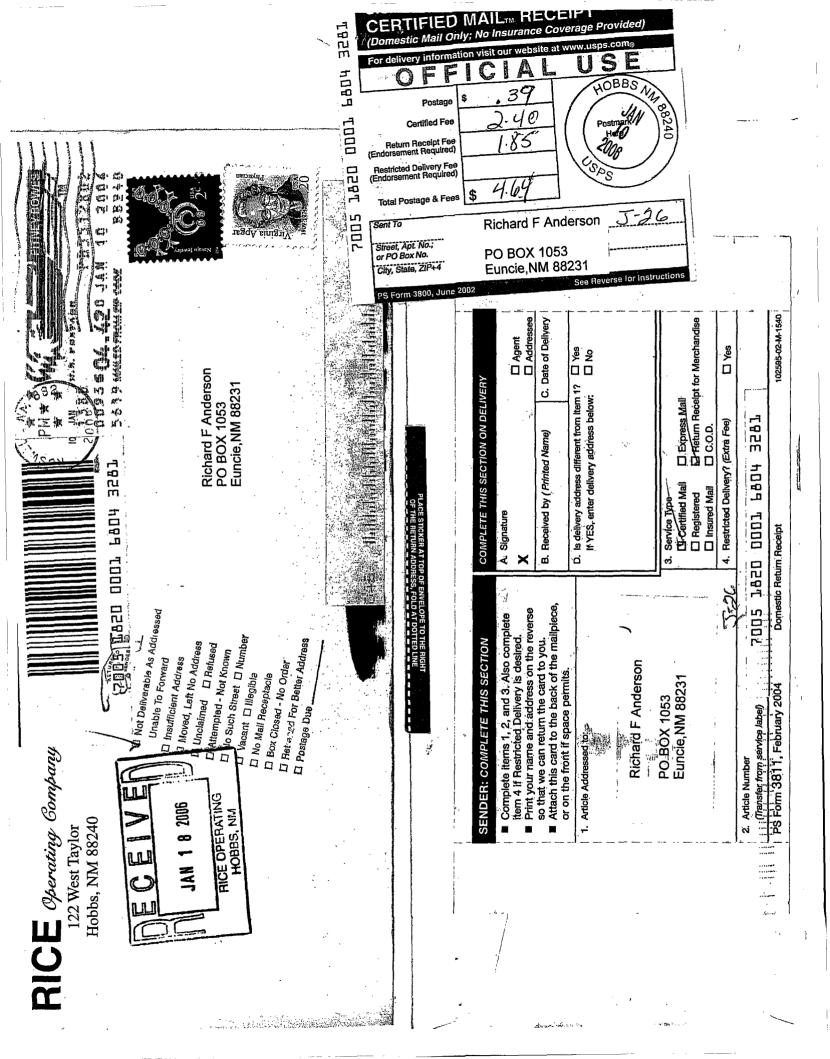


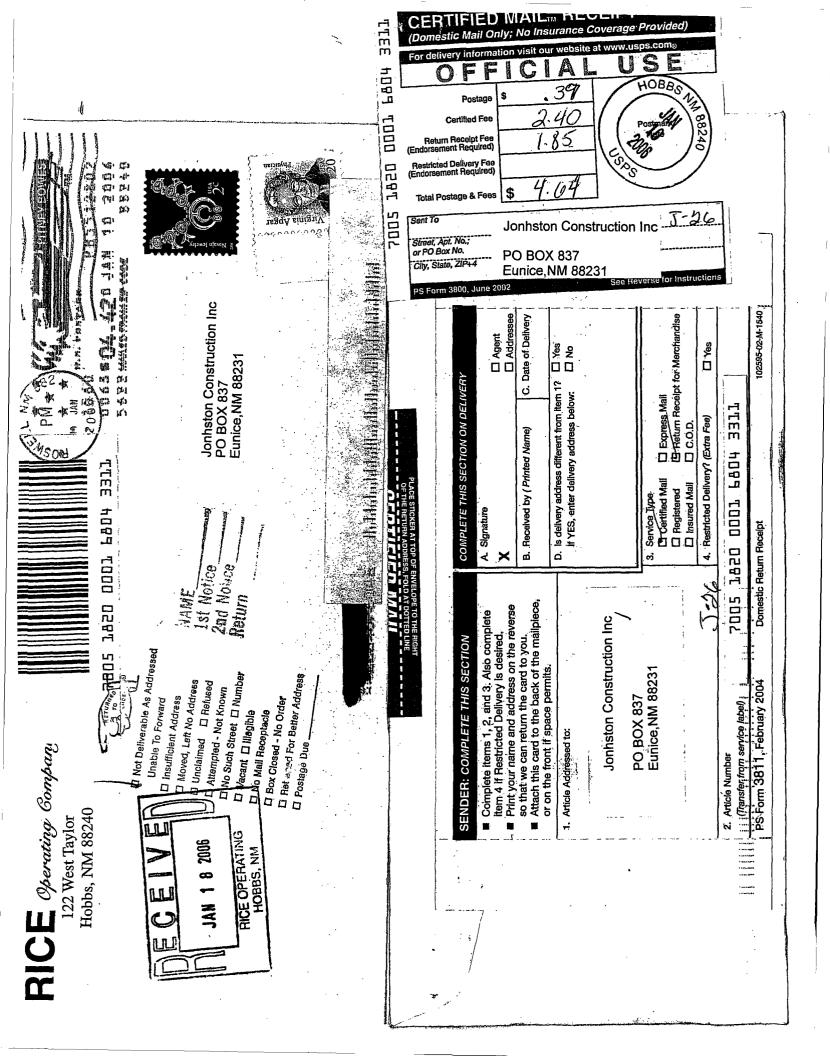


51) (2) (2) (3) (3) (3) いたのでの) C ¢.)• 1912 1912 1. 1. 福田大子大田山 PO BOx 1355 Eunice, NM 88231 **Tommie Williams** "The Stop ★ ● ● iz na č NSC. 7005 1820 0001 6804 3649 102595-02-M-1540 Entertum Receipt for Merchandise D Addressee C. Date of Delivery 🗆 Agent 2 2 0 ⊡ Yes D. Is delivery address different from Item 1? ist Notice 2nd No^{独CC} COMPLETE THIS SECTION ON DELIVERY 🗖 Express Mail If YES, enter delivery address below: Return NAME 3643 4. Restricted Delivery? (Extra Fee) 000 B. Received by (Printed Name) PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE 6004 Centified Mail C Insured Mail CI Registered ם Not Delivere's'אָהָ As.Addressed Service Type A. Signature 1000 ロ No Such Street ロ Number 다 Ret 하 고객 For Better Address Domestic Return Receipt 2. Moved. Left No Address V Unclaimed D Refused 🛙 Aitempted - Not Known A szuze D Meutificient Address Unable To Forward LI Box Closed - No Order 7005 1820 ň × 🛙 Vacant 🛛 Illagible L] No Mail Receptacle rerating Company 🛙 Poslage Due__ 5.36 ttach this card to the back of the mailplece, Print your name and address on the reverse Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. SENDER: COMPLETE THIS SECTION so that we can return the card to you. NM 88240 'est Taylor he front if space permits. Eunice, NM 88231 **Tommie Williams** ruary 2004 11501 101 2000 PO BOX 1355 5002 Bunt ,0085 mine 2002 rssa MN, eoinu E City, State, ZiP+4 Street, Apt. No. or PO Box No. PO BOX 1355 7005 Article ≥msilliW ∋immoT Б Total Postage & Fee 0] \$ 1850 NIN 88240 USP h HOBBS M NOE OPERATING Restricted Delivery Fee (Endorsement Required) FEB Here Here Return Receipt Fee (Endorsement Required) 1000 38 1 2006 Oh Certified Fee 147E HD89 efeiso*ħ*8 O di^{stra} S V ip instill ON Coverage Provided

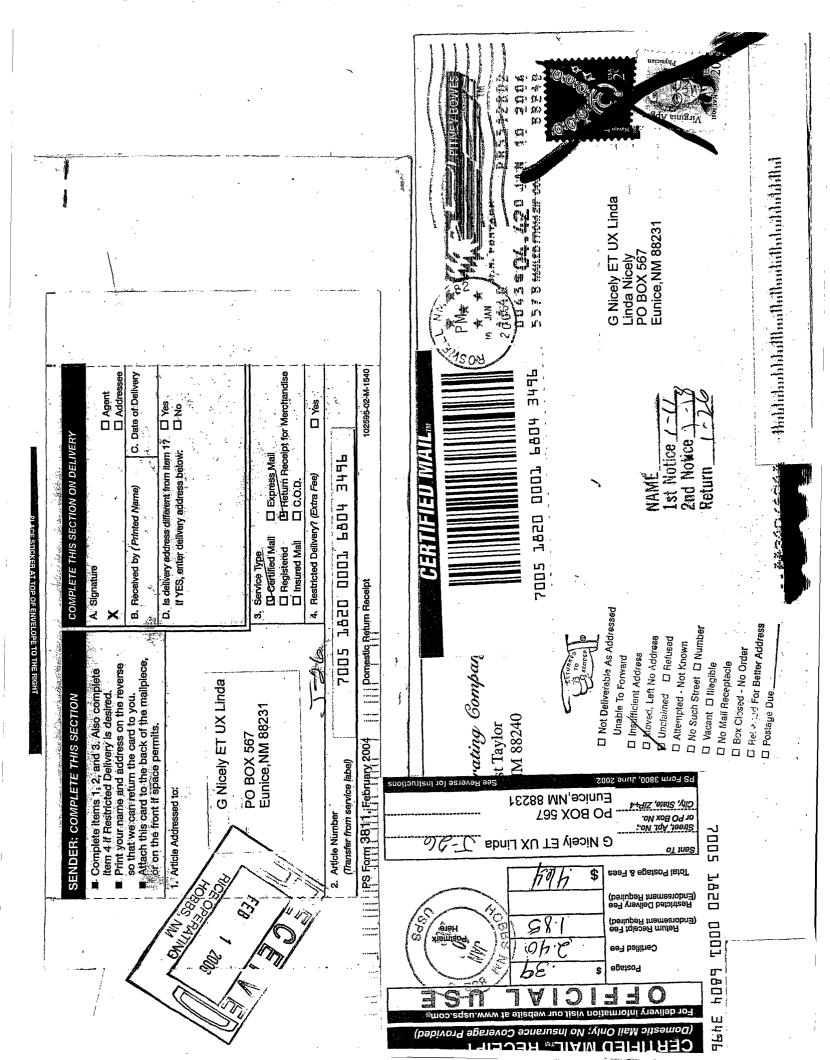


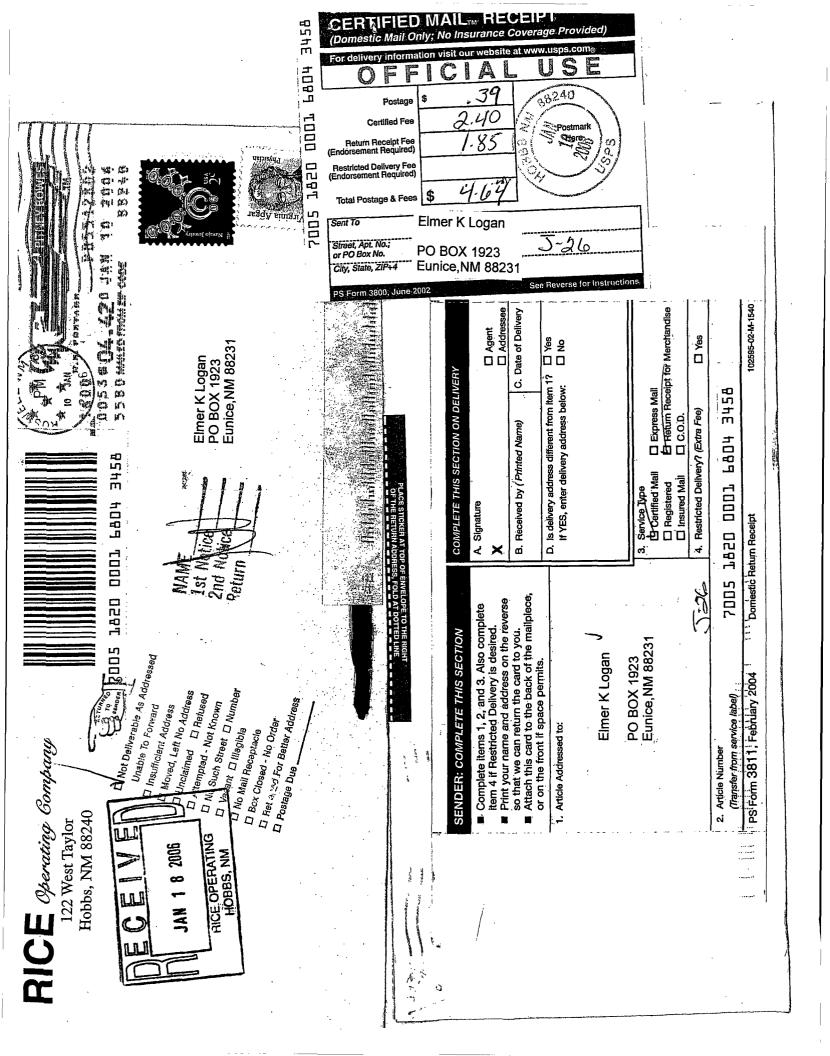


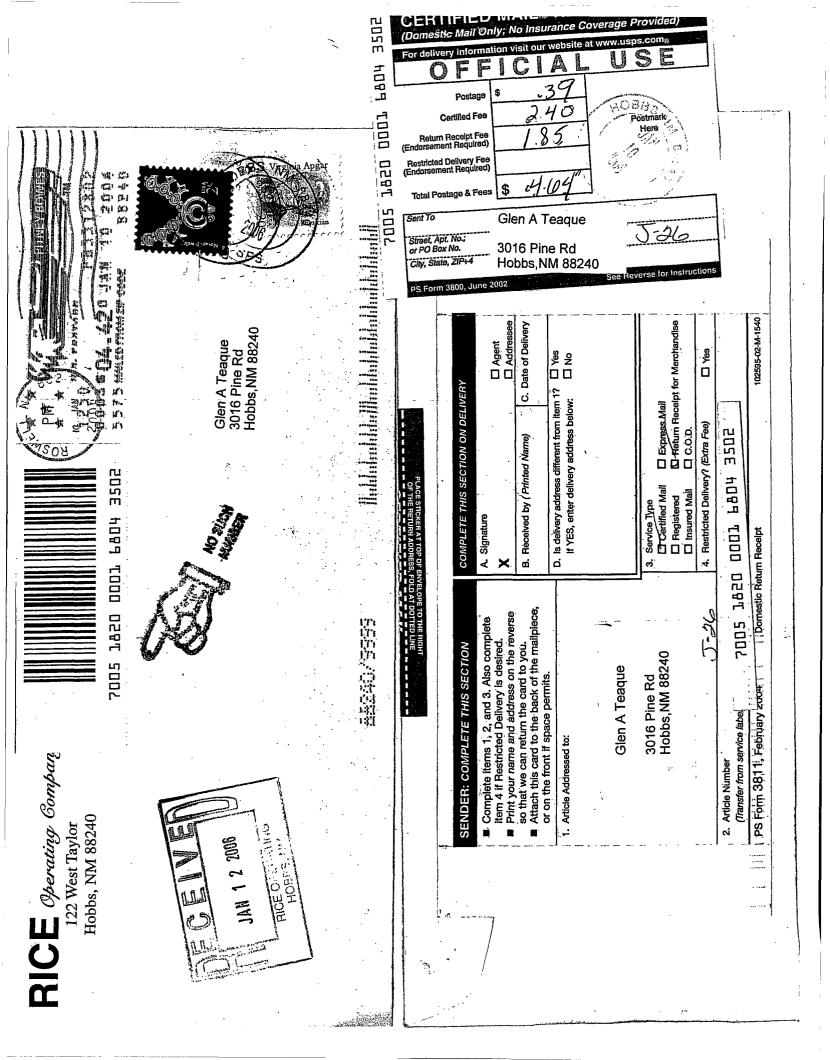




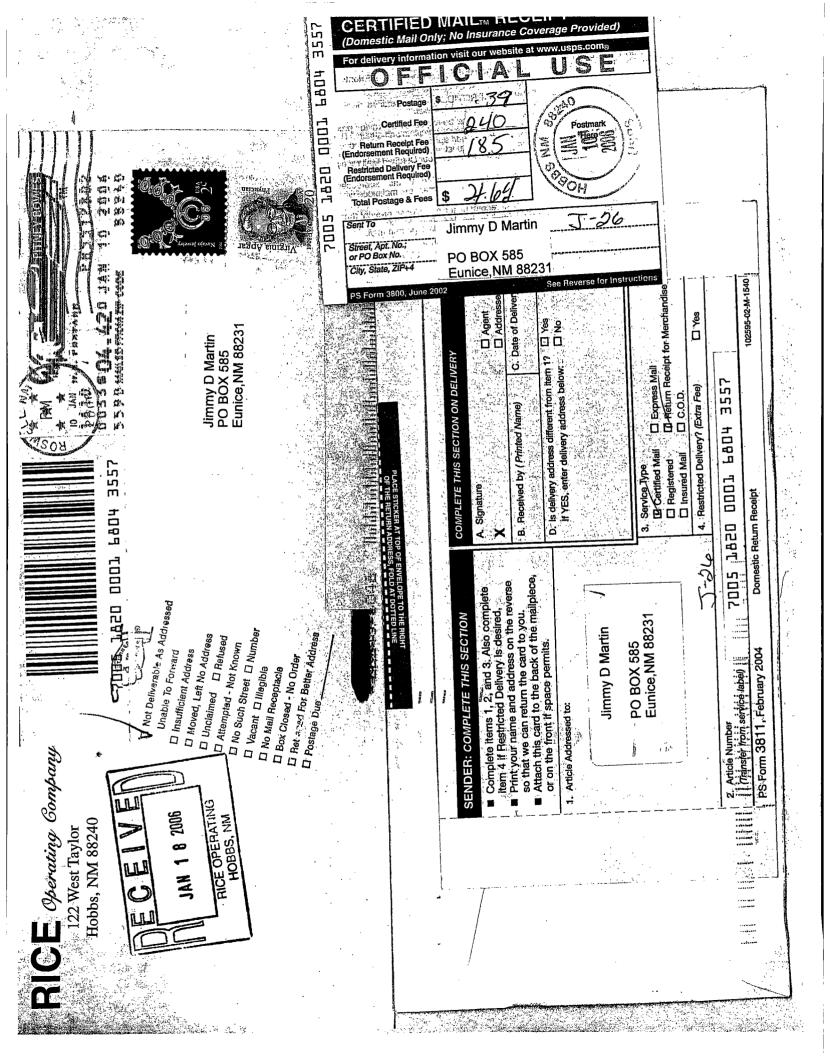
「「「「「「「「「「「」」」 no r 00000000 11152-1014**8**-(C) '7'' AUNTRA STA 4 messent to D. C. S. HAMED FROM Eunice, NM 88231 PO BOX 567 Linda Nicely NN 5.8 C Agent 02595-02-M-1540 C. Date of Delivery Lefterin Receipt for Merchandise 3564 [%] ≵ □ □ Yes 7005 1820 0001 6804 **GARTINEV WRUE** COMPLETE THIS SECTION ON DELIVERY D. Is delivery address different from item 1? Ist Notice, If YES, enter delivery address below: Znd Nouce 🛛 Express Mail 3564 Restricted Delivery? (Extra Fee) 0.0.0 NAME Return B. Received by (Printed Name) 6804 Service-Type ID Certified Mall I Registered Insured Mail PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE 1,820,0001 A. Signature Domestic Return Receipt × ຕົ Not Deliverable As Addressed 7005 - J C= Attach this card to the back of the mailpiece, ating Company Retrained For Better Address Print your name and address on the reverse No Such Street D Number Complete Items 1, 2, and 3. Also complete Unclaimed D Refused loved, Left No Address Attempted - Not Known No Mail Receptacle 🕤 Box Closed - No Order Item 4 if Restricted Delivery is desired. so that we can return the card to you. SENDER: COMPLETE THIS SECTION Msufficient Address **Unable To Forward** Vacant 🛛 Illegible PO BOX 567 Eunice, NM 88231 or on the front if space permits. D Postage Due M 88240 · · · · · nuary 2004 t Taylor Linda Nicely i (Transfer from service label) D I. Article Addressed to: ee Reverse to Eunice, NM 88231 **Article Number** HIZ PO BOX 567 Sireet, Apt. No. or PO Box No. 7005 96-S Linda Nicely 5350 n' \$ ee7 & epstro9 lato7 1950 RICE OPER HOBBS • • • • • Restricted Delivery Fee Endorsement Required 9007 () Here ee7 tqisceA muteA (Endorsement Receipt Feed) 1000 ាកា eefilited Fee ୁ NING WW Ź 2005 eBeteoq 4083 S ſ \Box 3564 liem ous έλιùΟ рарілоја эбеја ANTERN

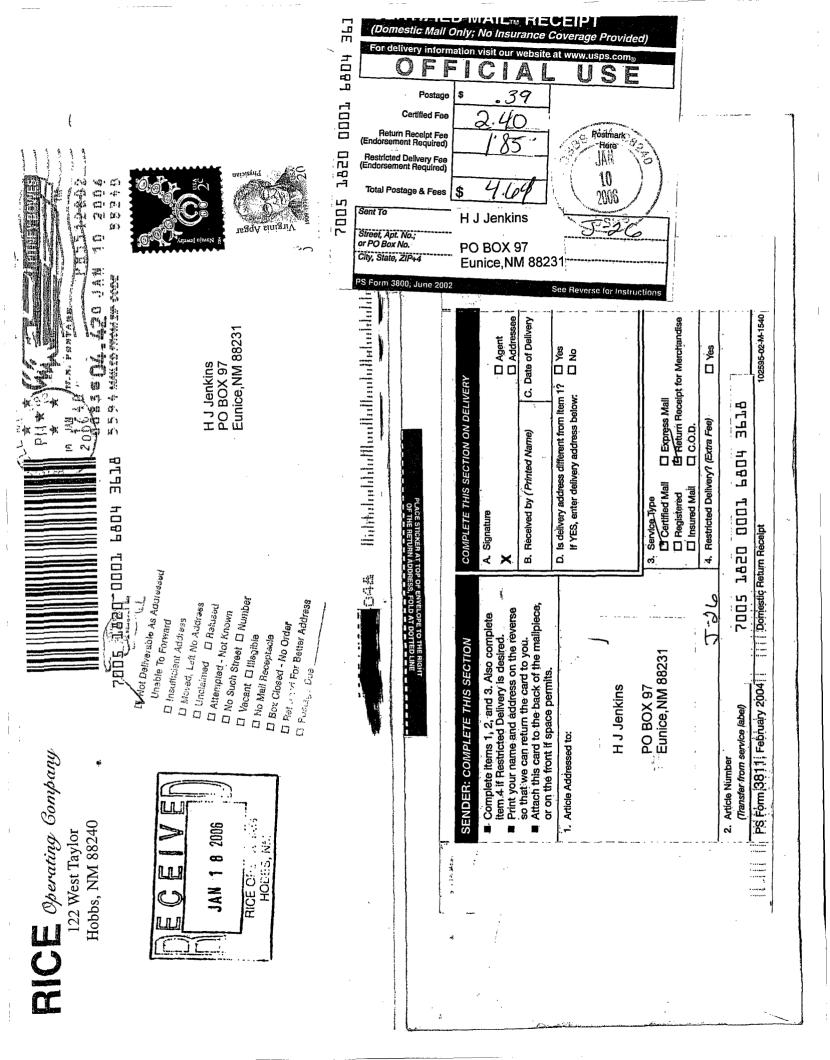






3588 D MAII Insurance Coverage Provided) Only: No 6804 Int Postmark MAA 1000 www.Certified Fee 1 Return Receipt Fee (Endorsement Required) 5 Lu Azıcısı Ċ 10 1820 Restricted Delivery Fee (Endorsement Required) 2018 \$ lo Ø Virginia Apgar Total Postage & Fees US 7005 Sent 2 Jose G Gonzalez Street, Apt. No.; or PO Box No. City, State, ZIP+4 Pod an anna second a constant PO BOX 462 Eunice, NM 88231 Jose G Gonzalez Eunice, NM 88231 PS Form 3800, June 2002 See Re PO BOX 462 「日日日 Sales of Agent SU Addressee 102595-02-M-1540 E Return Receipt for Merchandise C. Date of Delivery ۳ گۇ D. Is delivery address different from item 1? 2 D 極ら COMPLETE THIS SECTION ON DELIVERY 2. 60 If YES, enter delivery address below: C Express-Mail 6804 3588 3588 Restricted Delivery? (Extra Fee) B/Received by (Printed Name) Ist Notice 2nd Nowce 6804 El-Certified Mail D Insured Mail Registered NAME 3. Service Type Return 1000 A. Signature 1000 ¹ Domestic Return Receipt 7005 1820 X 1,820 Attach this card to the back of the mailpiece, Print your name and address on the reverse 7005 Complete Items 1, 2, and 3. Also complete Item 4 If Restricted Delivery is desired. l^{iverable} As Addressed 1-2 SENDER: COMPLETE THIS SECTION so that we can return the card to you. at D Number i^{t No} Addrees D Refused ロ R. ・・・・・ For Better Address Eunice, NM 88231 ^{Not} Known o Forward Jose G Gonzalez l Áddress or on the front if space permits. D Eox Closed - No Order PS'Forth 3811, February 2004 PO BOX 462 e '''all Aeceptácie RICE Operating Company (Transfer from service label) Such Stre "Tacant Ullic Died . 🛛 Po_{siago} D_{ue} ____ i. Article Addressed to: Atter D AL 2. Article Number Hobbs, NM 88240 122 West Taylor HOE33, BY RICE OPERALI œ JAN C ********** * ******** 111





(Domestic Mail Only; No Provided 56804 1820 0001 **Certified Fee** Return Receipt Fee (Endorsement Required) BŞ NA Restricted Delivery Fee (Endorsement Required) đ٩. 'uti • ದ್ರ 101 - 47 1021 - 47 10 100 - 47 100 100 100 100 100 100 1 iC 1 Total Postage & Fees Ś 005 7005 **...** cht. International Corn معاور T''6.7 Mike Schulz ු Street, Apt. No.; or PO Box No. 115 1**1**1-11 5301 Central Avenue, NE Suite 700 131.5 City, State, ZIP+4 UΠ Albuquerque, NM 87108 151. . 7 2006 RICE OPERATING PS Form June 2002 HOBBS, NM ¢:) 新学生大学者 · N · 4 19. Maison 102595-02-M-1540 ☐ Agent ☐ Addressee U. L Betuin Receipt for Merchandise C. Date of Delivery JAN 1 ¥es ° ₹ □ □ ş 1 Dundahing Tarman I Technology Corp. COMPLETE THIS SECTION ON DELIVERY i¢≞i Is delivery address different from item 17, 1914 1355 1914 Development Mike Schulz Express Mail If YES, enter delivery address bel Restricted Delivery? (Extra Fee) B. Received by (Printed Name) 0.0.0 2000 Jatoman, Mike Schulz 2005 1,820 0001 6,804 2000 · Draw and **D**Certified Mail 6804 Insured Mail Registered Service Type F A. Signature Sand in the local D No Such Number AT TOP Domestic Return Receipt Dunna DNG BLCT SIGH 1,820 0001 D No Receptació ġ Ö . . 4 × D Decession į.,] D Vacant TO THE RIGHT this card to the back of the mailplece. Print yourname and address on the reverse Complete Items 1, 2, and 3. Also complete ald Know 7005 H.S.S. item 4 if Restricted Delivery is desired. 5301 Central Avenue, NE Suite 700 SENDER: COMPLETE THIS SECTION to you. front if space permits. International Technology Corp. Albuquerque, NM 87108 Ø 18.1 return the card Mike Schulz PS Form 3811, February 2004 (Transfer from service) Addressed to: SE Operating Compan 2 å, ve can 2. Article Number ė so that Attac 0-0 Hobbs, NM 88240 122 West Taylor ÷ 4969.00 4969.00 ાયકર્ય C n india

NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete tem 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.		 Complete items 7, 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. 	A. Signature X /// Agent Addresser B. Received by (Printed Name) C. Date of Delivery
Article Addressed to: NM Oil & Gas Association PO BOX 1864	D. Is delivery address different/gem item 1? U ves If YES, entry address below: D No	 Article Addressed to: New Mexico Environmental Department Secretary 	D. Is delivery address different from item 1? Use If YES, enter delivery address below:
Santa Fe, NM 87504-1864	 3. Service Type 3. Service Type 3. Certified Mail 3. Express Mail 4. Restricted Delivery? (Extra Fee) 	PO BOX 26110 Santa Fe, NM 87504	3. Service Type 875.05 3. Service Type 875.05 4. Registered Theturn Receipt for Merchandise 4. Restricted Delivery? (Extra Fee)
Article Number (Transfer from service label) 7005 1.820 000 Form 3811, February 2004 Domestic Return Receipt	1 6804 2031.	2. Article Number (fransfer from service label) 7005 1,820 PS Form 3811, February 2004 Domestic Return Receipt	」 1820 0001 ちもりサ さルサフ urn Receipt 102595-02-M-154
NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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 malipiece, or on the front if space permits.	A. Signature X	 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 malipiece, or on the front if space permits. 	A. Signature X. J. M. C. C. E. D. Addresse B. Received by (Printed Name) C. Date of Deliver V. M. C. C. D. C. Date of Deliver
Article Addressed to: ale Historic Preservation Officer Attn:Elmo Baca 8 Fast Palace Avenue	D. Is delivery address dimerent from item 1y [−] to reso If YES, enter delivery address below: □ No	1. Article Addressed to: William Turner NM Trustee for Natural Resources	D. Is delivery address different from item 1? □ Yes_ If YES, enter delivery address below: □ Yo
illa Rivera Room 101 nta Fe, NM 87503	3. Service <u>Type</u> ☐ <u>Centified</u> Mail □ Exprese Mail □ Registered □ □ Re turn Receipt for Merchandise □ Insured Mail □ C.O.D.	C/O American Ground Water Consultants 610 Gold St. SW, Suite 111 Albuquerque, NM 87102	3. Service Type 3. Service Type Contrined Mail Contribution Registered Determ Receipt for Merchandle Insured Mail C.O.D.
BD J-26	4. Restricted Delivery? (Extra Fee)	BU) J-20	ery? (E
Article Number (fransfer from service label) 7005 1.820 000 Ecore 3811 Ecolory 2004 Domestic Behim Beceirt	20 0001 6804 2048 more readed	7005	1820 0001 6804 2161
		PS Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-15/

NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Print your name and address on the reverse to that we can return the card to you. Attent his card to the back of the mailplece, or on the front if space permits.	A. Signature X A Addressee B. Beseived by (<i>Printed Name</i>) C. Date of Delivery U. is delivery address different from item 1? D Yes	 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 mailplece, or on the front if space permits. 	A. Signature A Signature X Agent X Agent B. Received by (<i>Printed Name</i>) C Bate of Deliver L is delivery address different from tem 1? Yes
Article Addressed to:	If YES, enter delivery address below:	1. Article Addressed to Addressed	If YES, enter delivery address below:
0r. Harry Bishara O BOX 748		US Fish & Wildlife Service Field Supervisor	
Juba, NM 87013	3. Service Type ☐ Centified Mail □ Express Mail □ Registered □ Betterm Receipt for Merchandise □ Insured Mail □ 0.0.0.	2105 Osuna Road, Northeast Albuquerque, NM 87113-1001	3. Service Type ☐ Control Aritimed Mail □ Express Meil □ Registered □ Deturn Receipt for Merchandiss □ insured Mail □ C.O.D.
BD J-26	ery?	B1) 5-26	ery?
Article Number Transfer from service label) 7005	7005 1820 0001 6804 2024	2. Article Number. (fransfer from service label) 7005 1.8	1820 0001 6804 2086
Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	rm Receipt 102595-02-M-154
NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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 vou.		 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse on that wour name the card to you? 	signature all the for
Attach this card to the back of the mailplece, or on the front if space permits.	B. Hecewed by (Printed Name) C. Ugue or Delivery Due After core & ((111/06	 Attach this card to the back of the mailplece, or on the front if space permits. 	Received by (Printed Name) C. D.
Article Addressed to:	D. Is delivery address different from frem 17 to 195 If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No
Southwestern Public Service Ron Dutton		Southwest Research & Information Center Chris Shuev	
PO BOX 1261 Amarillo, TX 79170	3. Service Type 3. Service Type 1. Express Mail 1. Express Mail 1. Betrum Receipt for Merchandlse 1. Insured Mail 1. C.O.D.	PO BOX 4524 Albuquerque, NM 87106	3. Service Type BC-Certified Mail □ Express Mail □ Thesigtered Duffum Receipt for Merchandis ¹ Ifisured Mail □ C.O.D.
RD J-26	Š	BAJ 34	Yie
Article Number (Transfer from service label) 7005 1.820	20 0001 6804 2246	2Atticle Number Transfer finan service rabeit	
Form 3811, February 2004 Domestic Return Receipt	turn Receipt	PS Form 3811, February 2004 Domestic Return Heest	unn Heeelpr

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Contrprete trems 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. Attact this card to the back of the mailpiece, or on the front if shore back of the mailpiece. 	A Signature A Child Addressee A Received by (Printed Name) C. Date of Delivery	 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, 	A. Signature A. Signature A. Signature A. Signature A. Signature A. S. Agent A. Addresse A. Addresse B. Received by (<i>Printed Name</i>) C. Date of Deliver
Article Addressed to:	below:	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1?
ea County Administration Office Attn: Lue Ethridge		William O. Stephens	IT TCS, entrer delivery address below:
00 N. Main Street, Suite 4 Jovington, NM 88260	3. Service Type ★ Certified Maif □ Express Mail □ Registered ★ Return Receipt for Merchandise □ Insured Mail □ C.O.D.	Eunice, NM 88231	3. Service Type 3. Service Type Contined Mail Con Registered Con Insured Mail COD
3-26	4. Restricted Delivery? (Extra Fee)	5-26	Υ
・Article Number (fitansfer from service label) 7005 1.820	20 0001 6804 5483	2. Article Number (Transfer from service label) 7005 0390 0000	1 1 E 9 9 E 1 0 9 6 6
S-Form 3811, February 2004 Domestic Re	Domestic Return Receipt 102595-02-M-1540	004	
NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
Complete Items 1, 2, and 3. Also complete	A. Signature	SENUER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERT
tem 4 if Restricted Delivery is desired. Print your name and address on the reverse	X X. w. C. C. Agent	 Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
so that we can return the card to you. Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery	 Print your name and address on the reverse so that we can return the card to you. 	B. Received by (Printed Name) C. Date of Delivery
or on the front it space permits.	-2	 Attach this gand to the back of the maliplece, or on the front space permits. 	
	If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery actives all the feat from them 1?
Ken Marsh CRI		4.5 - 3.5 - 5. 	AN 1 2 2006
PO BOX 388	3. Service Type	Bureau of Land Management	
Hobbs, NM 88241	Certified Mail Registered	PO BOX 27115 Santa Fe. NM 87502-0115	3. Service Type
BN J-26	4. Restricted Delivery? (Extra Fee)		L Registered <u>2.2.44000000000000000000000000000000000</u>
		1	4. Restricted Delivery? (Extra Fee)
Form 3811. February 2004 Domestic Return Receipt	-	service label) 7005	1820 0001 6804 1980
		PS Form 3811, February 2004 Domestic Return Receipt	m Receipt 102595-02-M-15
	·		
			•

ļ

ŗ

NDER: COMBI ETE THIS SECTION			
		SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
complete it <u>ems 1, 2,</u> and 3. Also complete em 4 if Restricted Delivery is desired. rint vour name and address on the reverse	A. Signature	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature XI. Y NO
o that we can return the card to you. ttach this card to the back of the maliplece, ir on the front if space permits.	B. Becelved by (Printed Name) C. Date of Delivery	 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 maliplece, 	B. Received by (<i>Printed Name</i>) C. Date of Deliver
rticle Addressed to:	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below:	or on the front if space permus. 1. Article Addressed to:	D. Is delivery address different from Item 1? CYes If YES, enter delivery address below: CYO
Bobby L Pearce Trust	то, така — с тако с цело с цело	Eva Owen	
PO BOX 316 Eunice, NM 88231	3. Service Type IC Certified Mail □ Express Mail □ Registered □ Heturm Receipt for Merchandise □ Insured Mail □ 0.0.0.	PO BOX 115 Eunice, NM 88231	3. Service-Type 3. Service-Type 4. Continued Mail C.C.D. Continued Mail C.O.D. Insured Mail C.O.D.
J-J C Title Nimber	SI	J-JL	4. Restricted Delivery? (Extra Fee)
tervice label) February 2004	7005 1.820 0001 6804 3656 00000 0000000000000000000000000000	2. Atiole Number	
		nt V	aldo "soil
UDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete item s 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Print vour name and address on the reverse	A. Signature	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print vour name and address on the reverse 	A. Signature X X X 1 1 1 1 1 2 Month & Ber Dadresse
other we can return the card to you. Attach this card to the back of the mailplece, or on the front if space permits.	B. Received by (Printed Name) C, Date of Dellyary	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.	Vame) C. D
Article Addressed to:	D. Is delivery address different from fiem 17 Ld 765 If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from item 1?
Kathleen Parker		Duayne Parker	PD BOK 1147 FUMER NM 88231-0147
PO BOX 1291 Euncie,NM 88231	3. Service Type Centified Mail Express Mail Registered Urfeturn Receipt for Merchandise		3. Servlæe Type IZ Certified Mail D Express Mail D Registered D Feturn Receipt for Merchandi
5-26	ery? (F	756	Lu msured Main LUCULU. 4. Restricted Delivery? (Extra Fee) DYes
Article Number 7005 1820	0001 6804 3625	2. Article Number (Transfer from service label)	7005 1820 0001 6804 3632
Form 3811, February 2004 Domestic Return Receipt	tum Receipt 102595-02-M-1540 ,	PS-Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1{

Ь.

IDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
omplete items 1, 2, and 3. Also complete em 4 if Restricted Delivery is desired. rint your name and address on the reverse o that we can return the card to you. ttach this card to the back of the malipiece, r on the front if space permits.	A. Signature	 Complete items 1, 2, and 3. Also complete item 4.4f 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 maliplece, or on the front if space permits. 	
rticle Addressed to:	D. Is delivery address different from item 1? D Yes If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from item 1?
Gilbert's Leasing Service Inc		Bart D Parker	12 LE
PO BOX 1597 Lovington, NM 88260	3. Service Type Lar Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.	PO BOX 846 Eunice,NM 88231	3. Service Trate 3. Service Trate Certified Mall □ Express Mail C. Receipt for Merchandik □ Insured Mail □ C.O.D.
5-240	4. Restricted Delivery? (Extra Fee)	J-296	4. Restricted Delivery? (Extra Fee)
2002	1820 0001 6804 3335	2. Article Number	7005 11820 10001 6804 3489
orm 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	im Receipt 102595-02-M-15
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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. Attent hils card to the back of the maliplece,	A. Signature X X B. Baceived by, Primed Name) B. Baceived by, Primed Name) C. Date of Delivery	 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 mailplece, or on the front if some neurits 	A. Signature X. J. L. J. J. J. J. Dater Delive B. Received by (<i>Printed Name</i>) C. Date of Delive
Article Addressed to:	D. is delivery address different from tem 1? If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from item 1?
Joe Allen Caperton		Eva Owens trčir J c£Striwensi-m lt rr PO BOX 115	
PO BOX 1028 Eunice, NM 88231	3. Service Type 3. Service Type Certified Mail □ Express Mail □ Registered □ Heturn Receipt for Merchandise □ Insured Mail □ C.O.D.	Eunice, NM 88231	3. Service Type 3. Service Type 12. Certified Mail 12. Registered 12. Refurm Receipt for Merchandit 15. D.D.
5-36	4. Restricted Delivery? (Extra Fee)	7-26	ery
Article Number 7005	5 1.820 0001 6804 3366		1.820 0001 6804 3472
4	Domestic Return Receipt	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-16

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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 malipiece, or on the front if space permits.	A. Signaturgs X X A A Agent B. Received by (Printed Name) C. Date of Delivery	 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 mailplece, or on the front if space permits. 	B. Riedwed by (Printed Name) C. Date of Deliver U.D. C. Date of Deliver
Article Addressed to:	Divis delivery address different from Itam 17 Tes	1. Article Addressed to:	D. Is delivery address different from frem V. U. 1995 If YES, enter delivery address below:
Wayne Aderson		Richard Robinson	
PO BOX 1491 Eunice, NM 88231	3. Service Type 3. Service Type Greatified Mail Greated Breatered Greatered Breater for Merchandise Insured Mail C.O.D.	PO BOX 1334 Eunice,NM 88231	Service Type C.C. Centrified Mail Express Mail Registered CL Return Receipt for M Insured Mail C.O.D.
	od Delivery? (Extra Fee)	ĥ	4. Restricted Delivery? (Extra Fee)
- 18	1 0001 6004 3434 11 10565-02-04 1540 102565-02-04 1540	Transfer from service label) 7005	1: PBUH 2 (V.
	ß		
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	X Wanda Rulh addressee	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Deint very come and address on the encoded 	A. Signature
so that we can return the card to you. I Attach this card to the back of the mailpiece, or on the front if space permits.	ed Name) C. De	 Truit you name and address on the reverse so that we can return the card to you. Attact his card to the back of the mailplece, or on the front if some normities 	Name) C. D
. Article Addressed to:	D. Is delivery address different from item 1? D Xes If YES, enter delivery address below:		D. Is delivery address different from term 1? □ Yes If YES, enter delivery address below: □ No
Ruth L Willard		Mark Owen Estate	
PO BOX 589 Eunice, NM 88231	3. Service Type 3. Service Type 1. Centified Mail □ Express Mail □ Registered □ Insured Mail □ C.O.D.	PO BOX 115 // Euncie,NM 88231	3. Service Type 3. Service Type 3. Service Type 4. Express Mail COD Anali COD
5-26	4. Restricted Delivery? (Extra Fee)	726	<u>ک</u>
7005	1820 (0001 6804 3717 F	2. Article Number (Transfer from service label) 7005 1.6	1820 0001 6804 3427
S Form 3811, February 2004 Domestic Return Receipt	turn Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-1M-15

NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete Items 1, 2, and 3. Also complete ttem 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,	A Signature A Signature B. Received by (<i>Printed Name</i>) C. Date of Delivery	 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, 	A. Signature XSOCOTYC HC/ACAC C Addresse B. Received by (Printed Name) C, Date of Deliver
or on the front it space permits. Article Addressed to:	D. Is delivery address different from Item 1? 7 Yes	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1? If YES, enter delivery address below:
Jamies E Gardner		Jose Hernandez	
PO BOX 1244 Eunice,NM 88231	3. Service Type 3. Service Type Certified Mail Express Mail Registered Er Return Receipt for Merchandise Insured Mail O.O.O.	PO BOX 413 Eunice, NM 88231	3. Service-Type 3. Service-Type 1. Express Mail 1. Express Mail 1. Registered 1. Return Receipt for Merchandis 1. Insured Mail 1. C.O.D.
5-210	ery?	1 1 2	ery?
10.2		ெ	1.820 0001 6.804 3595 (
Form 3811. February 2004 Domestic Re	Domestic Return Receipt	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-15
IDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
omplete <u>items 1, 2</u> , and 3. Also complete em 4 if Restricted Delivery is desired. rint your name and address on the reverse to that we can return the card to you.	A. Signature X har and a family and Addressee B. Received by (Printed Name) C. Date of Delivery	 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. 	A. Signature X // UUUUU Allue Agent B. Received by (<i>Printed Name</i>) C. Date of Delive
traction the front if space permits.	D. Is delivery address different from Item 1? P. Is delivery address different from Item 1? If YES, enter delivery address below: Mo	 Attach this card to the back of the maliplece, or on the front if space permits. Article Addressed to: 	 D. Is delivery address different from item 1? Yes Tit YES, enter delivery address below:
City of Eunice P.O. Box 147		Eddie J Harpier	
Eunice, NM 88260	3. Service Trope ☐-Certified Mail □ Express Mail □ Registered □ Treturn Receipt for Merchandise □ Insured Mail □ C.O.D.	PO BOX 124 Eunice,NM 88231	3:-Service-Type- 3:-Service-Type- Express Mail Begistered Breturn Receipt for Merchandik Insured Mail
7-26	4. Restricted Delivery? (Extra Fee)	7-26	4. Restricted Delivery? (Extra Fee)
ratice Number 5 1 1 2 0 2 0 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0390 0000 9980 3852	2. Article Number (iransfer from service label) 7005 1,820	0 0001 6804 3519
orm 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	PS Form 3811, February 2 Domestic Return Receipt	turn.Receipt 102595-02-M-16

	COMPLETE THIS SECTION ON DELINERY		COMELETE THIS SECTION ON DELIVERY
INDEN. COMPLETE THIS SECTION		SENDER: COMPLETE THIS SECTION	
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A. Signature
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,	B. Received by (<i>Printed Name</i>) C. Date of Delivery	 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 maliplece, 	(Printed Name) C, D
Article Addressed to:	D. Is delivery address different from Item 1? TYes If YES, enter delivery address below: TNo	or on the from it space permits. 1. Article Addressed to:	D. Is delivery address different from Item 1?
Royce Crowell PD BOX 146	Karge Enered	Mary E Brewer ET AL	
Eunice, NM 88231	3. Service Type Certified Mail □ Express Mail □ Registered EFfeturn Receipt for Merchandise	PO BOX 821 Eunice, NM 88231	3. Service Type 3. Service Type Device Type D
7-26	4. Restricted Delivery? (Extra Fee)	5-26	Σ.
Addole Number	1; 1; 1; 1; 1; 1; 1; 1; 1; 1; 1; 1; 1; 1	2. Article Number (Transfer from service tabel) 7005 1.	1820 0001 6804 3373
2 Form 3811, Eebruary 2004. Domestic Return Receipt	Im Receipt 1540	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-15
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Signature	 Complete items 1, 2, and 3. Also complete item 4 if Bestricted Deliverv is cleared. 	A. Signature
Finit your traine and address on the reverse so that we can return the card to you. Attach this card to the back of the maliplece, or on the front if space permits.	*I CI I	 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, 	B. Received by (Printeg Name) C. Date of Delive
Article Addressed to:	D. Is delivery address different from item 1? LI Yes I If YES, enter delivery address below:	or on the front if space permits. 1. Article Addressed to:	om item 1?
Calico Properties LLC		City Of Eunice	
500 Zia Drive Hobbs, NM 88240	3. Service Type E-Certified Mail D Express Mail D Registered D Return Receipt for Merchandise	PO BOX 147 Eunice, NM 88231	
1-26	ery? (E		니 Insured Mail 디 C.O.D. 4. Restricted Deliver가 (Extra Fee) 디 Yee
Article Number (Transfer from service label) 7005 1.8	1820 0001 6804 3410	7	יוחחה שחבה שחבה עומה הק
S Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	ă	

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print vour name and archress on the reverse	A. Signature X (, 7 JAn, Ormer D. Addressee	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A Signature X P(V) (7,1) address
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space bernits.	C, Dat	 Truct your flame and address of the revelse so that we can return the card to you. Attach this card to the back of the mailplece, or on the finnet if snace nermits 	Printed Name) C. D
Article Addressed to:	D. Is delivery address different from item 1? Yes If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from item 1? \Box Yes if YES, enter delivery address below: \Box No
Richard Don and Cathy Jones		B W Caperton	
P.O. Box 21 Eunice, NM 88231	3. Service Jype 3. Service Jype Gentified Mail □ Express Mail Registered □ Anothin Receipt for Merchandise □ Insured Mail □ C.O.D.	PO BOX 931 Euncie, NM 88231	3. Service Type El-Certified Mail El-Certified Mail El-Certified Mail El-Certified Mail El-Certified Mail C.O.D. Insured Mail C.O.D.
7-36	ery?	736	ery?
Article Number (Transfer from service label)	7,2005 0390 0000 9980 3876	2. Article Number (Transfer from service label)	1.820 0001 6804 3267
Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	PS-Form 3811, February 2004 Domestic Return Receipt	im Receipt 102595-02-M-15
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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,	A. Signature X. D. M. D. B. Aur. B. Addressee B. Received by (Printed Name) C. Date of Delivery	 Complete Nems 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 mailplece, 	A. Signature X. Caugl J. Woldy Dedentess B. Received by (Printed Name) C. Date of Deliye
Article Addressed to:	D. Is delivery address different from item 1? 198 If YES, enter delivery address below:	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: Yeto
Joe Alden Bayes		Carol Thorton	
PO BOX 173 Eunice, NM 88231	3. Service Type 3. Service Type Gentified Mail Centified Mail Erfeturn Receipt for Merchandise Insured Mail Insured Mail C.O.D.	PO BOX 3 Tex - NM Camp Eunice,NM 88231	3. Service Type Gontified Mail □ Express Mail □ Registered □ Betturn Receipt for Merchandis □ Insured Mail □ C.0.0
J-24	4. Restricted Delivery? (Extra Fee))-3C	ery 1
Article Number (Transfer from service label)	0001 6804 3397 ⁷	2. Article Number (Transfer from service label)	7005 1820 0001 6804 3663
Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	

.

|

ļ •

| |-|

I

|

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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 malipiece, or on the front if space permits.	A. Signature X. Cotting Jones Data Addressee B. Received by (Printed Name) C. Date of Delivery	 Complete itents 7, 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. 	
Article Addressed to:	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from item 1?
Richard Don Jones		Runco Inc	
PO BOX 21 Eunice, NM 88231	Mail Receipt fo	8100 W Alabama Hobbs,NM 88240	3. Service_Jype Ld Certified Mail □ Express Mail □ Registered □ Receipt for Merchandis □ Insured Mail □ C.O.D.
Article Number Article Number (Transfer from service label)	ンC 4. Restricted Delivery? (Extra Fee) ロ Yes アロロ5 ユ&こロ ロロロゴ ヒ&ロリニヨリリユ	2. Article Number (Transfer from service label) (11-7005) 18	4. Restricted Delivery? (Extra Fee)
S Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	m. Receipt 102595-02-M-15
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDED. COMPLETE TUR SCOTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A signature Agent	 Complete items 1, 2, and 3. Also complete item 4 if Bestricted Dalivary is desired 	A. Signature M. M. A. Month
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 mailplece, or on the front if space permits.	Received by (Printed Name) C. Date	 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 mailplece, 	B. Received by (Priptied Name) C. Date of Delive
Article Addressed to:	D. Is delivery address different from itern 1?	1. Article Addressed to:	D. Is delivery address different from Item 1?
Patricia House ET AL		Patrick McCasland	
PO BOX 3715 Midland,TX 79702	3. Service Type 3. Service Type Decertified Mail CERPISE Mail Registered CERPISE Return Receipt for Merchandise Incommod Mail CERPISE	PO BOX 218 Eunice, NM 88231	1
7-36	lery	Traller	These main C.O.D. A. Restricted Delivery? (Extra Fee)
、Article Number (fransfer from service label) 7005 1.5	1820 0001 6804 3533	2. Artcle, Number 700 State	7005 ^{%1} 820,0001,1804 3465
S Form 3811, February 2004 Domestic Hatum Haceip	um Receipt 102595-02-M-1540	-PS-Form 3811. February 2004 Domestic Returneeopt	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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 suace normits	A. Signature X // Addressee B. Bepelved by (Printed Name) C. Date of Delivery	 Complete fiems 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 mailplece, or that we can not back of the mailplece, 	A. Signature X is a signature
Article Addressed to:	D. Is delivery address different from term 1? ☐ Yes If YES, enter delivery address below: ☐ No	1. Article Addressed to:	D. Is delivery address different from item 1?
New Mexico State Hwy & Trans Dept		Texas - New Mexico Railroad	
PO BOX 1149 Santa Fe,NM 87504	Mail Receipt fo	PO BOX 409783 Atlanta,GA 30384-9783	Mail-
J-24	4. Restricted Delivery? (Extra Fee)	J-36	4. Restricted Delivery? (Extra Fee)
Article Number (fransfer from service label) i 7005 1	1820 0001 6804 3403	2. Article Number ?// (Transfer from service label) 7005 1820	20 0001 6804 3328
Form 3811, February 2004 Domestic Return Receipt	turn Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	um.Receipt 102595-02-M-15
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete items 1, 2, and 3. Also complete tem 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 maliplece,	A. Signature A. Signature X M X M B. Received by (Printed Name) C. Date of Delivery	 Complete items 7, 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 malipiece, or on the front if space permits. 	A. Signature A. Signature Agent D. Addresse B. Regeived by (Printed Name) C. Date of Deliver 1/11/06
Article Addressed to:	D. Is delivery address different from item 1? Tes	1. Article Addressed to:	D. Is delivery address different from Item 1?
Kenneth V Blackwell	OCKTX	Patricia House P.O. Box 3715	
PO BOX 53180 Lubbock, TX-29453	3. Service Type	Midland, TX 79702	3. Service Type Certified Mall Certified Mall Express Mail Registered Areturn Receipt for Merchandls Insured Mail C.O.D.
1-1-	4. Restricted Delivery? (Extra Fee)	3-36	4. Restricted Delivery? (Extra Fee)
Article Number	20	7005	1960 3890
Form 3811, February 2004 Domestic Return Receipt		PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-15/

NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SELUCER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete rtems 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Print vour name and address on the reverse	A linetature Agent	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
so that we can return the card to you. Attach this card to the back of the malipiece, or on the front if space permits.	ിര്	 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 mailplece, 	Received by (Printed Name)
	The second states and the second states and the second states and the second states and the second s	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1?
W H Robbins	JAN 13	Soil & Water Conservation Bureau	
PO BOX 1643 Eunice, NM 88231	3. Service Type Certified Mail □ Express Mail □ Registered □ C.O.D.	BOX 30005/APR Las Cruces, NM 88003-8005	3. Service Type 3. Service Type Defined Mail Registered Registered Receipt for Merchandis Insured Mail C.O.D.
	<u> </u>	RD J-2 6 2. Article Number (fransfer from service label) 7005	4. Restricted Delivery? (Extra Fee) 디 Yes 고 & 근 미 미 미 노 & 미 + 근 미 5 5
	im.Receipt	PS Form 3811, February 2004 Domestic Return Receipt	turn Receipt 102595-02-M-15
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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 maliplece, or on the front if space namits 	A. Signature X. Thursday Construction Addressee B. Received by (Printed Name) C. Date of Delivery	 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. Affacch this card to the back of the mailtinece. 	A. Signature X Munic Astronic Addresse B. Received by Control Natives C. Control Deliver
Article Addressed to:	D. Is delivery address different from item 1? T Yes If YES, enter delivery address below: T No	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different (Multerm 17 5) of C
Eva Toussaint		NM Bureau of Mines & Mineral Resources	WAINT - Campus
1/61 Colavita Reno,NV 89521	3. Service Type Certified Mail CExpress Mail Registered CE Return Receipt for Merchandise	Lynn Brandvold NM Institute of Mining & Tech Socorro, NM 87801	g ¥ ai
2-26	ery .	BI) 736	ii ivery?
	101 6804 3748	2. Article Number (fransfer from service label)	120 0001 6804 2192
5 Form 30 I I, February 2004 Domestic He	uomesuc herum heceipt	PS Form 3811, February 2004 Domestic Return Receipt	sturn Receipt 102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY A. Signature X. X. M. C. C. M. C. Agent X. M. C. Date of Deliver. B. Bacelvery address different from item 1? Tes If YES, guater tolivery address below: Do	Aburting American Aburting American Insured Mail Insured Delivery	COMPLETE THIS SECTION ON DELIVERY A. Signature X Undernal and a Addresse B. Received by (Printed Name) C. Date of Deliver LUCI JODE S (-)3-05 LUCI JODE S (-)3-05 LUCI JODE S (-)3-05 LUCI JODE S (-)3-05 LUCI JODE S (-)3-05 If YES, enter delivery address below: □ No	3. Service Type 3. Service Type 3. Service Type Express Mail 1. Certified Mail Express Mail 1. Registered Batum Receipt for Merchandis 1. Insured Mail C.O.D. 4. Restricted Delivery? C.Atra Fee) 1 Yes 7005 1.820 00011 L B04 1 1977 Pomestic Return Receipt
 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 mailplece, or on the front if space permits. 1. Article Addressed to: Lee Wilson & Associates PO BOX 931 	Santa Fe, NM 87501 3. 5 3. 5 3. 5 5. 5 5. 5 5. 5 5. 5 5. 5	 SENDER: COMPLETE THIS SECTION Scomplete 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 mailplece, or on the front if space permits. Article Addressed to: Article Addressed to: Colorado River Board of Calif. Gerald R. Zimmerman 	770 Fairmont Ave, Ste. 100 Glendale, CA 91203-1035 , \mathcal{B} \mathcal{D} - \mathcal{D} \mathcal{D} Artele Number (fransfer from service label) PS Form 3811, February 2004 Domestic R
ColMPLETE THIS SECTION ON DELIVERY A Contract of Delivery A Contract of Delivery B. Acceived by (Printed Name) B. Acceiv	4 Trified Mail □ Ex gistereed th Ba ured Mail □ C.0. sted Delivery? (Extra sted Delivery? (Extra	COMPLETE THIS SECTION ON DELIVERY A. Signature A. Signature X Mathematical Activity B. Received by (Printed Name) C. Date of Delivery B. Is delivery address different from filter 1? D. Is delivery address below: If YES, enter delivery address below: If YES, enter delivery address below:	3. Service Type 1. N 32 9. Certified Mail 1. Express Mail 1. Registered 0. Betwm Receipt for Merchandise 1. Insured Mail 1. C.O.D. 4. Restricted Delivery? (Extra Fee) 1. Yes 15 1. d 2.0 0.0 16 1. d 2.1 7. es 17 1. d 2.1 7. es 18 1. d 2.1 7. es 19 1. d 2.1 7. es 10 1. d 0.1 1. d 2.1 11 1. d 2.1 7. es
NDER: COMPLETE THIS SECTION Complete items 7, 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 maliplece, or on the front if space permits. Attach the addressed to: Attack Kendrick	25 Pasco de Peralta 25 Pasco de Peralta anta Fe, NM 87501 Reg BD J-JC Ferm 3811, February 2004 Domestic Return Receipt	NDER: 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 mailplece, or on the front if space permits. Article Addressed to: Water Resources Division State Engineer	3ataan Building Janta Fe, NM 87503 / 1

ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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.	A Signature A Signature Agent X Usunol Additessee B. Beceived by (Printed Name) [C. Date of Delivery Car Fol [C] Fol [[S] / -/ 9.20	 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 maliplece, or on the front if space permits. 	A. Signature X Definition Definition C. Date of Deliver
Article Addressed to: Falls Properties Inc	D. Is delivery address different from item 1? D^{Y} Yes If YES, enter delivery address below: \Box No P . O (3 ∂Y 36 8 6) A(b) U GULEr GUR, NM 871 76	1. Aticle Addressed to: John W Hice Jr	D. Is delivery address different from teem 1?
PO Drawer T Elephant Butte, NM 87935	3. Service Type 3. Service Type Certified Mail Express Mail Registered Effecturn Receipt for Merchandise Insured Mail C.O.D. Astricted Delivery? (Extra Fee) Description	PO BOX 943 Eunice, NM 88231	 Selvite 外Pe Selvite 外Pe End Express Mail End Express Mail Express Mail Explosition Explosition <li< td=""></li<>
Article Number (Transfer from service label) 3. Form 3811, February 2004 Domestic Return Receipt	01. 6804 3298	2. Article Number	604 3526 1026
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
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 malipiece, or on the front if space permits.	A Signature A Signature A Signature Agent A Signature Agent B. Received by (Printed Narre) C. Date of Delivery A A different from file C. Date of Delivery	 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. 	A. Signature X A. R.M. & ALOWN AND Address B. Received by (<i>Printed Name</i>) C. Date of Delive J. Address different from term 17 1 Ves
Jay Lazarus PO BOX 5727 Sonte Fe NM 87502	ON I impled searby a view of the search of t	1. Article Addressed to: Jimmie Weir PO BOX 184	
	3. Salyties Type 64 DCENTRIACTIVIAI DExpress Mail Registered DAteturn Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes	TX 78010	LMail Receipt for
Article Number (Transfer from service label) 7005	1820 1001 6804 2208	2. Attletioners Dancie from search jebop	
S Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	PS-Form 3811, February 2004 Domestic Return Receipt	im Receipt 102595-02-M-1

R,

DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
omplete items 1, 2, and 3. Also complete am 4 if Restricted Delivery is desired. int vour name and address on the reverse	A Signature Agent X Mr a Palley - Admessee	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print vour name and address on the reverse 	x 3 all Winena a Agent
that we can return the card to you. tach this card to the back of the mailplece, on the front if space back of.	C. Date	 A many your name and address on the rection of the mailplece. A thach this card to the back of the mailplece. 	Ö
ticle Addressed to:	D. Is delivery address different from item 1? TYes If YES, enter delivery address below: DNo	1. Article Addressed to:	D. Is delivery address different from the best of the
Colorado River Basin Ctrl. Forum		Chief	JAN 1 3 2006
Jack A. Barnett		Hazardous Waste Bureau Punnels Building	
106 West 500 South, Suite 101 Bountiful, UT 84010	3. Service Type Er-Certified Mail Express Mail Registered	Santa Fe, NM 87504	3. Service Type 67505 ☐ Cartified Main 675055 Mail □ Registered □ Return Receipt for Merchandis
R.D. J.Ju	ivery?	RN T-20	il İvery?
ticle Number ansfer from service label)	7005 1820 0001 6804 2130	5002	1920 0001 6804 1973
orm 3811, February 2004 Domestic Re	Domestic Return Receipt 102595-02-IM-1540	-	
NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete Items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired. Trint your name and address on the reverse	A. Signature Agent Active Agent	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A Sign Mine Mar Adams
o that we can return the card to you. ttach this card to the back of the mailplece, it on the front if space permits.		so that we can return the card to you. Attach this card to the back of the mailplece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Deliver
uticle Addressed to:	□ D. Is delivery address different from tem 1? □ Yes If YES, enter delivery address below: □ No	1. Article Addressed to:	D. Is delivery address billibely from help us the vest
nvironmental Counsel ATTN: Colin Adams	· · · · · · · · · · · · · · · · · · ·	Chief	(IAN 1 3 2006)
ublic Service Company of NM		Groundwater Bureau	\neg
14 Silver, Southwest Ibuquerque, NM 87158	3. Service Type ☐ -Certified Mail □ Express Mail □ Registered □ Return Receipt for Merchandise □ Insured Mail □ C.O.D.	Runnels Building Santa Fe, NM 87504 /	3. Service Type Contribution Contribution Contribution Contribution Contribution Contribution
RDJZ	ŝ	BD J-20	4. Restricted Delivery? (Extra Fee)
Transfer from service label) 7005	1820 0001 6804 2215	2. Article Number 700 Stransfer from service label)	7005 1820 0001 6804 2073
Form 3811, February 2004 Domestic R	Domestic Return Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-15

IDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
omplete trems 7, 2, and 3. Also complete em 4 if Restricted Delivery is desired. tint vour name and address on the reverse	A Signature Agent	 Complete <u>items 1,</u>2, and 3. Also complete item 4 if Restricted Delivery is desired. Print vour name and address on the reverse 	A. Signature D. Agent X. T.A. D. Addresse
o that we can return the card to you ttach this card to the back of the mailpiece, r on the front if snace nervive		 Attach this card to the back of the mailplece, or the form the same back of the mailplece, or the heat of the mailplece. 	d by (Printed Name) C. D:
ticle Addressed to:	D. Is delivery address different from item 1? TYes If YES, enter delivery address below: TNo	1. Article Addressed to:	3 E
Tom Kennan		-	SANTAT SANTAT SANTAT
PO BOX 202 Eunice, NM 88231	Express Mail C Return Receipt for Merchandise	Santa Fe, NM 87504	3. Service Type Certified Mail CEXpress Mail Registered CL Return Receipt for Merchandis
T-36	U Insured Mail U C.O.D. 4. Restricted Delivery? (Extra Fee) D Yes	6-25-26	eny?
ratcle Number 1 1 1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	320°001.6804 3540	2. Article Number (fransfer from service label) 7005 1.B	1820 0001 6804 2062
orm 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-154
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete 'traffits 1, 2, and 3. Also complete term 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 snace nemits.	A Signature X ARA Set DAgent Addressee B Received by (<i>Printed Name</i>) C. Date of Delivery	 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, 	A. Signature X. A. M. M. A. Baent B. Received by (Paped Mame) C. Date of Delive
Article Addressed to:	D. Is delivery address different from item 1? Tes	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1? TY Ves
Joel W Sisk	9000	Phifer Hollis	
PO BOX 1013 Eunice,NM 88231	3. Service Type Certified Mail Express Mail Registered Registered Insured Mail Insured Mail Insured Mail C.O.D.	PO BOX 38 Eunice, NM 88231	3. Service Type D Certified Mail D Express Mail Registered D Return Receipt for Merchandis Insured Mail D C.O.D.
J-26	4. Restricted Delivery? (Extra Fee)	7-26	ery?
	גממזיעה אסטי רסטס מפאנעניין	2. Articlé Number :	1820_0001_6804_3601
Eorm 3844, February 2004	Domestig Return Receipt	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-15

NDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Jornplete items 1, 2, and 3. Also complete tem 4 if Restricted Delivery is desired.	Signatur	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.	A Spent of Agent
Print your name and address on the reverse	- (July)-	Print your name and address on the reverse	
Attach this card to the back of the malipiece,	B. Received by (Printed Name) C. Date of Delivery	Attach this card to the back of the mailplece,	B-Hecelved by (Printed Name) C. Date of Deliver
or on the front if space permits.	D In Addition of Harmon of Harmon Party in March	or on the front if space permits.	ddraes different f
Article Addressed to:		1. Article Addressed to:	
			(0) (0) (0) (0) (0) (0) (0) (0) (0) (0)
Bruce S. Garher		State Parks & Recreation	1
Attorney at Law		Director	
PO BOX 0850	3. Service Turne	1220 S St Francis	3. Service Type Santh
Santa Fe, NM 87504-0850		Santa Fe, NM 87505	Certified Mail
BN 7-26	4. Restricted Delivery? (Extra Fee)	R.D. TDL	4. Restricted Delivery? (Extra Fee)
		2. Article Number	
1 : 			1 0001 6804 223
Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-1640	PS Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-15 ⁴
ENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
Complete Home 1 9 and 2 Alec complete	A Signature	Complete items 1, 2, and 3. Also complete	A. Signature
comprete trents 1, 4, and 3. Also comprete item 4 if Restricted Delivery is desired.	Å	item 4 if Restricted Delivery is desired.	X Tati Kac Datasse
Print your name and address on the reverse so that we can rather the card to volu		so that we can return the card to you.	B. Received by (Printed Name) C. Date of Deliver
Attach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery	Attach this card to the back of the mailplece, or on the front if space permits.	catilitee
OF OF LIPE FORT IL SPACE PETITIES.	D. Is delivery address different from item 1? D Yes	1 Articla Addressad to:	2
Article Addressed to:	If YES, enter delivery address below: 🗖 No		If YES, enter delivery address below:
Department of Game & Fish		Randy Hicks	
	(co) (co)	VIEW NUMBER OF ALL AND	
Santa Fe, NM 87503	隆星	Aubuquet of the state	3. Service Type
	Registered Receipt for Merchandise		C Registered C Receipt for Merchandis
	C Insured Mail C.O.D.		4 Bestricted Deliveror <i>Extra Feel</i>
K1) J 20	4. Restricted Delivery? (Extra Fee)	and when a second	
Article Number	, an nnn, 6804 2079	2. Autor Number Service Jacon Call 2 1.6	GOS TA是他他品印容器和全组和文
1		lary 2004	um Receipt 102595-02-M-15/
5 Form 3011, February 2004	umestic Heturn Heceipt	·	

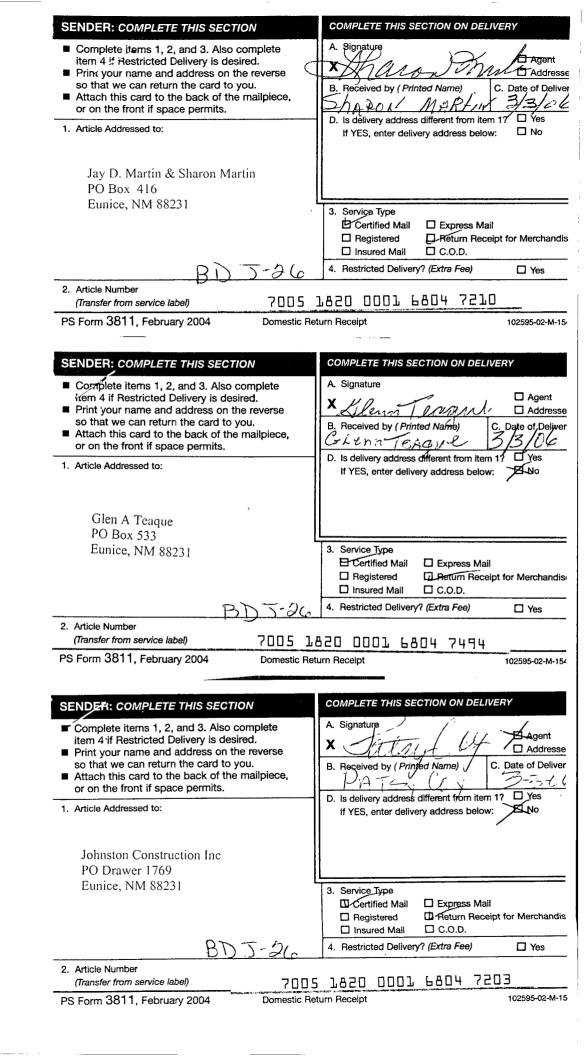
	ана ^с ана страната стр				
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY				
omplete items 1, 2, and 3. Also complete im 4 if Restricted Delivery is desired. int your name and address on the reverse that we can return the card to you. tach this card to the back of the mailpiece,	A Signature A Agent Addressee B. Received by (Printed Name) C. Date of Delivery				
on the front if space permits.	D. Is delivery address different from item 1?				
Aaria Collins 300 Rincor De Ramos					
Rio Rancho, NM 87124	Service Type Defitited Mail Express Mall Registered Insured Mail C.O.D.				
BD J-26	4. Restricted Delivery? (Extra Fee)				
rticle Number ;	<u>5 1820 0001 6804 7197</u>				
orm:381.1, February 2004 Domestic Retu	um Receipt 102595-02-M-1540 ¹				

•

. .

U.S. Postal Service ELIL CERTIFIED MAIL RECEIPT (Do estic Mail Only; No Insurance Coverage Provided) 6804 S E CONTRA Postage 1000 Corby Certified Fee 210N Return Receipt Fee (Endorsement Required) Posta 900 000 000 000 2 5.423.43 5.423.63 1,820 . 8874D Restricted Delivery Fee (Endorsement Required) USPS (X.) \$ ostane & Fee 7005 187 187 181 12. C. Sent To BDJ-2 Richard F Anderson 読み続 Street, Apt. No. or PO Box No. 2900 Vista Del Rey #20C 电化电子 医鼻子 City, State. ZIP+4 Albuquerque, NM 87112 079 450, X04 77 1 PS Form 3800, June 2002 Inst C Agent Addressee Date of Delivery 102595-02-M-1540 Chreatum Receipt for Merchandise 10=2:500 9777777 2 9 ú 2900 Vista Del Rey #20C 37112 ⁸ ₹ □ □ D Yes UNCLAN in t Richard F Anderson COMPLETE THIS SECTION ON DELIVERY D. Is delivery address different from Item 12 102¥ ċ 'NCS If YES, enter delivery address below: C Express Mail (The st N.t Albuquerque E212 4. Restricted Delivery? (Extra Fee) <u>П с.о.р.</u> ELIL B. Received by (Printed Name) 6804 7005 1820 0001 6804 EP Centified Mail Registered Insured Mail Service Type A. Signature 1920 0281 Domeștic Return Receipt × ró. **UNIER** MCLANNER 7-20 Attach this card to the back of the mailplece, 7005 Print your name and address on the reverse Complete items 1, 2, and 3. Also complete SENDER: COMPLETE THIS SECTION Item 4 if Restricted Delivery is desired. so that we can return the card to you. BD 17---147 00 Vista Del Rey #20C PS Form 3811, February 2004 [1] Mouquerque, NM 87112 or on the front if space permits. ard F Anderson (Transfer from sarvice label) **GE** Operating Company ġ All ... CITATION OF 2. Article Number Article Hobbs, NM 88240 122 West Taylor <u>L</u>_ . 5 C

а. 45 U.S. Postal Service 71.80 IFIED MAIL RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) 6804 S E 1000 CONTRAC **Certified Fee** Return Receipt Fee lorsement Required) С ななななかないない 1,820 Restricted Delivery Fee (Endorsement Required) NOL OPER INFO MAR 1 3 Year Total Postage & Fees \$ 7005 MUSBER NIN ģ Э And destriction of the first of E A Smith <u>Seo 210</u> Street, Apt. No. or PO Box No. Stre Apt. No., PO Box 97 City, State, ZIP Eunice, NM 88231 110+X01 X.1 June 200 rse for Instr Date of Deliver C Express Mail C Return Receipt for Merchandi 102595-02-M-15 C Agent ⁸ ₹ □ □ 1820 0001 6804 7180 0063 # **C**4 <u>گر</u> Eunice, NM 8823 COMPLETE THIS SECTION ON DELIVERY 121 121 121 121 D. Is delivery address different from item 1? PO Box 97 ර E A Smith 71.80 If YES, enter delivery address below: 4. Restricted Delivery? (Extra Fee) D C.O.D. B, Received by (Printed Name) 6804 Certified Mail Registered Insured Mail ORDER EXPIRED FORWARDING 7005 1820 0001 Service Type PLACE STICKER AT TOP OF ENVELOPE TO THE RIGH A. Signature Domestic Return Receipt × ė 1-7-26 Attach this card to the back of the mailpiece, Print your name and address on the reverse Complete items 1, 2, and 3. Also complete X Not Deliverable As Addressed 0 5 D ... a ... For lease Address SENDER: COMPLETE THIS SECTION Item 4 if Restricted Delivery is desired so that we can return the card to you. ロ No Such Street ロ Rumbuf L 2 2 D Ever Criss 13 - 110 Critica D Unclaimed D Refuead Attempted - Not Known D Noved, Left No Address or on the front if space permits. D No that Received PS Form 3811, February 2004 D Vacant D Marible Vinsufficient Address Unable To Forward D Foolds , Due . (Transfer from service label) Eunice, NM 88231 Article Addressed to: **RICE** Operating Company PO Box 97 E A Smith 1 2. Article Number Hobbs, NM 88240 122 West Taylor



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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: Mitchell Tyree P.O. Box 665 	A Signature X Mith Type Agent B. Received by (Printed Name) Mitch TUYEC 4306 D. Is delivery address different from item 12 Yes If YES, enter delivery address below: No
Eunice, NM 88231	Service Type Service Type Service Type Service Type Service Type Service Mail Registered SkReturn Receipt for Merchandise Insured Mail C.O.D.
3-26	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7005 18	20 0001 6804 5001
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature
1. Article Addressed to: Tommie Williams P.O. Box 1355	D. Is delivery address different from item 1? If YES, enter delivery address below: No
Eunice, NM 88231	3. Service Type XI Certified Mail Express Mail Registered XI Return Receipt for Merchandlse Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
2. Article Number 700	15 1820 0001 6804 8101
(Transfer from service label)	

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

RICE Operating Company

122 West Taylor • Hobbs, New Mexico 002 Phone: (505)393-9174 • Fax: (505) 397-1471 2005 APR 24 PM 12 47

CERTIFIED MAIL RETURN RECIEPT NO. 7005 1820 0001 6804 7715

April 17, 2006

Mr. Wayne Price New Mexico Energy, Minerals, & Natural Resources Oil Conservation Division. Environmental Bureau 1220 S. St. Francis Drive Santa Fe, New Mexico 87504

> RE: BD jct. J-26 PUBLIC NOTIFICATION NMOCD CASE #1R0426-40



Mr. Price:

In accordance with Rule 19 (Section 19.15.1.19 NMAC, Subsection G) Public Notice requirements, please accept the enclosed copies of proof that the appropriate individuals and entities were notified of the Stage 1 Abatement Plan submitted by the consulting firm of R.T. Hicks Consultants of Albuquerque for the J-26 Junction Box Site.

Notices were sent via certified mail to landowners within the prescribed radius. Mailings were also sent to the Lea County Commission and the list of Interested Parties found on the New Mexico Oil Conservation Division (OCD) website. Two mail deliveries could not be confirmed so the document was sent via electronic mail (e-mail). Eighty-five total notifications were sent and eleven were not able to be delivered; some were attempted two or more times.

As directed by OCD, the Stage 1 Abatement Plan notifications were published in the Albuquerque Journal and the Hobbs News-Sun newspapers. Affidavits for these publications are enclosed.

ROC requests that OCD consider public notice complete for this site. Should you have any further questions regarding this request, do not hesitate to contact me. Thank you for your consideration.

ROC is the service provider (operator) for the Blinebry-Drinkard (BD) SWD System and has no ownership of any portion of the pipeline, well, or facility. The System is owned by a consortium of oil producers, System Partners, who provide all operating capital on a percentage ownership/usage basis.

RICE OPERATING COMPANY

Knistin Farris Pope

Kristin Farris Pope Project Scientist

enclosures:

summary table of notifications, newspaper affidavits, return receipt copies, e-mail copies

cc: CDH, Hicks Consultants, file, Daniel Sanchez (OCD),

Mr. Chris Williams OCD, District I Office 1625 N. French Drive Hobbs, NM 88240

AFFIDAVIT OF PUBLICATION

State of New Mexico, County of Lea.

I, Daniel Russell

Editor

of the Hobbs News-Sun, a newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not a supplement thereof for a period

of _____

1 issue(s).

Beginning with the issue dated5

January 14 , 2006 and ending with the issue dated

January 14 Editor

Sworn and subscribed to before

17th day of

January 2006 Notary Public.

My Commission expires February 07, 2009 (Seal)



OFFICIAL SEAL DORA MONTZ NOTARY PUBLIC STATE OF NEW MEXICO My Commission Expires

This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937, and payment of fees for said publication has been made. 01104367000 67535573 RICE OPERATING COMPANY 122 WEST TAYLOR HOBBS NM 88240

LEGAL NOTICE January 14, 2006

NOTICE OF PUBLICATION

State of New Mexico Energy, Minerals and Natural Resources Department Oil Conservation Division

Notice is hereby given that pursuant to New Mexico Oil Conservation Division Regulations, the following Stage 1 and 2 Abatement Plan has been submitted to the Director of the Oil Conservation Division, 1220 S. St. Francis Dr., Santa Fe, New Mexico 87504, Telephone (505) 476-3440:

Rice Operating Company, Carolyn Doran Haynes, Engineering Manager, Telephone (505) 393-9174, 122 West Taylor, Hobbs, New Mexico 88240, has submitted a Stage 1 and 2 Abatement Plan for the J-26 Junction Box site, Blinebry Drinkard Salt Water Disposal System located 1 mile north-northwest of the intersection of NM State Highway 18 and County Highway 176 near Eunice, NM in the NWE 1/4, SE 1/4 of Section 26, Township 21 South, Range 37 East, Lea County, New Mexico. Rice Operating Company operates a saltwater disposal system at the site. Chlorides and total dissolved solids have been observed in the ground water and remedial efforts have been ongoing since discovery. The Stage 1 and 2 Abatement Plan addresses further proposed actions for site closure.

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The Stage 1 and 2 Abatement Plan may be viewed at the above address or at the Oil Conservation Division District Office, 1625 N. French Drive, Hobbs, New Mexico 88240, Telephone (505) 393-6161 between 8:00 a.m. and 4:00 p.m., Monday through Friday. Prior to ruling on any proposed Abatement Plan, the Director of the Oil Conservation Division shall allow at least thirty (30) days after the date of publication of this notice during which written comments may be submitted to him. #22070

STATE OF NEW MEXICO County of Bernalillo SS

Bill Tafoya, being duly sworn, declares and says that he is Classified Advertising Manager of The Albuquerque Journal, and that this newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Session Laws of 1937, and that payment therefore has been made of assessed as court cost; that the notice, copy of which is hereto attached, was published in said paper in the regular daily edition, for first publication being on times, the the 14 _day of 20 Grand the subsequent consecutive publications on 20_ Sworn and subscribed to before me, a Notary Public, in and for the County of Bernalillo and State of New Mexico this \mathcal{Q} day of pmof $20 \bigcirc$ PRICE Statement to come at end of month. ACCOUNT NUMBER C32ST Commission Мy CLA-22-A (R-1/93)

State of New Mexico Energy, Minerals and Natural Resources Department Oil Conservation Division Notice is hereby given that pursu-Notice is hereby given that pursu-

NOTICE OF PUBLICATION

Notice is hereby given that pursuant to New Mexico Oil Conservation Division Regulations, the foilowing Stage 1 and 2 Abatement Plan has been submitted to the Director of the Oil Conservation Division, 1220 S. St. Francis Dr., Santa Fe, New Mexico 87504, Telephone (505) 476-3440:

Rice Operating Company, Carolyn Doran Haynes, Engineering Manager, Telephone (505) 393-9174, 122 West Taylor, Hobbs, New Mexico 88240, has submitted a Stage 1 and 2 Abatement Plan for the J-26 Junction Box site, Blinebry Drinkard Salt Water Disposal System, located 1 mile northnorthwest of the intersection of NM State Highway 18 and County Highway 176 near Eunice, NM in the NWE ¼, SE ¼ of Section 26, Township 21 South, Range 37 East, Lea County, New Mexico, Rice Operating Company operates a saltwater disposal system at the site. Chlorides and total dissolved solids have been observed in the ground water and remedial efforts have been ongoing since discovery. The Stage 1 and 2 Abatement Plan addresses further proposed actions for site closure.

Any interested person may obtain further information from the Oil Conservation Division and may submit written comments to the Director of the Oil Conservation Division at the address given above. The Stage 1 and 2 Abatement Plan may be viewed at the ebove address or at the Oil Conservation Division District Office, 1625 N. French Drive, Hobbs, New Mexico 88240, Telephone (505) 333-6161 between 8:00 a.m. and 4:00 p.m., Monday through Friday. Prior to ruling on any proposed Abatement Plan, the Director of the Oil Conservation Division shall allow at least thirty (30) days after the date of publication of this notice during which written comments may be submitted to him. Journal: January 14, 2006

<u>BD jct. J-26</u>

2

Unit 'J', Sec. 26, T21S, R37E

Public Notice Mailings (1/10/2005) Stage 1 and 2 Abatement Plan

		Delivery Status]	
	Landowner or Interested Party	Delivered US Mail	Delivered E-mail	Not Delivered	Comments
1	City of Eunice P.O. Box 147 Eunice, NM 88260	x			Return Receipt Received
2	Delrose Scott 2000 N. Fowler Hobbs, NM 88220		Х		Unclaimed Mail; e-mailed 4/5/2006
3	Geraldine Osborne P.O. Box 1285 Jal, NM 88252			X	Return receipt was not received
4	Patricia House P.O. Box 3715 Midland, TX 79702	x			Return Receipt Received
5	Richard Don and Cathy Jones P.O. Box 21 Eunice, NM 88231	x			Return Receipt Received
6	William O. Stephens P.O. Box 115 Eunice, NM 88231	х			Return Receipt Received
7	Lea County Administration Office Attn: Lue Ethridge 100 N. Main Street, Suite 4 Lovington, NM 88260	x			Return Receipt Received
8	Texas - New Mexico Railroad P.O. Box 409783 Atlanta, GA 30384 - 9782	X			Return Receipt Received
9	Jonhston Construction Inc P.O. Drawer 1769 Eunice, NM 88231	x			Return Receipt Received
10	Gilbert's Leasing Service Inc. P.O. Box 1597 Lovington, NM 88260	х			Return Receipt Received
11	Fall Properties Inc. P. O. Drawer T Elephant Butte, NM 87935	х			Return Receipt Received
12	Richard F. Anderson 2900 Vista Del Rey #20C Albuquerque, NM 87112			х	Undeliverable mail, not able to forward; re-sent 3/1/06, Unclaimed
13	Kenneth V. Blackwell P.O. Box 53180 Lubbock, TX 79453	X			Return Receipt Received

	B. W. Caperton	<u> </u>		
14	P.O. Box 391	x		Datum Dagaint Dagained
14		A		Return Receipt Received
	Eunice, NM 88231 Maria Collins			· · · · · · · · · · · · · · · · · · ·
15	Johnny Collins	X		Return Receipt Received
	300 Rincor De Ramos			
	Rio Rancho, NM 87124			
	New Mexico State Hwy. & Trans. Dept.			
16	P. O. Box 1149	X		Return Receipt Received
	Santa Fe, NM 87504			
	Calico Properties LLC			
17	500 Zia Drive	x		Determ Dessint Dessived
17		Λ		Return Receipt Received
	Hobbs, NM 88240			
	Mark Owen Estate			
18	William Owen			Return Receipt Received
10	P.O. Box 115			Return Receipt Received
	Eunice, NM 88231			
	Wayne Aderson			
19	P.O. Box 1491	X		Return Receipt Received
	Eunice, NM 88231			
•	Runco Inc.			
20	8100 W. Alabama	X		Return Receipt Received
	Hobbs, NM 88240			
	Joe Alden Bayes			
21	P.O. Box 173			Return Receipt Received
21	Eunice, NM 88231			
				· · · · · · · · · · · · · · · ·
22	Mary E. Brewer ET AL	N N		
22	P.O. Box 821	X		Return Receipt Received
	Eunice, NM 88231			
	Joe Allen Caperton			
23	P.O. Box 1028		1 1	Return Receipt Received
23	Eunice, NM 88231			
	Royce Crowell			
24	P.O. Box 146			Return Receipt Received
	Eunice, NM 88231			
	James E. Gardner			
25	P. O. Box 1244	X		Return Receipt Received
	Eunice, NM 88231			1
	Glen A. Teaque			
26	P.O. Box 533	X		Return Receipt Received
	Eunice, NM 88231			
	Eddie J. Harpier			· · · · · · · · · · · · · · · · · · ·
27	P.O. Box 124	X		Return Receipt Received
_/	Eunice, NM 88231			
	Patricia House ET AL			,
20				Determ Descist D
28	P.O. Box 3715	X		Return Receipt Received
	Midland, TX 79702			
	Richard Don Jones			
29	P.O. Box 21	X		Return Receipt Received
	Eunice, NM 88231			Retain Receipt Received
		_		
	Elmer K. Logan			Undeliverable mail, not
3 0	P.O. Box 21		X	able to forward

	Patrick McCasland			
*	Linda L. McCasland	V		
31	P.O. Box 218	X		Return Receipt Received
	Eunice, NM 88231			
	G. Nicely ET UX Linda			
32	Linda Nicely			Unclaimed mail
52	P.O. Box 567		А	Chelanned man
	Eunice, NM 88231			
	Eva Owens			
33	Heirs Of Stephens FM ATT	X		Return Receipt Received
55	P.O. Box 115	24		Return Receipt Received
	Eunice, NM 88231			
a :	Bart D. Parker			
34	P.O. Box 846	X		Return Receipt Received
2 2	Eunice, NM 88231			-
	Jose G. Gonzalez			
35	P.O. Box 462		X	Undeliverable mail, not
33	Eunice, NM 88231			able to forward
	I			
	Jose Hernandez			
36	P.O. Box 413	X		Return Receipt Received
	Eunice, NM 88231			
27	Phifer Hollis			
37	P.O. Box 38	X		Return Receipt Received
	Eunice, NM 88231			
20	H. J. Jenkins		v	Undeliverable mail, not
38	P.O. Box 97		X	able to forward
	Eunice, NM 88231		 	
	Tom Kennan			
39	P.O. Box 202	X		Return Receipt Received
	Eunice, NM 88231			
	Jimmy D. Martin			Re-sent 3/1/06
40	P.O. Box 416	X		
	Eunice, NM 88231			Return Receipt Received
	Eva Owens			
41	William Owen Stephens	X		Return Receipt Received
41	P.O. Box 115	А		Return Receipt Received
	Eunice, NM 88231			
	Kathleen Parker			
42	P.O. Box 1291			Return Receipt Received
	Eunice, NM 88231			-
	Duayne Parker			
	Eoyce Crowell			
43	P.O. Box 1334	X		Return Receipt Received
	Eunice, NM 88231			
	· · · · · · · · · · · · · · · · · · ·			
44	Bobby L. Pearce Trust			Datum Dagaint Dagained
44	P.O. Box 316	X		Return Receipt Received
	Eunice NM 88231			
	W. H. Robbins			
45	P.O. Box 1643	X		Return Receipt Received
	Eunice, NM 88231			
		I I		

¥ `

Ì

۰ 46	Joel W. Sisk P.O. Box 1013 Eunice, NM 88231	x		Return Receipt Received
47	Robert Soukup P.O. Box 1094 Eunice, NM 88231		X	Undeliverable mail, not able to forward
48	Carol Thorton P.O. Box 3 Tex - NM Camp Eunice, NM 88231	x		Return Receipt Received
49	Mitchell R. Tyree P.O. Box 665 Eunice, NM 88231	x		Return Receipt Received
50	Ruth L. Willard P.O. Box 589 Eunice, NM 88231	х		Return Receipt Received
51	Tommie Williams P.O. Box 1355 Eunice, NM 88231	X		Return Receipt Received
52	Traci Reams 2000 N. Fowler Hobbs, NM 88240		x	Unclaimed mail
53	Richard Robinson P.O. Box 1334 Eunice, NM 88231	x		Return Receipt Received
54	E. A. Smith P.O. Box 1778 Eunice, NM 88231		х	Undeliverable mail, not able to forward; re-sent 3/1/06, not deliverable as addressed/insufficient address
55	John B. Stewart P.O. Box 657 Eunice, NM 88231		x	Undeliverable mail, not able to forward
56	Eva Toussaint 1761 Colavita Reno, NV 89521	X		Return Receipt Received
57	Jimmie Weir P.O. Box 184 Center Point, TX 78010	x		Return Receipt Received
58	Attorney General's Office P.O. Box 1508 Santa Fe, NM 87504	X		Return Receipt Received

• •

• 59	Bruce S. Garber Attorney at Law P.O. Box 0850 Santa Fe, NM 87504-0850 Email: bsg@garbhall.com	x		Return Receipt Received
60	State Director Bureau of Land Management P.O. Box 27115 Santa Fe, NM 87502-0115	x		Return Receipt Received
61	Chief Groundwater Bureau Runnels Building Santa Fe, NM 87504 Email: Bill.Olsen@state.nm.us	x		Return Receipt Received
62	Chief Hazardous Waste Bureau Runnels Building Santa Fe, NM 87504 E-Mail: James.Bearzi@state.nm.us	x		Return Receipt Received
63	Gerald R. Zimmerman Colorado River Board of Calif. 770 Fairmont Ave. Ste 100 Glendale, CA 91203-1035 E-mail: jcc_crb@pacbell.net	x		Return Receipt Received
64	Jack A Barnett Colorado River Basin Ctrl. Forum 106 West 500 South Suite 101 Bountiful, UT 84010 Email: James.Bearzi@state.nm.us	x		Return Receipt Received
65	Department of Game & Fish Director Villagra Building Santa Fe, NM 87503	X		Return Receipt Received
66	Dr. Harry Bishara P.O. Box 748 Cuba, NM 78013	X		Return Receipt Received
67	Colin Adams Environmental Counsel Public Service Company of new Mexico 414 Silver, Southwest Albuquerque, NM 87158 Email: cadams@pnm.com	x		Return Receipt Received
68	Mike Schulz International Technology Corp. 5301 Central Avenue, N.E. Suite 700 Albuquerque, NM 87108 E-mail: mschulz@theitgroup.com		x	Undeliverable mail, not able to forward
69	Jay Lazarus P.O. Box 5727 Santa Fe, NM 87502 E-mail: Lazarus@glorietageo.com	x		Return Receipt Received

. •

	·····		
. 70	Ken Marsh CRI PO BOX 388 Hobbs NM 88240 E-maíl: ken@crihobbs.com	X	Return Receipt Received
71	Lee Wilson & Associates P.O. Box 931 Santa Fe, N.M. 87501 E-mail: lwa@lwasf.com	x	Return Receipt Received
72	Ned Kendrick Attorney at Law 325 Paseo de Peralta Santa Fe, NM 87501 E-mail: ekendrick@montand.com	x	Return Receipt Received
73	Secretary New Mexico Environment Department P.O. Box 26110 Santa Fe, NM 87504 E-mail: Cathy.Tyson@state.nm.us	x	Return Receipt Received
74	Lynn Brandvold NM Bureau of Mines & Mineral Resources NM Institute of Mining & Tech. Socorro, NM 87801	x	Return Receipt Received
75	NM Oil & Gas Association P.O. Box 1864 Santa Fe, NM 87504-1864	x	Return Receipt Received
76	Randy Hicks E-mail: r@rthicksconsult.com	x	Return Receipt Received
77	Soil and Water Conservation Bureau New Mexico Department of Agriculture Programs and Resources Division Box 30005/APR Las Cruces, NM 88003-8005	x	Return Receipt Received
78	Chris Shuey Southwest Research & Information Center P.O. Box 4524 Albuquerque, NM 87106 E-mail: sricdon@earthlink.net	x	Return Receipt Received
79	Ron Dutton Southwestern Public Service P.O. Box 1261 Amarillo, Texas 79170 E-mail: ron.dutton@xcelenergy.com	x	Return Receipt Received
80	Elmo Baca State Historic Preservation Officer 228 East palace Avenue Villa Rivera Room 101 Santa Fe, NM 87503 Wishes to be notified via regular mail	x	Return Receipt Received
81	Director State Parks & Recreation 1220 S. St. Francis Santa Fe, NM 87505	x	Return Receipt Received

.

82	Field Supervisor US Fish & Wildlife Service 2105 Osuna Road, Northeast Albuquerque, NM 87113-1001	x			Return Receipt Received
83	Regional Forester USFS Regional Office 517 Gold Avenue SW Albuquerque, NM 87102 E-mail: cgarcia@fs.fed.us		х		Undeliverable mail, not able to forward; e-mailed 4/10/2006
84	State Engineer Water Resources Division Bataan Building Santa Fe, NM 87503	x			Return Receipt Received
85	William Turner New Mexico Trustee for Natural Resources C/O American Ground Water Consultants 610 Gold St. SW, Suite 111 Albuquerque, NM 87102	x			Return Receipt Received
	TOTALS	72	2	11	

. •

Kristin Pope

From:	"Kristin Pope" <kpope@riceswd.com></kpope@riceswd.com>
To:	<gscott4444@aol.com></gscott4444@aol.com>
Cc:	"Ron Anderson" <randerson@riceswd.com></randerson@riceswd.com>
Sent:	Wednesday, April 05, 2006 2:03 PM
Attach:	J26_Public_Notice.doc
Subject:	J-26 Public Notice

Mrs. Scott:

In accordance with the NMOCD Rule 19 Public Notice requirements, please find the attached public notification document. This document was originally mailed to you on January 10, 2006 but a the two attempted mailing were left unclaimed. Please contact ROC or NMOCD with any comments. Thank you.

Kristin Farris Pope Project Scientist RICE Operating Company Hobbs, New Mexico (505) 393-9174

Kristin Pope

From:	"Kristin Pope" <kpope@riceswd.com></kpope@riceswd.com>
To:	<cgarcia@fs.fed.us></cgarcia@fs.fed.us>
Sent:	Monday, April 10, 2006 2:44 PM
Attach:	J26_Public_Notice.doc
Subject:	Rule 19 Public Notice (J-26)

Regional Forester:

ł

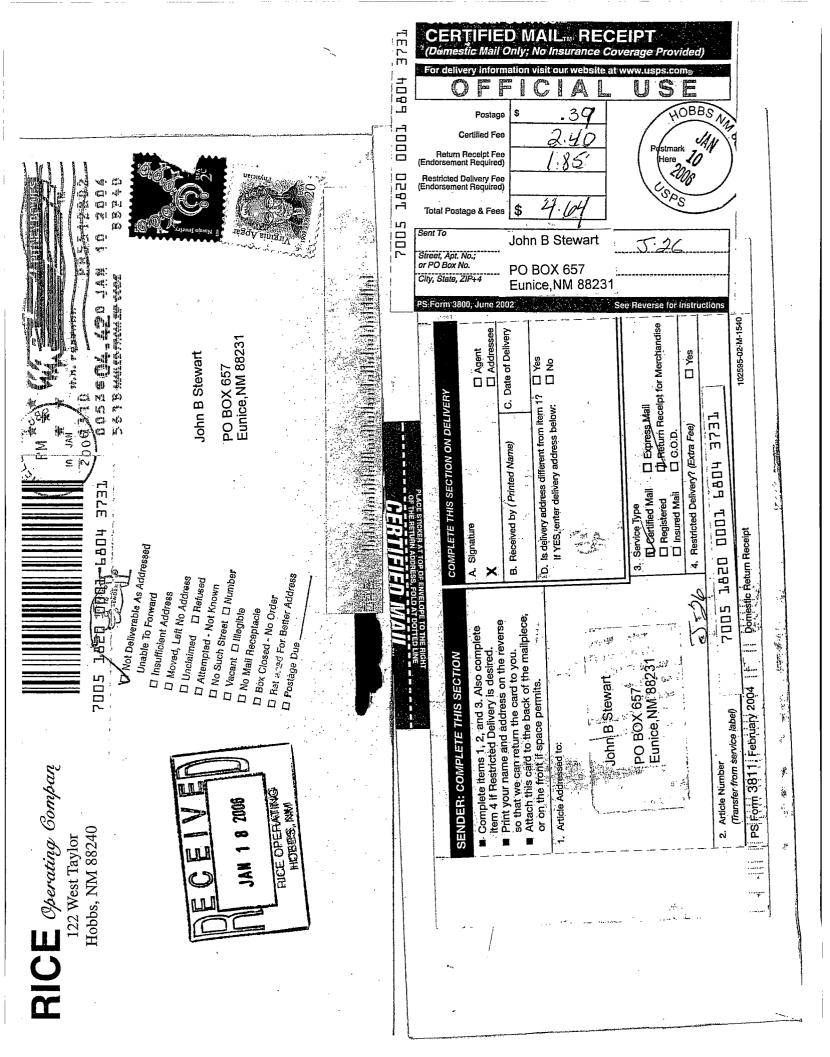
In accordance with the NMOCD Rule 19 Public Notice requirements, please find the attached public notification document. This document was originally mailed to you on January 10, 2006 but a return receipt was not received. Thank you.

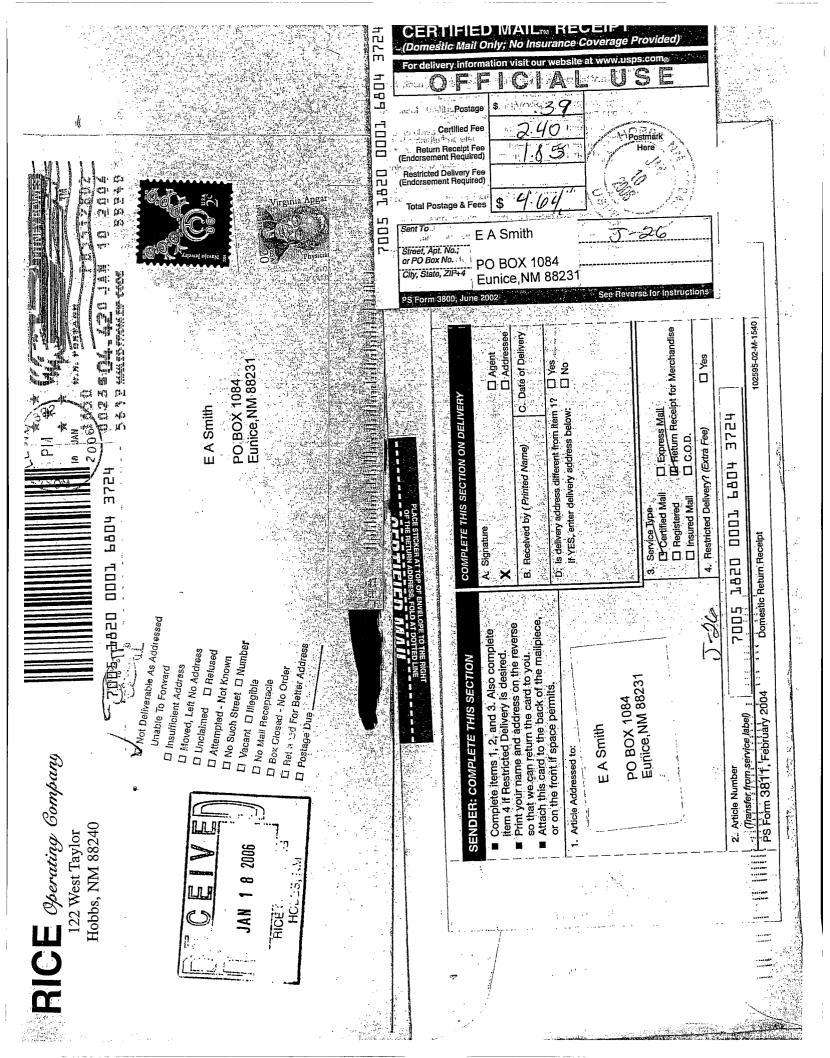
Kristin Farris Pope Project Scientist RICE Operating Company Hobbs, New Mexico (505) 393-9174

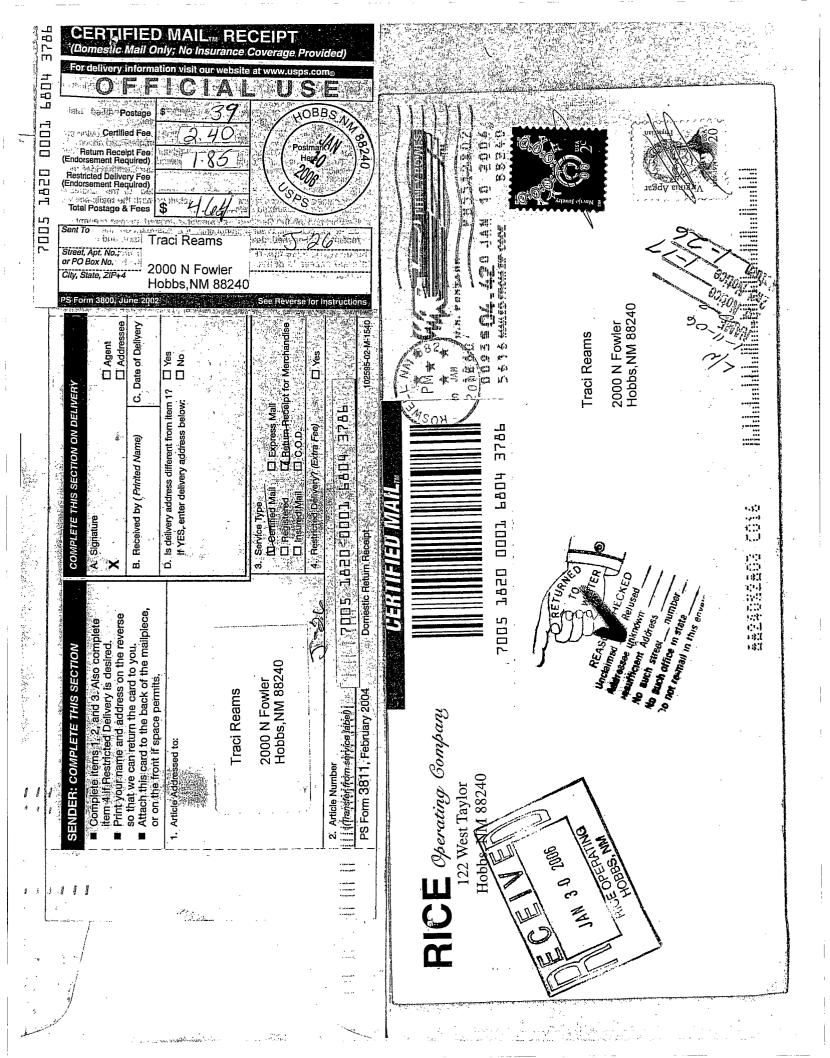
4/10/2006

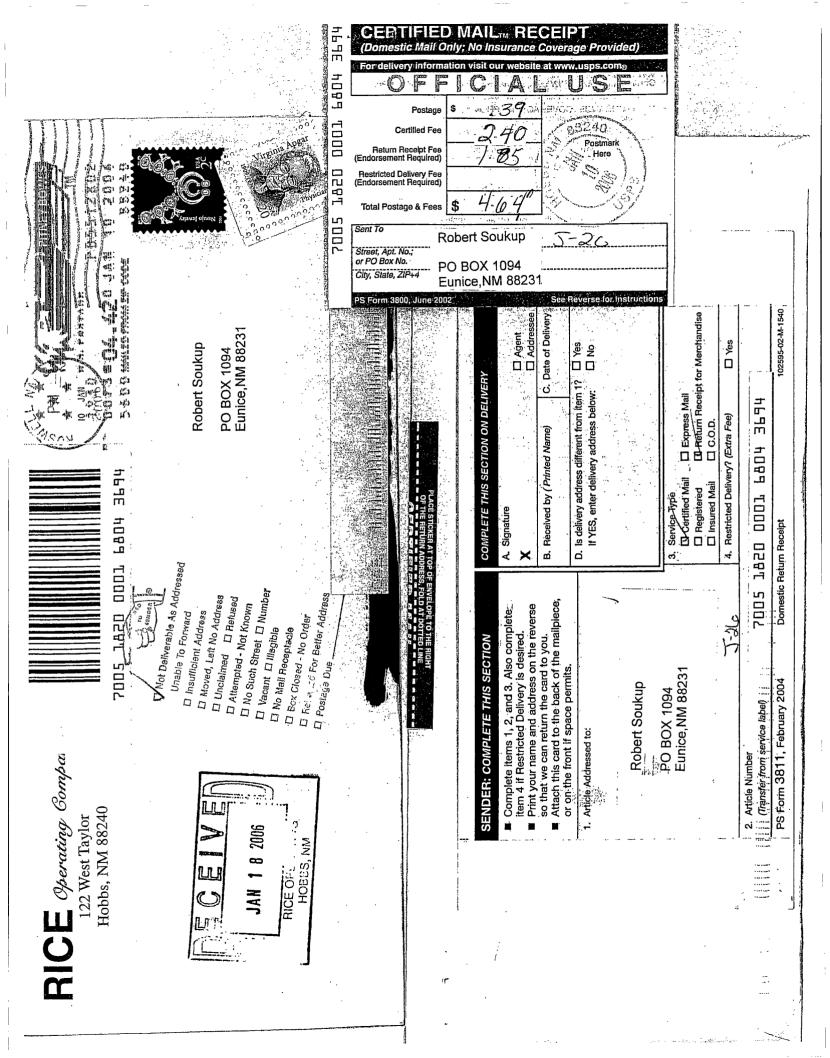
REC 1000 2109 RTIFIED MAIL С Only: No Insurance 0.0 6 in the second 6004 Postage 1000 Certified Fee (. 9240 Postmark क है। क क क क क क क Here Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required) 1.620 -Ç-1 1 \$ Total Postage & Fees 7005 Introduction and a contraction of the second s USFS Regional Office BD Sent To WF 079" Street, Apt. No.; or PO Box No. Reginal Forester J-26 517 Gold Avenue SW City, State, ZIP+4 Albuquerque, NM 87102 KUVANDA 'N'H PS Form 3800 ÷ × JUS SOOD 1823 1875 1883 1883 102595-02-M-1540 ☐ Agent □ Addressee C. Date of Delivery La Return Receipt for Merchandise Albuquerque, NM 87102 D Yes FURNAR ⊡ Yes ² Z USFS Regional Office 517 Gold Avenue SW 1 D. Is delivery address different from item 12 COMPLETE THIS SECTION ON DELIVERY **Reginal Forester** 5 If YES, enter delivery address below: 6604 2109 7005 1820 0001 6804 2109 Express 1 4. Restricted Delivery? (Extra Fee) B. Received by (Printed Name) 「「「「「「「「「「「「「」」」」」 C Registered Lig-Certified Mail koos, lakzo, dool. Service Type A. Signature **Domestic Return Receipt** × 3) ILI II Attach this card to the back of the malipiece. RICE OPERATING 2006 Print your name and address on the reverse and 3. Also complete HOBBS, NM 23 Item 4 if Restricted Delivery is desired. so that we can return the card to you. SENDER: COMPLETE THIS SECTION CT J20 or on the front if space permits. JAN C (Transfer from service label) February 2004 Albuquerque, NM 87102 RICE Operating Comp. นม USFS Regional Office 517 Gold Avenue SW 1. Article Addressed to: Reginal Forester Hobbs, NM 88240 122 West Taylor Complete iter 2. Article Numbe PS Form 381

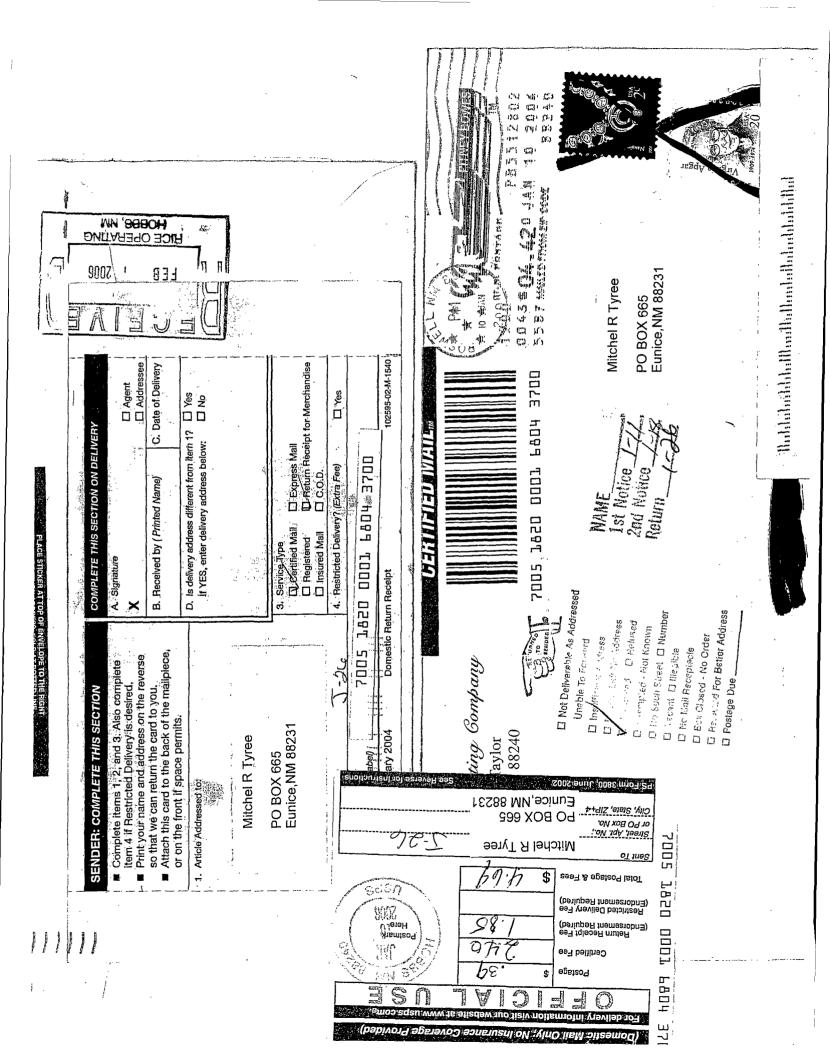
PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT



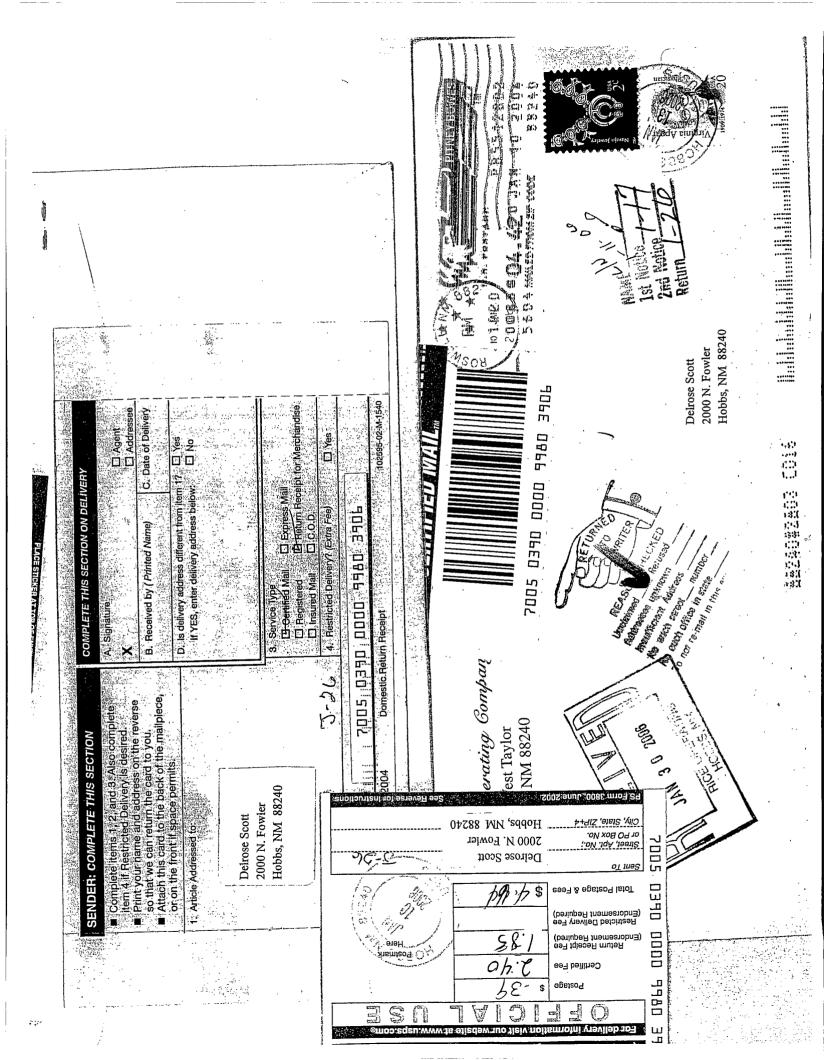


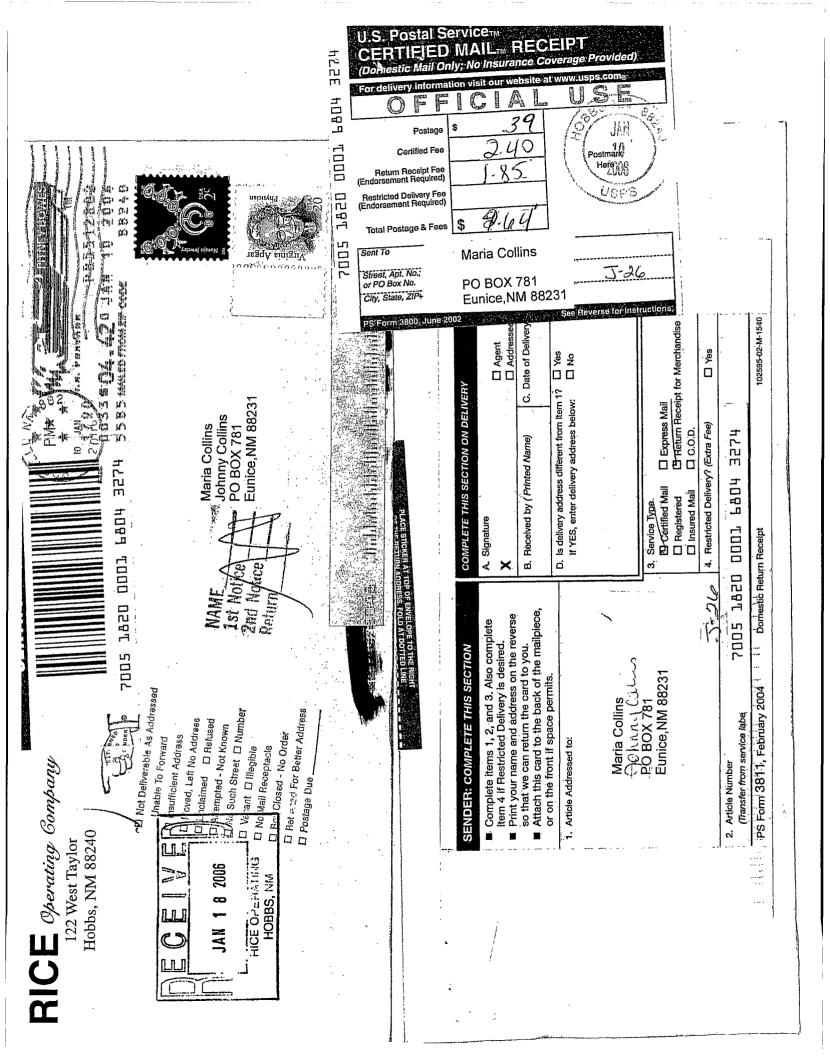


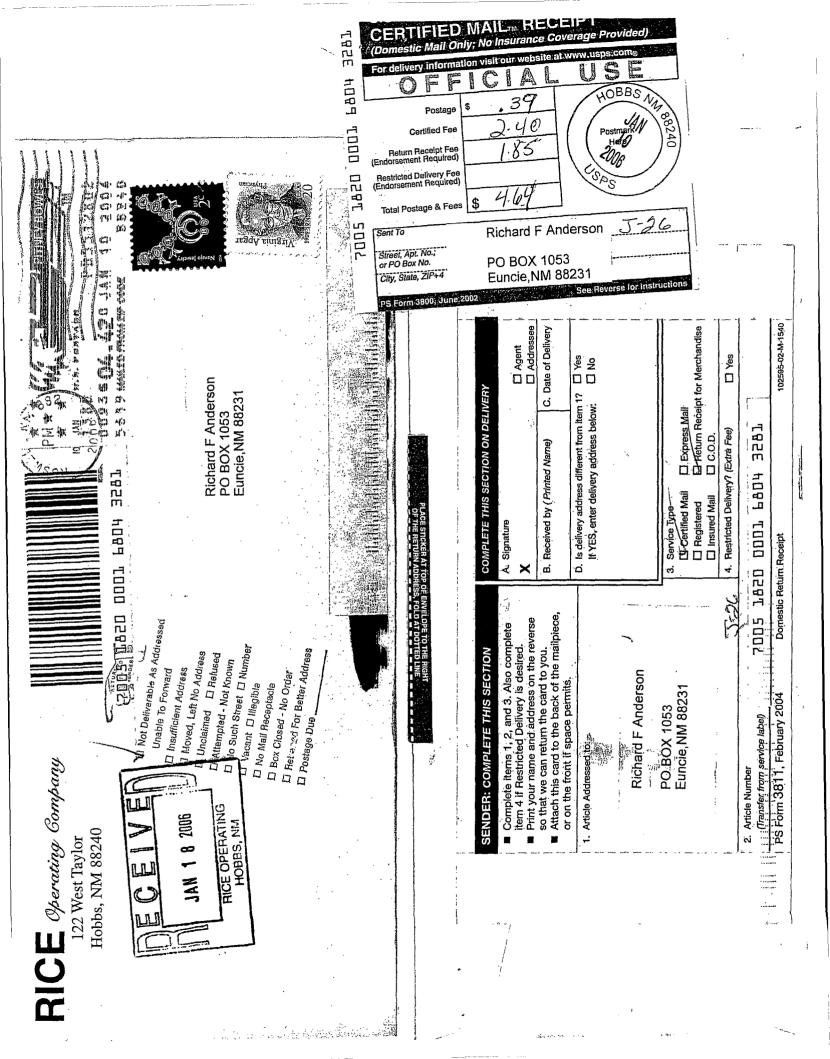


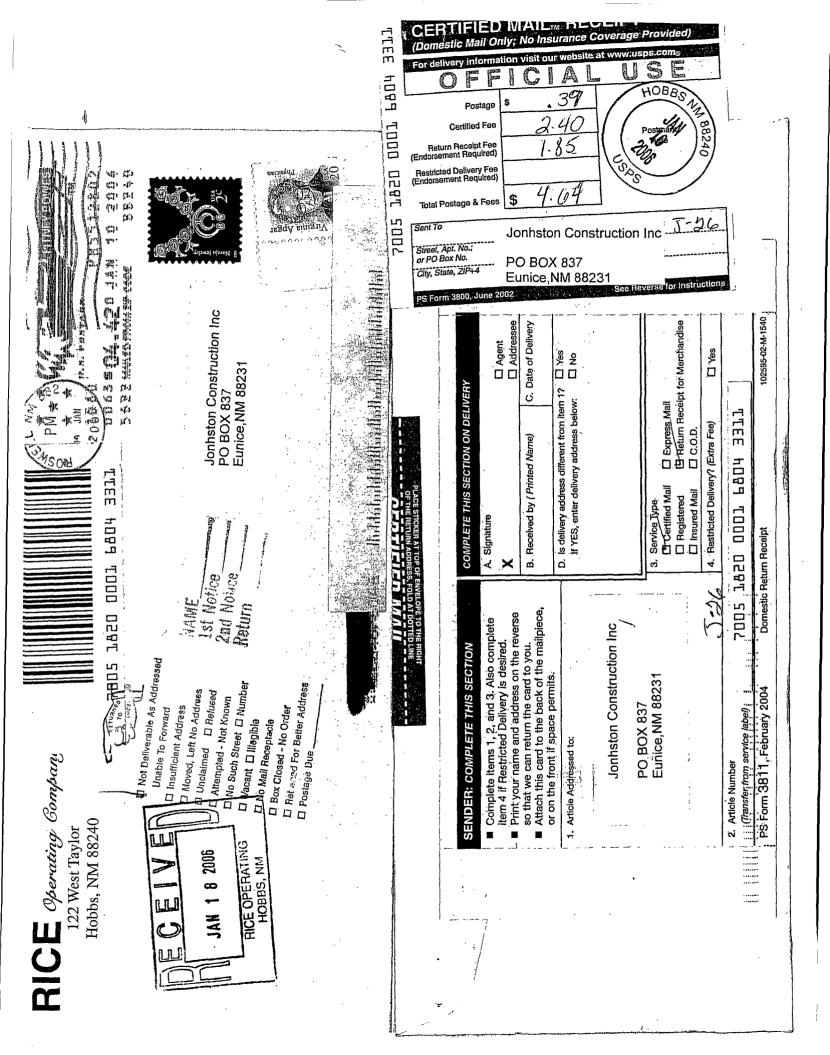


5415 (25) 2531 (24) 2541 (24) 2541 (25) 265 Ő. 2c сэ) %"'' <u>ծ նշան անձան էն անդիններին ներականերին ներական անդին</u> 「「いいてんたい」 Tommie Williams Eunice, NM 88231 PO BOx 1355 小三 小三 小三 izi e e いてん C.W. N# 4. 2005 1820 0001 6804 3649 □ Agent □ Addressee 102595-02-M-1540 Er Return Receipt for Merchandise C. Date of Delivery D. Is delivery address different from trem 1?
Yes. ⊡ Yes 1st Notice 2nd Noace COMPLETE THIS SECTION ON DELIVERY If YES; enter delivery address below: C Express Mail Return NAME 3649 4. Restricted Delivery? (Extra Fee) 000 B. Received by (Printed Name) PLACE STICKEN AT TOP OF ENVELOPE TO THE RIG 7005 1820 0001 6804 Service Type C Insured Mail C Registered ם Not Delivere אל אל Addressed As Addressed A. Signature D No Such Street D Number Domestic Return Receipt 디 Fet A Cor Better Address Mining. Left No Address K Uncitined D Refused ם ג'יופייוף/פמ - Not Known Nieuzen D Newficient Address Uyable To Forward LJ Bax Closed - No Order ELTUN ന് X D Variant D Illegible 🛙 No Mail Receptacie berating Company 🛙 Poslage Due__ J-36 ttach this card to the back of the mailpiece, Print your name and address on the reverse Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired SENDER: COMPLETE THIS SECTION so that we can return the card to you. NM 88240 Vest Taylor the front if space permits. **Fommie Williams** Euñice, NM 88231 eilabei); ruary 2004 PO BOX 1355 unr noscuu ddressed to Eunice, NM 88231 614, State, ZIP+4 OF PO Box No. BOX 1322 ЪO 7005 Sireet, Apt. No emsilliW aimmoT Articl ∋7 & egsiso9 kfo 1850 01 \$ NM 8824 150 HOBBS M OE OPERATING estricted Delivery Fee (Endorsement Required) FEB 2 Here Return Receipt Fee (Endorsement Required) 58 1000 S880H 2005 Oh cerlified Fee 4089 Postage 2 \bigcirc D 5 1263235 and a second 60 \cap Щ

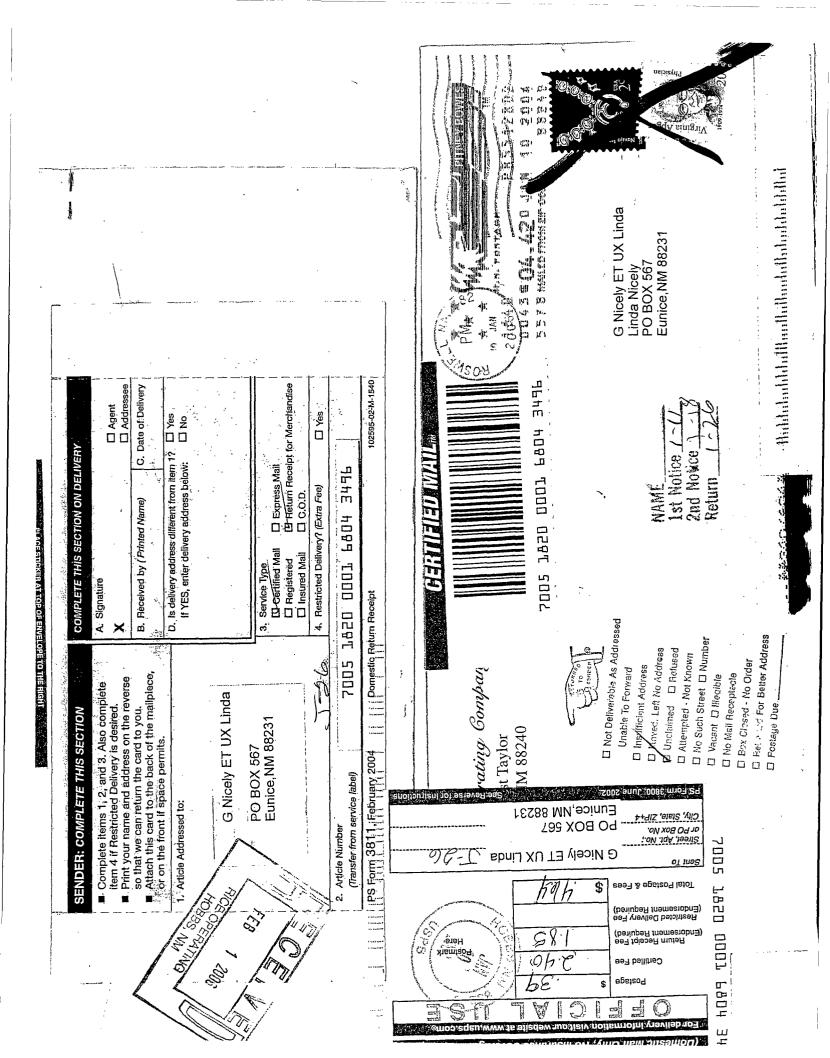


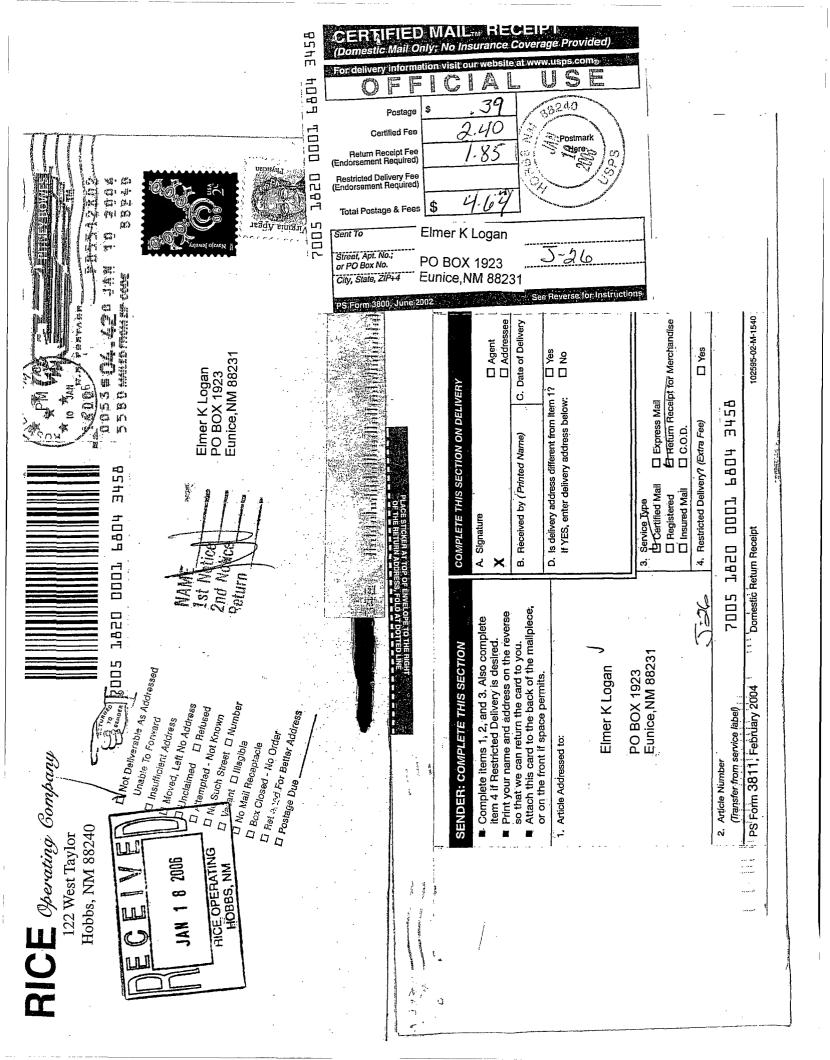


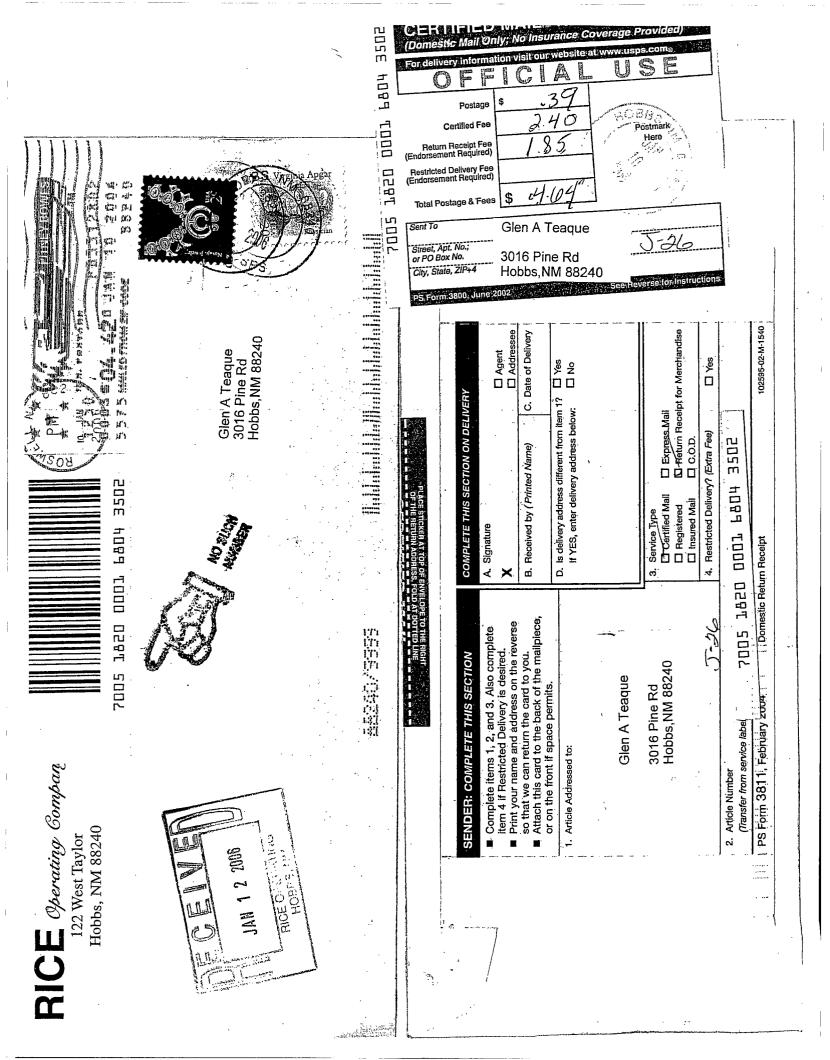




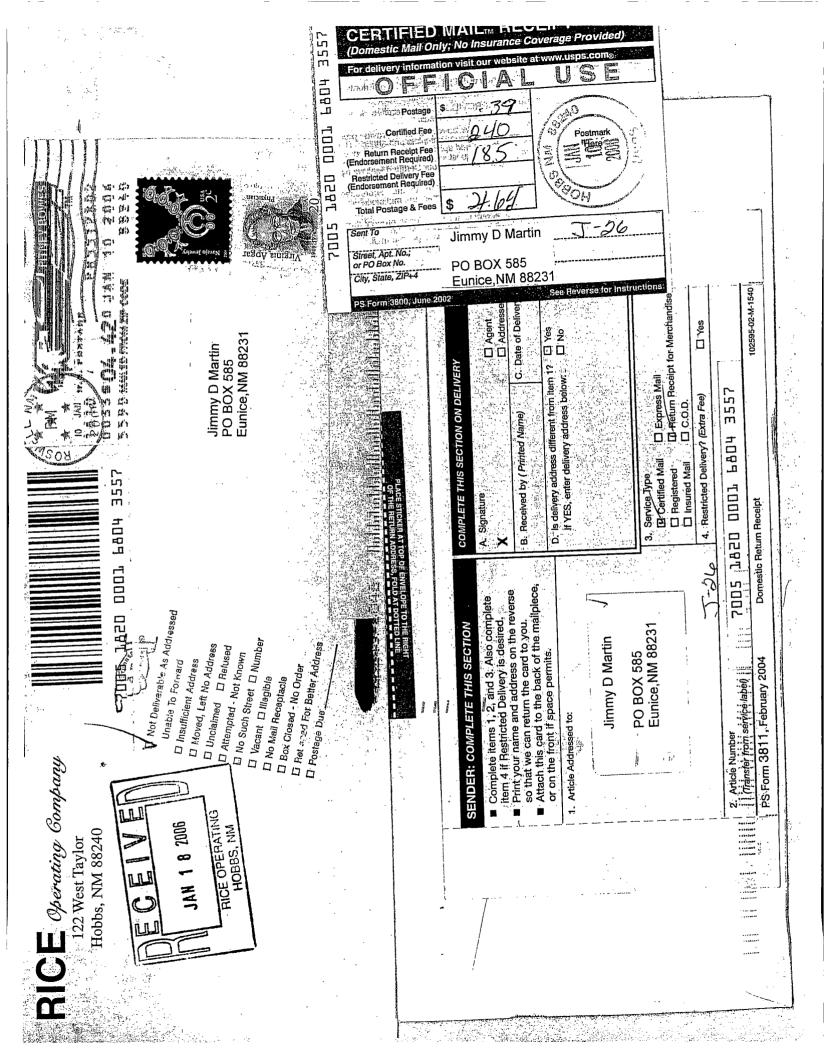
の商業に行行する 0000 0000 (J) 7 ĝ. 111) NET, HVLYDA X H Į. ij. PO BOX 567 Eunice, NM 88231 Linda Nicely C UNI 102595-02-M-1540 3564 L2 Return Receipt for Merchandise Addressee C. Date of Delivery D Agent ⊡ ⊀es [%] ₽ □□ 7005 1820 0001 6804 COMPLETE THIS SECTION ON DELIVERY D. Is delivery address different from item 1? Ist Notice If YES, enter delivery address below: End Nouce D Express Mall 7005, 1820. 0001, 6804 3564 . £L 4. Restricted Delivery? (Extra Fee) NAME □ c.o.b Return B. Received by (Printed Name) I Registered ☐ Registered ☐ Instrred Mail PLACE STICKER AT TOP OF ENVELOPE TO THE FIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE Service Type A. Signature Domestic Return Receipt ຕໍ × Not Deliverable As Addressed J-26 Attach this card to the back of the mailpiece, rating Company Ret & Cd For Better Address Print your name and address on the reverse No Such Street 🗆 Number Complete items 1, 2, and 3. Also complete Unclaimed D Refused foved, Left No Address Attempted - Not Known No Mail Receptacle 🗇 Pox Closed - No Order sufficient Address tem 4 if Restricted Delivery is desired. Unable To Forward SENDER: COMPLETE THIS SECTION so that we can return the card to you. Vacant 🛛 Illogible Eunice, NM 88231 or on the front if space permits. 🛛 Postage Due . M 88240 PO BOX 567 ruary 2004 • • • • t Taylor Linda Nicely 2. Article Number 1. Article Addressed to: See Reverse Eunice, NM 88231 City, State, PO BOX 567 Sireet, Apt. No. or PO Box No. 7005 9G-5 Vieciy sbrid Total Postage & Fees \$ 407 1850 111 - ------900 Restricted Delivery Fee (Endorsement Required) RICE OPER TING رقت اللات اللات 7 Postmark Here HOBBS, VM • • • • • • 667 tqicceft nuteR (Endorsement Required) 1000 ALC: NOT m eefified Fee 2005 机依 Postage £ 4089 ET. \bigcirc ADD T 6 in the second se Ξź \square ш. Азалі ш

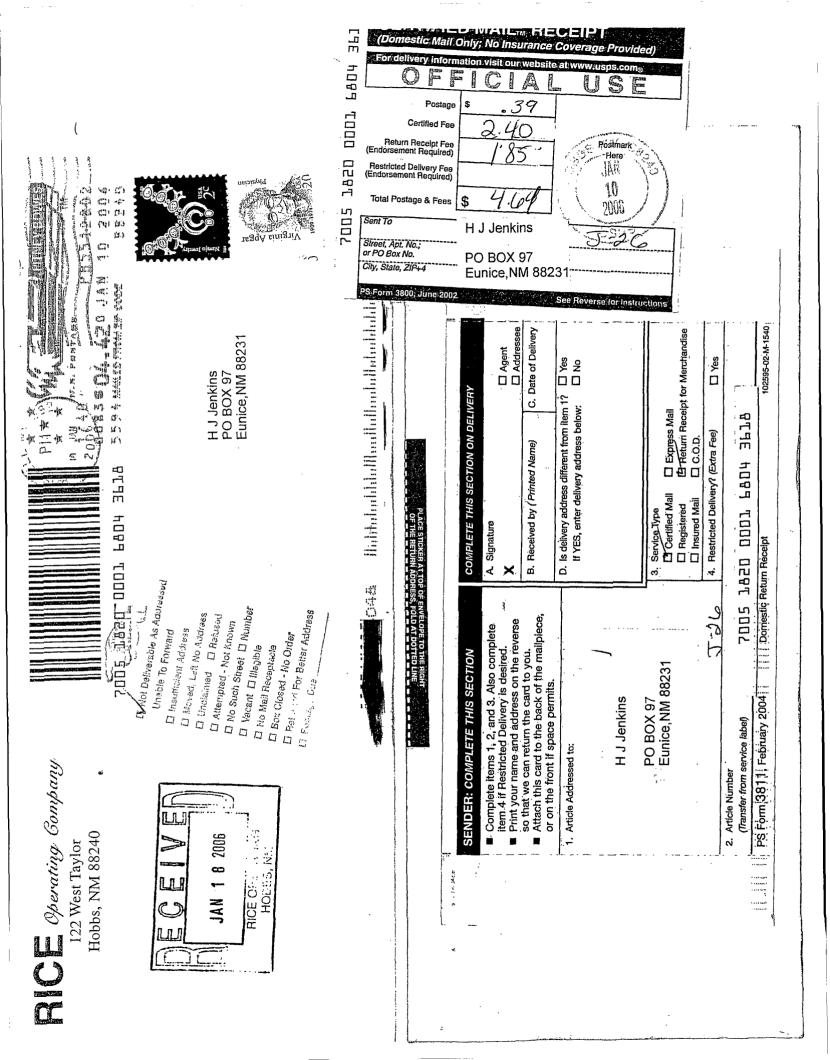


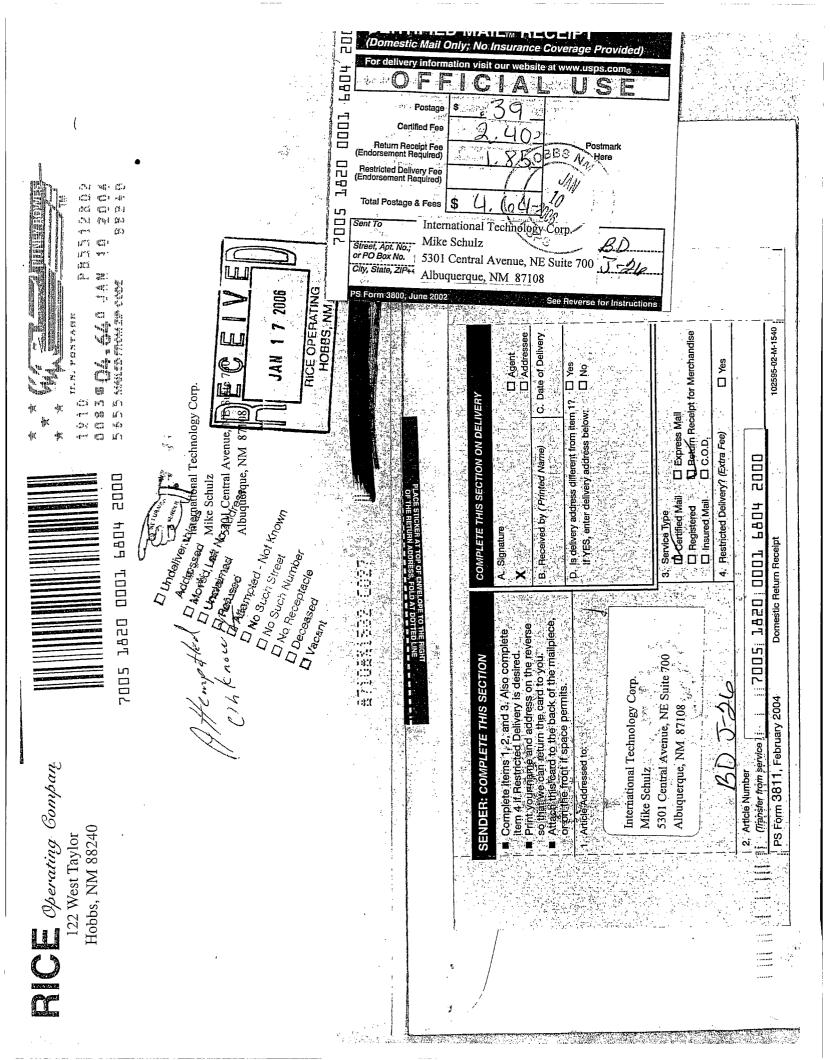




OSIGIISE 3588 MAIL RECEIPT C ERRIFIED Co Provided) Mail Only: No Insurance 6804 9 ţr. MAL Postmark hi ha 1000 Certified Fee Return Receipt Fee (Endorsement Required) 10 12年11月11日 1.820 Restricted Delivery Fee (Endorsement Required) SU1B h \$ Virginia Apgar Total Postage & Fees 1393 7005 Sent To 2 G Gonzalez Jose Street, Apt. No.; or PO Box No. THE STATE OF THE S PO BOX 462 Eunice,NM 88231 City, State, ZIP-Eunice, NM 88231 Jose G Gonzalez PS Form 3800, June 2 PO BOX 462 HX20.4 -Agent Addressee 102595-02-M-1540 C. Date of Delivery Effecturin Receipt for Merchandise ĕ ₽ □□ ⊡ Xes 極の COMPLETE THIS SECTION ON DELIVERY D. Is delivery address different from item 1? If YES, enter delivery address below: S 🗖 Express-Mail 0001 6804 3588 3588 4. Restricted Delivery? (Extra Fee) COD. B/Received by (Printed Name) 1820 0001 6804 Ist Notice 2nd Notice C3-Certified Mail 🗋 Insured Mail 🗖 Registered Service Type 0.9964 NAME A. Signature X ¹ Domestic Return Receipt 7005 1.820 പ് Attach this card to the back of the mailpiece, Print your:name and address on the reverse Complete items 1, 2, and 3. Also complete 7005 t^{iversib}e As Addressed 5-21 SENDER: COMPLETE THIS SECTION item 4 if Restricted Delivery is desired. so that we can return the card to you at 🗆 Number C S Galder t No Address . D Refused LT R. " - 4 For Better Address Eunice, NM 88231 Jose G Gonzalez l'u Forward Vot Known ' ÁdJr_{ess} or on the front if space permits. D Err Closod - No Order PS Form 3811, February 2004 PO BOX 462 ^{Nie} meil Recepteole **RICE** Operating Company (Transfer-from, service, ligbel) Such Stre RICE OPERALINE: ----- ale D Posiago Due _ De. 1. Article Addressed to: Atter ĴΊ 2. Article Number Hobbs, NM 88240 2006 122 West Taylor IAN 18 [.]] Ĺ







1820 0001 6804 2161	(Transfer from service label) 7005 1.820 00	eceint eceint	rm 3811. February 2004 Domestic Return Receipt
			cle Number
/en/	B.1) J-26	4. Restricted Delivery? (Extra Fee)	BD J-26
Certified Mail Express Mail Registered Acturn Receipt for Merchandis Insured Mail COD	Albuquerque. NM 87102	Registered L-Return Receipt for Merchandise Insured Mail C.O.D.	
	610 Gold St. SW. Suite 111	3. Service Type	Kivera Room 101 Fe NM 27502
	C/O American Ground Water Consultants		ast Palace Avenue
	- William Turner NM Trustee for Natural Resources		Historic Preservation Officer Attn:Elmo Baca
D. Is delivery address different from item 1? D Yes. If YES, enter delivery address below: D No	1. Article Addressed to:	: 	cle Addressed to:
2	 Attach this card to the back of the maliplece, or on the front if space permits. 	D is delivery address different from them 15 L P Adv	on the front if space permits.
B. Received by (<i>Printed Name</i>) C. Date of Deliver		y (Printed	that we can return the card to you. ach this card to the back of the mailpiece.
A. Signature	Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.		m 4 if Restricted Delivery is desired. nt your name and address on the reverse
CÔMPLETE THIS SÉCTIÓN ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPATIENTISSEGUONONDAHVAR	JERF COMPLETE THIS SECTION
urn Receipt 102595-02-M-154	PS Form 3811, February 2004 Domestic Return Receipt	Domestic Return Receipt	
1820 0001 6004 2147	7002	1000 6804 2031	cie Number nsfer from service label) 7 0 0 5 1 Å 근 0
4. Restricted Delivery? (Extra Fee)	80526	4. Restricted Delivery? (Extra Fee)	BD J-26
Registered Reference Receipt for Merchandist Insured Mail C.O.D.		Registered · Drefturn Receipt for Merchandise Insured Mail C.O.D.	
120歳	PO BOX 26110 Santa Fe, NM 87504	aii	Janua FC, INIVI 07.304-1804
	Secretary	2001	PO BOX 1864
JAN 1 & 2006	Neur Marriss P.	WHIT USPS	NM Oil & Gas Association
If Yes, enter delivery address below:	1. Article Addressed to:		cle Addressed to:
D is shell with the state of the shell with the state of		Addy Frite 2	on the front if space permits.
B. Received by (<i>Printed Name</i>) C. Date of Delivery			that we can return the card to you.
X // Agent	item 4 if Restricted Delivery is desired.	X / H Hutlens addressee	1 4 if Restricted Delivery is desired. It your name and address on the reverse
A. Signature		A. Signature, / / · -	nplete items 1, 2, and 3. Also complete
complete this section on delivery	SENDER: COMPLETE THIS SECTION	cómplete this section on delivêry	ERI COMPLETE THIS SECTION
	2		

I.

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nplete items 1, 2, and 3. Also complete 4 if Restricted Delivery is desired. t your name and address on the reverse	A. Signature	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A Signature
That we can return the card to you. Ch this card to the back of the mailpiece, In the front if space permits.	Date	 so that we can return the card to you. Attach this card to the back of the malipiece, or on the front if space permits. 	B. Received by (Printed Name) C. Pate of Deliver
le Addressed to:	D. Is delivery address different from item 1? D Yes If YES, enter delivery address below: D No	1. Article Addressed to:	D. Is delivery address different from item 1? T Yes If YES, enter delivery address below: D No
· · · · ·	· · · · ·		· · ·
farry Bishara 30X 748		US Fish & Wildlife Service	
T NM 87013			-11
	D. denvog type Definition Mail D Express Mail Desintered D Extrementation	Albuquerque, NM 87113-1001	ail
			LI Hegistered Letturn Receipt for Merchandise
60) - 26	4. Restricted Delivery? (Extra Fee)	81 5-26	4. Restricted Delivery? (Extra Fee)
2005	1820 0001 6804 2024	2: Article Number	0001 6804 2086
m 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	rn Receipt 102595-02-M-154
ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nplete items 1, 2, and 3. Also complete 1 4 if Restricted Delivery is desired. + vour name and address on the reverse	A. Signature.	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	
hat we can return the card to you. the this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery	Attrint your name and address on the reverse so that we can return the card to you. Attach this card to the back of the maliplece,	B. Received by (Printed Name) C. Date of Deliver
In the monutin space permus.	D. Is delivery address different from item 1? Ves	or on the front if space permits.	
	IT TES, enter delivery address below.		If YES, enter delivery address below:
Southwestern Public Service		Southwest Research & Information Center	
PO BOX 1261	- 11	Chris Shuey	
Amarillo, TX 79170	3. Service Type Definition Mail Express Mail Perfinitions of Definition Benchmint for Merchandise	PO BOX 4524 Albuquerque, NM 87106	
			¹ , ☐ Registered ULAtium Receipt for Merchandis
RDJ-26	4. Restricted Delivery? (Extra Fee)	1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	12
sle Number Inster from service label) 7005 1.620	20 0001 6804 2246	2Auticle Mumber	- W D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T D M T
rm 3811, February 2004 Domestic Return Receipt	turn Receipt	2004 Domestic R	

DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
orfi ptere trein s 1, 2, and 3. Also complete am 4 if Restricted Delivery is desired. int your name and address on the reverse		 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A signature Active Agent
 that we can return the card to you. tach this card to the back of the mailpiece, on the front if space permits. 	ö		B. Received by (<i>Printed Name</i>) C. Date of Deliver
ticle Addressed to:	D. Is delivery address different from item 1? D Yes If YES, enter delivery address below: D No	1. Article Addressed to:	D. Is delivery address different from item 17 T Yes If YES, enter delivery address below:
. County Administration Office n: Lue Ethridge		William O. Stephens	
N. Main Street, Suite 4 /ington, NM 88260	3. Service Type 3. Service Type Action Mail Certified Mail Repetered A Return Receipt for Merchandlee Insured Mail C.O.D.	Eunice, NM 88231	3. Service Type Certified Mail Cypress Mail Certified Mail Cypress Mail Certified Mail Content Content br>Content Content
12in	reny 7	5-26	ery?
ticle Number ansfer from service label) 7005 고요금0	20 0001 6804 5483	2. Article Number	E88E 0846 0000 0
orm 3811, February 2004 Domestic R	Receipt	PS Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-15-
14. 14. 14. 14. 14. 14. 14. 14. 14. 14.			
ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		COMPLETE THIS SECTION ON DELIVERY
nplete items 1, 2, and 3. Also complete 14 if Restricted Delivery is desired. 1 vour name and address on the reverse	A. Signature	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
hat we can return the card to you. Ch this card to the back of the mailpiece, the front if space permits.	B. Received by (Printed Name) C. Pate of Delivery	 Frint your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailoiece. 	B. Received by (Printed Name) C. Date of Deliven
le Addressed to:	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No	or on the front it space permits. 1. Article Addressed to:	D. Is delivery address efficient from item 1? Ves If YES. effect delivery address below:
n Marsh I		Bureau of I and Manaoement	
BOX 388 5bs, NM 88241	ie.	State Director PO ROX 27115	
	Registered Return Receipt for Insured Mail C.O.D.	Santa Fe, NM 87502-0115	Registered Repress Mail Receipt for Merchandis
31) J-36	4. Restricted Delivery? (Extra Fee)	BD 3-40	ery? (E)
inster from service label 7005 J.820 0003	0 0001 6804 2017 122885-02-M-1540	2. Article Number (Transfer from service label) 7005 1.8	1820 0001 6804 1980
		PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-15
			والمتوازية المحافظ والمتحرك والمحافظ المحافظ والمحافظ والمحافظ والمحافظ والمحافظ والمحافظ والمحافظ والمحافظ والمحافظ والمحافظ

· _ · - ·

 SENDER: COMPLETE THIS SECTION Complete items T, Z, and 3. Also complete items T, and 3. Als	If YES, enter delivery address below: No If YES, enter delivery address below: No Eva Owen No	PO BOX 115 Eunice, NM 88231 3. Service-Type 5. El Certified Mail C Express Mail C Registered C Return Receipt for Merchandis C Insured Mail C C.D.D.	Contraction Contraction <thcontraction< th=""> <thcontraction< th=""></thcontraction<></thcontraction<>	TE THIS SECTION 2, and 3. Also complete d Delivery is desired. A. Signatu A. Signatu A. Signatu A. Signatu A. Signatu B. Receiver bace permits. D. Is deliver if YES,	Duayne Parker PD BOK /147 Funce, NM 88231 Eunice, NM 88231 Bonce, NM 88231 3. Service Type Certified Mail External Programmed Mail External Insured Mail C.O.D. A. Restricted Delivery? (Extra Fee) 1 ves	2. Article Number 2. Article Number (Transfer from service label) 7005 1.820 P.S. Form 3811, February 2004 Domestic Return Receipt
Agent Addressee Date of Deliyery	D. Is delivery address different from Item 1? If YES, enter delivery address below: EVe	 3. Service Type 3. Service Type 4. Registered 19 C.O.D. 4. Restricted Delivery? (Extra Fee) 19 Yes 	101. 6014 3656 <u>102595-02-14-1540</u>	Agent Addressea e of Delivery 2 - 0 - 0 - 1 Yes 1 Yes	 3. Service Jype 3. Service Jype 3. Certified Mail 1 Registered 1 Registered 1 Insured Mail 1 C.O.D. 4. Restricted Delivery? (Extra Fee) 1 Yes 	1 6804 3625 102595-02-M-1540
R: COMPLETE THIS SECTION plete itërris 1, 2, and 3. Also complete 4 if Restricted Delivery is desired. your name and address on the reverse iat we can return the card to you. the front if space permits.	e Addressed to: Bobby L Pearce Trust	PO BOX 316 Eunice,NM 88231	e Number ifer from service label) 7日ロ5 ユ&己ロロ n 3811, February 2004 Domestic Return Receipt	R: COMPLETE THIS SECTION plete items ¹ , 2, and 3. Also complete 4 if Restricted Delivery is desired. t your name and address on the reverse at we can return the card to you. ch this card to the back of the malipiece, in the front if space permits.	Kathleen Parker PO BOX 1291 Euncie,NM 88231	sle Number Tsfer from service label) 7005 고요군0 000 rm 3811, February 2004 Domestic Return Receipt

L

.

T

2 |

. ; ; ;

L

L

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
plete fterns 1, 2, and 3. Also complete 4 if Restricted Delivery is desired. your name and address on the reverse iat we can return the card to you. this card to the back of the mailpiece, of the front if space nermits.	A. Signafure X // Addressee B. Received by (Printed Name) C. Date of Delivery	 Complete items 1, 2, and 3. Also complete item 4.4f 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 maliplece, or the form if some back of the maliplece, 	A. Signature Agent A Signature Agent A Signature Agent B. Received by (<i>Printed Name</i>) C. Date of Deliver
e Addressed to:	ess different from item 17	1. Article Addressed to:	D. is delivery address different from item 1?
Gilbert's Leasing Service Inc	<u> </u>	Bart D Parker	王子子 [1]
PO BOX 1597 Lovington,NM 88260	3. Service Type La Certified Mall	PO BOX 846 Eunice, NM 88231	3. Service Tuge (2) 日 Certified Mail □ Express Mail 一日・Registered 世界配価格 □ Instrued Mail □ C 0.0
5-210	ery?	1-26	ery?
7005	7820 0001 4804 SEEE H089 7000 0281	2. Article Number 14 PS 1 2005 1.020	820 0001 6804 3489
n 3811, February 2004 Domestic Return Receipt	im Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	im Receipt 102595-02-M-15
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete m 4 if Restricted Delivery is desired. In your name and address on the reverse that we can return the card to you. tach this card to the back of the malipiece, on the front if space permits.		 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. 	A. Signature A. Signature XU I. Address B. Received by (<i>Printed Name</i>) C. Date of Delive
icle Addressed to:	D. Is delivery address different from item 1'7 LJ res If YES, enter delivery address below: DO	1. Article Addressed to:	D. Is delivery address different from item 1?
Joe Allen Caperton		Eva Owens HEIVO CESSFEINED HIT PO BOX 115	
PO BOX 1028 Eunice,NM 88231	 3. Service Type 3. Service Type 4. Certified Mail 2. Express Mail 2. Registered 2. Registered 3. Receipt for Merchandise 3. Insured Mail 3. C.O.D. 	Eunice, NM 88231	3. Service Type La Certified Mail □ Express Mail □ Registered □ Receipt for Merchandi:
5-36	'eny?	Trale	4. Restricted Delivery? (Extra Fee)
ticle Number 7005 ansfer from service label)	1820 0001 6804 3366	2. Article Numper []]]]]]]]]]]]]]]]]]	270 0001, 6804 3472
orm 3811, February 2004 Domestic R	Domestic Return Receipt	19	

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nplete items 1, 2, and 3. Also complete 1.4 if Restricted Delivery is desired. t your name and address on the reverse that we can return the card to you. ch this card to the back of the mailpiece, of the front if scores commute	A Signaturé X X V V V Agent B. Received by (Printed Name) C. Date of Delivery	 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 that for the pack of the mailpiece. 	B. Received by (Printed Name) C. Dire of Deliver U. D. C. Robinson 1/12/00
le Addressed to:	Dis delivery address different from item 1? Tes	1. Article Addressed to:	D. Is delifiery address different from item W DYes If YES, enter delivery address below:
Wayne Aderson		Richard Robinson	
PO BOX 1491 Eunice,NM 88231	3. Service Type 3. Service Type To Certified Mail Express Mail Registered Êt Return Receipt for Merchandise	PO BOX 1334 Eunice,NM 88231	3. Service Type <u>1. Centrifed</u> Mail Express Mail Registered <u>11-Return Receipt for</u> Merchandis Insured Mail □ C.O.D.
1-1-	ery7	12 J.	ery?
a Number 7005 1820	0 0001 6804 3434	2. Article Number (Transfer from service label) アロロ5 ユ 出己	1,620 0001 6804 3779
m 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	
JER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete m 4 if Restricted Delivery is desired.	A. Signature	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Deliverv is desired. 	A. Signature
nt your name and address on the reverse that we can return the card to you. Set this card to the back of the mailpiece, on the front if enance namits	Z P	 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, 	B. Received by (<i>Printed Name</i>) C. Date of Delive
icle Addressed to:	D. Is delivery address different from item 1? D Yes If YES, enter delivery address below: D Yo	or on the front if space permits. 1. Article Addressed to:	D. Is delivery address different from item 1? T Yes
Ruth L Willard		Mark Owen Estate	
PO BOX 589 Eunice,NM 88231	3. Service Type 3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Registered ☐ nsured Mail ☐ C.O.D.	PO BOX 115 Euncie, NM 88231	3. Service Type Contribution Contribution Contribution Contribution Contribution Contribution Contribution Contribution
5-26	ery?	120	ery?
cle Number Inster from service (abel) 7005 1. & 근미	20 0001 6004 3717	2. Article Number (Transfer from service label) 7005 1.8	1,820 0001 6804 3427
rrm 3811, February 2004 Domestic Re	Domestic Return Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	
			ومراجع والمراجع والم

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete ttämts T, 2, and 3. Also complete 1 4 if Restricted Delivery is desired. It your name and address on the reverse that we can return the card to you. Such this card to the back of the mailplece, in the front if space permits. Addressed to: Jamies E Gardner	A Signature Agent X 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: D No	 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 malipiece, or on the front if space permits. Article Addressed to: Jose Hernandez 	A. Signature X S C C C C A C A A C A A C C A Addresse B. Received by (<i>Printed Name</i>) C. Date of Deliver D. Is delivery address different from Item 1? \Box Yes If YES, enter delivery address below: \Box No
PO BOX 1244 Eunice, NM 88231	3. Service Type 3. Service Type 1 Certified Mail 1 Certified Mail 1 Registered 1 Insured Mail 1 Insured Mail 2 O.O.D. 4. Fleshtigted Delivery? (Extra Fee) 1 Yes	PO BOX 413 Eunice,NM 88231	 Servica-Type Certified Mail Express Mail Registered Return Receipt for Merchandis Insured Mail C.O.D. Restricted Delivery? (Extra Fee)
ale Number Andrea (abe) ister from service (abe) m.38111, February 2004	05 加み20 0003) トタロサ 3342	2. Article Number 7005 1.620 0001	고 & 근 Ü 트 미 미 고 드 노 Å Ü 내 _ ∃ 도 ໆ 5 드 트 트 10 0 고 드 노 Å Ü 내 _ ∃ 도 몃 5 드 트 트 10 2595-02-M-15 mestic Return Receipt 102595-02-M-15
R: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
plete Items 1, 2, and 3. Also complete 4 if Restricted Delivery is desired. your name and address on the reverse at we can return the card to you. th this card to the back of the maliplece, the front if space permits.	A. Signature X. March March March Agent B. Received by (Printed Name) C. Date of Delivery D. I. Appl. S. Co. K. 1-12- Df. D. I. Appl. Sco. Americant from from 12 11 Vac	 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 maiplece, or on the front if space permits. 	A. Signature X ////////////////////////////////////
 Addressed to: City of Eunice P.O. Box 147 	If YES, enter delivery address below:	1. Article Addressed to: Eddie J Harpier	D. Is derivery address different from item 17 L Yes If YES, enter delivery address below: Do
Eunice, NM 88260 1 -2 6	3. Service Type 3. Service Type 3. Certified Mail Express Mail 1 Registered 1 Insured Mail 1 Insured Mail 2.0.0. 4. Restricted Delivery? (Extra Fee) 1	PO BOX 124 Eunice, NM 88231	3:-Señvice 打ype. 3:-Señvice 打ype. このころを前代時日 Mail ロ Express Mail 日 Registered 世子相氏turn Receipt for Merchandit し Insurred Mail ロ C.O.D. 4. Restricted Delivery? (Extra Fee) ロ Yes
Number From service label) 7005039000	[] 3 9 0 0 0 0 9 9 8 0 3 8 5 2 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	2. Article Number :	0 0001 6 00 3 5 1 9 turn Receipt 102595-02-M-16

i.

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nplete ite ms 1, 2, a nd 3. Also complete n 4 if Restricted Delivery is desired. t your name and address on the reverse	A. Signature	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print vour name and address on the reverse 	A. Signature Agent X Marger Drouw Dadarese
hat we can return the card to you. It this card to the back of the mailpiece, In the front if space permits.	B. Received by (Printed Name) C. Date of Delivery	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.	B. Received by (<i>Printed Name</i>) C, Date of Deliver
le Addressed to:	D. Is delivery address different from item 1? TYes if YES, enter delivery address below: DNo	1. Article Addressed to:	D. Is delivery address different from item 1 ¹ □ Yes If YES, enter delivery address below:
Royce Crowell PO BOX 146	Kaye Enered	Mary E Brewer ET AL	
Eunice, NM 88231	3. Service Type ET-Certified Mail	PO BOX 821 Eunice,NM 88231	3. Service Type Control of the service Type Control of the service o
7-26	ery?	1-26	ery?
sie trom service tepel)		2. Article Number (Transfer from service label) 7005 1.6	1,820 0001 6804 3373
m 3811, February 2004 Domestic Re	Domestic Return Receipt	PS Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-15
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. tt your name and address on the reverse	A Signatura	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
that we can return the card to you. ach this card to the back of the mailpiece, on the front if space permits.	R Received by (Printed Name) C. Date of Delivery C. I. C. Date of Delivery C. I. C. Date of Delivery C. D. La delivery address of Research from 12 (Nes	 Fruit 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. 	B. Received by (Printed Name) C. Date of Delive
cle Addressed to:		1. Article Addressed to:	D. Is delivery address different from item 1?
Calico Properties LLC		City Of Eunice	
500 Zia Drive Hobbs,NM 88240	3. Service Type L⊟-Certified Mail □ Express Mail □ Registered □ Afturn Receipt for Merchandise □ Insured Mail □ C.O.D.	PO BOX 147 Eunice,NM 88231	·
-JC-T	4. Restricted Delivery? (Extra Fee)		4. Restricted Delivery? (Extra Fee)
cle Number nsfer from service label) 7005 1	1820 0001 6804 3410	2. Atticle Number Transfer from conting to hold	H U E
rm 3811, February 2004 Domestic Re	Domestic Return Receipt 102595-02-M-1540	2004 Domestic Ret	

i

. •

DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. It your name and address on the reverse that we can return the card to you. ach this card to the back of the mailpiece, on the front if space permits.		 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 malipiece, or on the front if space permits. 	A. Signature X DW Cuberby agent B. Received by (Printed Name) C. Date of Delive D. Du C. Date of Delive
cle Addressed to:	D. Is delivery address different from item 1? U Yes If YES, enter delivery address below:	1. Article Addressed to: B W Caperton	D. Is delivery address different from item 1?
Richard Don and Cathy Jones P.O. Box 21 Eunice, NM 88231	 3. Service Type 3. Service Type 3. Service Type 3. Service Type 3. Service Jype 4. Restricted Delivery? (Extra Fee) 	PO BOX 931 Euncie,NM 88231	 Service Type. El-Certified Mail Express Mail Registered El-Return Receipt for Merchandit Insured Mail C.O.D. Restricted Delivery? (Extra Fee)
cle Number nsfer from service label) 7005	4785 0879 0000 0PE0	2. Article Number (fransfer from service label) 7005 1	1820 0001 6804 3267
rm 3811, February 2004 Domestic F	Domestic Return Receipt 102595-02-M-1540	PS-Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-15
JER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. It your name and address on the reverse that we can return the card to you. ach this card to the back of the mailpiece, on the front if space permits.		 Complete RETT 7, 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 malipiece, or on the front if space permits. 	A. Signature X. Caug (M. al. y Dent B. Received by (Printed Name) C. Date of Delive
cle Addressed to:	If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from item 1? Des If YES, enter delivery address below:
Joe Alden Bayes		Carol Thorton	
PO BOX 173 Eunice, NM 88231	3. Service Type 3. Service Type 12-Certified Mail 13-Certified Mail 13-Registered 14-Restricted Delivery? (Extra Fee)	PO BOX 3 Tex - NM Camp Eunice, NM 88231	3. Service Type 4. Certified Mail C.O.D. Insured Mail Insured Mail O.O.D. A Deviced Definition of the context of
cle Number nsfer from service label) 7005 18	1820 0001 6804 3397	2. Article Number (Transfer from service label) 7005 1.4	
rm 3811, February 2004 Domestic F	Domestic Return Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt]]]]]]]

JER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. nt vour name and address on the reverse	A. Signature X Cotting Jerue - Addressee	 Complete item⁵ 7, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print vour name and address on the reverse 	K Signature
that we can return the card to you. ach this card to the back of the mailpiece, on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery	 Attach this card to the back of the malipiece, or on the front if space permits. 	B. Received by (Printed Name) C. Date of Deliver $(-1/2, -1/2)$
cle Addressed to:	D. Is delivery address different from item 1? Type If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from item 1? Tes If YES, enter delivery address below:
Richard Don Jones		Runco Inc	
PO BOX 21 Eunice,NM 88231	Mail Receipt fo	8100 W Alabama Hobbs,NM 88240	3. Service_Type Certified Mail □ Express Mail □ Registered □ Insured Mail □ C.O.D.
7-26	4. Restricted Delivery? (Extra Fee)	7:36	4. Restricted Delivery? (Extra Fee)
Iclé Number 7005	5 1820 0001 6804 3441	2. Article Number (fransfer from service label) 7005 1.6	1820 0001 6804 3380
irm 3811, February 2004 Domestic Re	Domestic Return Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	urn. Receipt 102595-02-M-15-
			「「「」」「「」」「「」」「「」」」「「」」」「「」」」」「「」」」」「「」」」」
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. It vour name and address on the reverse	A Signature Agent	 Complete Items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
that we can return the card to you. ach this card to the back of the mailpiece, on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery $\frac{1}{1/1/06}$	 Trunt 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 snace neimits. 	B. Received by (Pripted Name) C. Date of Delive
cle Addressed to:	D. is delivery address different from item 1? □ ¹⁵⁵ If YES, enter delivery address below: □ No	1. Article Addressed to:	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No
Patricia House ET AL		Patrick McCasland	
PO BOX 3715 Midland,TX 79702	3. Service Type D.Certified Mail Express Mail Reclistered Theturn Receipt for Merchandise	PO BOX 218 Eunice,NM 88231	
7-36	il ivery?	- 10-1-1-	Registered LL-Return Receipt for Merchandi: Insured Mail C.O.D. Actual Receipt of Ves. Actual Reseipt (Extra Fee) Constructed Delivery?
icle Number ansfer from service (abel) 7005 1	1,820 0001 6804 3533	2. Article Number	465
orm 3811, February 2004 Domestic Re	Domestic Return Receipt 102595-02-M-1540	04 · · · Do	

and the second sec	· · · · · · · · · · · · · · · · · · ·		
um Receipt 102595-02-M-15/	PS Form 3811, February 2004 Domestic Return Receipt		m 3811, February 2004 Domestic Return Receipt
0000 9980 3890	2. Article Number i i 7005 0390 0	1820 0001 HAN4 3250	ile Number 7 115 1 ister from service label)
4. Restricted Delivery? (Extra Fee)	3.36	ery	1-26
• · · · · · · · · · · · · · · · · · · ·		Gentified Mail □ Express Mail □ Registered Er feturin Receipt for Merchandise	
N	Patricia House P.O. Box 3715 Midland TY 70700	2006) (2)	Kenneth V Blackwell
	1. Article Addressed to:	D. Is delivery address different from Item 17 T Yes (Cit YES, enter delivery address below: T No	cle Addressed to:
B. Fegeleved by (Printed Name) C. Date of Deliver	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.	۱ö۵	that we can return the card to you. ach this card to the back of the mailplece, on the front if space permits.
A. Signatyfe	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse 	A Signature Algent	mplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. nt your name and address on the reverse
COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	DER: COMPLETE THIS SECTION
um Receipt 102595-02-M-15	PS Form 3811, February 2004 Domestic Return Receipt	Domestic Return Receipt	orm 3811, February 2004 Domestic Re
20 0001 6804 3328	2. Article Number 2// (Transfer from service label) 7005 1.820	1820 0001 6804 3403	7005
éry?	T-26	ery	J-24
3. Service-Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandik ☐ Insured Mail □ C.O.D.	PO BOX 409783 Atlanta,GA 30384-9783	3. Service Type · /// 크ച 석오 Certified Mail · 디 Express Mail C Registered 입구Return Receipt for Merchandise 미 Insured Mail □ C.O.D.) BOX 1149 nta Fe,NM 87504
	Texas - New Mexico Railroad		w Mexico State Hwy & Trans Dept
D. Is delivery address different from item 17 LJ Yes If YES, enter delivery address below:	1. Article Addressed to:	D. Is delivery address different from tem 1? LI Yes If YES, enter delivery address below: DNo	icle Addressed to:
	 Territ 4 in 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 maliplece, or on the front if space permits. 	, lä l	It your name and address on the reverse that we can return the card to you. ach this card to the back of the mailpiece, on the front if space permits.
COMPLETE THIS SECTION ON DELIVERY A. Signature	SENDER: COMPLETE THIS SECTION ■ Complete Items 1.72 and 3. Also complete	COMPLETE THIS SECTION ON DELIVERY A. Signature///	DER: COMPLETE THIS SECTION mplete Items 1, 2, and 3. Also complete
COMPLETE TUIS SECTION ON DEI WERV			DEB- COMPLETE TURS SECTION

İ

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
		SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERT
plete tems 1, 2, and 3. Also complete 4 if Restricted Delivery is desired. your name and address on the reverse	Alexandre Agent - Agent	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature X X Agent
at we can return the card to you. In this card to the back of the mailpiece, In the front if snare narmits	B. Received by (<i>Printed Name</i>) C. Date of Delivery	 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, 	Received by (Printed Name)
	12	or on the front if space permits.	D is delivery address different from item 12 TY CO
	KKAS enter delivery address below: Do	1. Article Addressed to:	
W H Robbins	JAN 13	Soil & Water Conservation Bureau	
		NM Dept of Agriculture/Ag Programs & Resources	
Eunice, NM 88231	3. Service Type Certified Mail □ Express Mail □ Description 1 14 Descript for Merchandise	BOX 30005/APR Las Cruces, NM 88003-8005	rvice Type- Certified Mail
(f	ii iven:2		Registered Refurn Receipt for Merchandls Insured Mail C.O.D.
7-970	uesticted Delivery ((2014 1 ce)	BN J-26	4. Restricted Delivery? (Extra Fee)
ster from service label)		2. Article Number (Transfer from service label) 7005	1820 0001 6804 2055
	tum.Receipt 102595-02-M-1540 1	PS Form 3811, February 2004 Domestic Return Receipt	1025
		· · · · · · · · · · · · · · · · · · ·	
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDED. COMPLETE TUIS SECTION	COMPLETE THIS SECTION ON DELIVERY
implete items 1, 2, and 3. Also complete	A. Signature		
m 4 if Restricted Delivery is desired. nt your name and address on the reverse	X Turrers & Dansen & Addressee	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
that we can return the card to you. ach this card to the back of the mailpiece,	Printed Name) C. D		Received by Fighted NaMa
on the front if space permits.	D is delivery address different from item 12 D Yes	 Attach this card to the back of the mailpiece, or on the front if space permits. 	1000 1112/06
icle Addressed to:		1. Article Addressed to:	D. Is delivery address different for them 1? Extress in the If YES, enterrow address below:
Eva Toussaint			NAINT - Capitols
1764 0 11 11		NM Bureau of Mines & Mineral Resources	Contraction of the
	3. Service-Type	Lynn Brandvold	1067 - 21-11-5
	Certified Mail	NM Institute of Mining & Tech	3. Service Type [1] Certified Mail Express Mail
*		100/01 Mill 0/001	
5-26	4. Restricted Delivery? (Extra Fee)	RI) 7-21	Insured Mail I.C.O.D. 4 Bestricted Delivery (Extra Feel
icle Number Insfer from service label) 7 0 0 5 1	Ade 0001 4044 4044	1	
irm 3811, February 2004 Domestic R	1	(Transfer from service label) 7005 1,820	20 0001 6004 2142
		PS Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-154

ļ

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nplete items 1, 2, and 3. Also complete 14 if Restricted Delivery is desired.	Actigenditude	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
tyour name and address on the reverse hat we can return the card to you. In this card to the back of the mailpiece,	B. Received by (Printed Name) Q. Date of Delivery	 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 the family for a solution of the mailpiece. 	Beceived by (Pringed Name) C
le Addressent p.	D. Is delivery address different from Item 1? D Yes	1 Article Addressed to:	dress different from item 1?
	If YES, enter delivery address below: 🔲 No		If YES, epterdelivery address below: DNo
Kendrick		Lee Wilson & Associates	
mey at Law		POBOX 931	
Paseo de Peralta	ll-		3. Settlet Type (100)
are, NM 8/501	☐ Certified Mail ☐ Express Mail Express Mail Express Mail		EXertifiat Mail of Express Mail Resistered S A Roum Receipt for Merchandise
	C Insured Mail C.O.D.	MAL GUIE NWE ET	Insured Mail C.O.D.
96-0 (19	4. Restricted Delivery? (Extra Fee)	103-20	4. Restricted Delivery? (Extra Fee)
e Number sfer from service (abel) 7005 1.6	1820 0001 6804 2154	A Article Number	820,0001,6804,2123
n 3811, February 2004 Domestic Return Receipt	tum Receipt 102595-02-M-1540	004	ipt
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY		
		SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. It your name and address on the reverse	Addressee	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A. Signature
that we can return the card to you. ach this card to the back of the mailpiece,	B. Received by (Printed Name) C. Date of Delivery	 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 maliblece. 	Received by (Printed Name) C. De
on the front if space permits.	D. Is delivery address different from libra 1? D Yes	or on the front if space permits.	
cle Addressed to:	by address below:	1. Article Addressed to:	D. Is delivery address different from item 1? L Yes If YES, enter delivery address below:
	101 101		
er Resources Division	SAA	Colorado River Board of Calif.	
s Engineer		Gerald R. Zimmerman	
an Building a Fe, NM 87503	/	770 Fairmont Ave, Ste. 100	
· · · · ·	C Registered C Retern Receipt for Merchandise	Dicinaic, CA 71203-1033	ו =
R1) J-26	er 2		Insured Mail
Sie Number	,	A.V-J36	4. Hestricted Delivery (Extra Fee)
service label) 7 []	1 6804 2178	2. Article Number 	1,820 0001 6804 1997
TH 3011, February 2004 Domestic H	Vomestic Heturn Heceipt	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt

DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
mplete items 1, 2, and 3. Also complete 14 If Restricted Delivery is desired. In your name and address on the reverse that we can return the card to you. ach this card to the back of the mailpiece, on the front if space permits.	A. Signature X. U.J. Level 2 Dello Dagent B. Received by (Printed Name) C. Date of Delivery	 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 malipiece, or on the front if space permits. 	A. Signature X Agent B. Received by (<i>Printed Name</i>) C. Date of Delive
cle Addressed to: Falls Properties Inc	D. is delivery address different from them 12 $\frac{1}{12}$ res if YES, enter delivery address below: \Box No P . 0 (3 $\partial\gamma$ 36 8^{2}) A (b U q U ℓ V ℓ γ V M 8^{7}) N	1. Article Addressed to: John W Hice Jr	If YES, enter delivery address below:
PO Drawer T Elephant Butte, NM 87935	3. Service Type 3. Service Type 3. Contribution Express Mail 1 Express Mail 2 Feture Receipt for Merchandise 4. Restricted Delivery? (Extra Fee) 1	PO BOX 943 Eunice, NM 88231	3. Selvice Type 3. Selvice Type 12 Certified Mail □ Express Mail 12 Certified Mail □ Express Mail 1. Table Selviced Mail □ 0.0.D. 4. Restricted pellvery? (Extra Fee) □ Yes
icle Number 7005 1.	1820 0001, 6804 3298	2: Article Number war a service label) _ reference _ 10 5 18 20	20 0001 6804 3526
irm 3811, February 2004 Domestic Re	Domestic Return Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Repeter	
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMBLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nplete items 1, 2, and 3. Also complete n 4 if Restricted Delivery is desired. It your name and address on the reverse that we can return the card to you. ach this card to the back of the malipiece, on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery	 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. 	A. Signature X R. R. N. X Q. M. M. D. Agent B. Received by (Printed Name) C. Date of Delive "TO C.N. T. L. S. M. R. N. 1-27-01
cle Addressed to: Jay Lazarus PO BOX 5727	U. Is gowery address diment from turn 10 to 100 to	1. Article Addressed to: Jimmie Weir	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No
Santa Fe, NM 87502	ienvice Type A defititied Mail Registered Insured Mail Aestricted Delivery	PO BUX 184 Center Point, TX 78010	3. Service Type G. Certified Mail C Express Mail Registered E Heturn Receipt for Merchandi: Insured Mail C. O.D.
cle Number 700 Cle Number 7005 Cle Number 7005 Cle Structure Struc	7005 18근0 0001 노용이낙 군군이용 Domestic Return Receipt	2. Attice Ninnee. 2. Attice Ninnee. 7 直由于 17世子 19世纪11. Desterm 3817 Echniscy 2004. Democile Device	1101.480 W 3255

:H: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
plete items 1, 2, and 3. Also complete 4 if Restricted Delivery is desired.	A. Signature	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. 	A Software Mineral agent
your name and address on the reverse at we can return the card to you.	ceived by (Print	Print your name and address on the reverse so that we can return the card to you.	B. Received by Different Marker 13 C. Date of Deliver
It this card to the back of the mailpiece, the front if space permits.		 Attach this card to the back of the mailpiece, or on the front if space permits. 	ATAFE W
) Addressed to:	D. Is delivery address different from item 1?	1. Article Addressed to:	D. Is delivery appless different from the 17 니 Yes If YES/enter delivery address below.
			(IAN 1 3 2006)
lorado River Basin Ctrl. Forum		Chief	
ck A. Barnett		Hazardous Waste Bureau	And the state of t
16 West 500 South, Suite 101 /	3. Service Type	Runnels Building Santa Fe, NM 87504	3. Service Type 02605 CD Centified Main 026055 Mail
8.0 Jou	ery	RN 7-20	ery?
● Number fer from service label)	7005 1820 0001 6804 2130	2. Article Number :	. E25T HURY LUDU De
n 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-1540	2004 Domestic	
ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
oniete items 1 2 and 3 Also complete	A. Signature	E Complete items 1.2 and 3. Also complete	A. Signature
t if Restricted Delivery is desired.	× Celin Colon Data	 Print Your name and address on the reverse 	\sim
hat we can return the card to you. tch this card to the back of the mailpiece,	B. Received by (<i>Printed Name</i>) C. Date of Delivery	so that we can return the card to you. Attach this card to the back of the mailpiece,	й U
It the rout it space permus.	□ 2	or on the front it space permits.	EXE
ae Addressed to:	If YES, enter delivery address below:	1. Article Addressed to:	If YES, entry dedivery address beion.
ronmental Conneel A TTN: Colin A Jame			(1 M 1 3 2006)
ic Service Company of NM		Groundwater Bureau	
Silver, Southwest		Runnels Building	
iquerque, NM 87158 /	Certified Mail Express Mail Rentitive Receipt for Merchandise	Santa Fe, NM 87504	Decisition Main, Dependential
			=
RD J-26	4. Restricted Delivery? (Extra Fee)	BD J-20	4. Restricted Delivery? (Extra Fee)
the Number	1,620 0001 6804 2215	2. Article Number : : : : : : : : : : : : : : : : : : :	1,620 0001 6004 2093
m 3811, February 2004 Domestic Return Receipt	turn Receipt 102595-02-IM-1540	PS Form 3811, February 2004 Domestic Return Receipt	

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nieta tratter? 2 and 3 Alen complete	A. Signature	Complete <u>Items 1.5</u> and 3 Also complete	A. Signature
4 if Restricted Delivery is desired.	Agent Churcher Dagent	Item 4 if Restricted Delivery is desired.	X TA DAdresse
your name and address on ure reverse lat we can return the card to you. In this card to the back of the mailpiece,	d by (<i>Printed Name</i>) C. Date	 Attach this card and address of the mailpiece, Attach this card to the back of the mailpiece, 	ed by (Printed Name) C. D
) une noncin space permits. A Ardrassad to:		1. Article Addressed to:	D. Is delivery address different from item 1? Ves W.V.C. 2002 July Control of Address different from the control of the contr
	If YES, enter delivery address below:		
Tom Kennan		Attorney General's Office PO BOX 1508	501
PO BOX 202		Santa Fe, NM 87504	3. Service Type
	Certified Mail	the second of a	
	Registered Z Return Receipt for Merchandise		L Hegistered L Hegistered L Hegistered L Hegistered Mail C.O.D.
736	, Gil	B-DJ-26	4. Restricted Delivery? (Extra Fee)
e Number i i i i 7005 1820	320 0001 6804 3540	2. Article Number (fransfer from service label) 7005 1.5	1820 0001 6804 2062
n 3811, February 2004 Domestic Return Receipt	urni.Receipt 102595-02-14-1540	PS Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-15 ^z
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
implete tterns 1, 2, and 3. Also complete m 4 if Restricted Delivery is desired. int your name and address on the reverse	A Signature Agent Addressee	 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print vour name and address on the reverse 	
that we can return the card to you. tach this card to the back of the mailpiece, on the front if snace nermits	B. Received by (Printed Name) C. Date of Delivery	so that we can return the card to you. Attach this card to the back of the mailpiece,	Printed Name) C. De
icle Addressed to:	Dr. 1s delivery address different from item 1? TYes	 Article Addressed to: 	D. Is delivery address different from Item 1? D. Yes
	Sold State	eillor Lollis	
PO BOX 1013 Eunice, NM 88231	ail 🗆 Express Mail	PO BOX 38 Eunice,NM 88231	. ji
~ ,	Hegistered <u>Latteturn Receipt for Merchandise</u> Insured Mail C.O.D.		Registered Defeturin Receipt for Merchandis Insured Mail C.O.D.
7:26	4. Restricted Delivery? (Extra Fee)	7-26	ery?
	J&20 0001 6804 3670	2. Article Number [] [7005]. (Transfer from service label)	1820 0001 6804 3601
srm 38-11, February 2004 Domestig R	Domestig Return Receipt 102595-02-M-1540	PS Form 3811, February 2004 Domestic Return Receipt	um Receipt 102595-02-M-15
		۱.: :	

ER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
nplete items 1, 2, and 3. Also complete 1.4 if Restricted Delivery is desired. It your name and address on the reverse hat we can return the card to you. It this card to the back of the mailpiece,	A. Signature (44 2) 00 Agent X M. FIM (44 2) 00 Agent B. Received by (Printed Marne) 0. Data of Delivery	 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, 	A signative A luch a Agent A luch a Addresse B. Hacelvyd by (Pfinted/Deme) C. Date of Deliver
in the front if space permits. He Addressed to:	D is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No	or on the front if space permits. 1. Article Addressed to:	ddress dit
Bruce S. Garber Attorney at Law		State Parks & Recreation Director	NOROS NOROS
PO BOX 0850 Santa Fe, NM 87504-0850 j	3. Service Type Et-Certified Mail □ Express-Mail □ Registered □ Beturm Receipt for Merchandise □ Insured Mail □ C.O.D.	1220 S St Francis Santa Fe, NM 87505	3. Service Type ∴N1 A D-Certified Mail □ Express Mail □ Registered □ Aeturn Receipt for Merchandis □ Insured Mail □ C.O.D.
送込 Jー名G He Number Ster from service jabel) 11 - フロロ 5	4. Restricted Delivery? <i>(Extra Fee)</i> 디 Yes 기.유구미 미미미기, 占셤미낙 근 길 췁 5	8 D J -26 2. Article Number Gransfer from service labeli 7111 E	4. Restricted Delivery? (Extra Fee) Суез
2004 Domestic Retr		2004 + 1, i Dome	1
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
amplete items 1, 2, and 3. Also complete in 4 if Restricted Delivery is desired. int your name and address on the reverse that we can return the card to you. on the front if space permits	A. Signature X Agent B. Réceiveryoy (<i>Printed Name</i>) C. Date of Delivery	 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 mailplece, or on the front if space permits. 	Signature Kather Rold D Received by (Printed Name) C. Date
ticle Addressed to: Department of Game & Fish Director	D. Is delivery address different from item 1? If YES, enter delivery address below:	 Article Addressed to: Randy Hicks 901 Rio Grandc Blvd NW Suite F-142 	D. Is delivery address different from item 1? □ Yes If YES, enter delivery address below: □ No
Villagra Building Santa Fe, NM 87503	celpt for	Albuquerque, NM 87104	3. Service Type ☐ Centified Mail □ Express Mail □ Registered □ Aeturn Receipt for Merchandis [1 Insured Mail 0.0.0.1. 4. Restricted Delivery (Extra Fee)
ticle Number - : : - : : : : : : : : : : : : : : :			AL
orm 3811, February 2004	Lurn Receipt	PS Form 3811, February 2004 Domestic Return Receipt	urn Receipt 102595-02-M-15/
	• • • •		

ې د چې د مېښې د مېښې و وې و و و و و و و و و و و و و و و و	
DER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
In the card to the back of the mailpiece,	A Signature Agent Addressee B. Received by (<i>Printed Name</i>) C. Date of Delivery
on the front if space permits. ticle Addressed to: Aaria Collins	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
300 Rincor De Ramos Rio Rancho, NM 87124	3. Service Type ID Certified Mail Express Mail Registered Receipt for Merchandise Insured Mail C.O.D.
BD J-26	4. Restricted Delivery? (Extra Fee)
rticle Number	<u>15 1820 0001 6804 7197</u>
orm 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540

÷

.

U.S. Postal Servicem ELTL FIED MAIL RECEIPT CE stic Mail Only: No Insurance Coverage Provided 6.804 S U CONTRAC \$ Postage 1000 Certified Fee NOILY Postmall Here 50 50 50 54 50 54 50 50 Return Receipt Fee (Endorsement Required) - Ng 1,820 Restricted Delivery Fee (Endorsement Required) с С 00 USPS 4 \$ b 12. 17.51 Total Postage & Fees 7005 Sent To DJ-24 R 541 1941 12... Richard F Anderson 299 AFWEWEWEWE 296 Street, Apt. No.; or PO Box No. 2900 Vista Del Rey #20C City, State, ZIP+4 Albuquerque, NM 87112 H.A. PUNTAHE PS Form 3800, June 2002 nstru C Agent 102595-02-M-1540 C. Date of Delivery C Express Mail C Return Receipt for Merchandise 1053504 2900 Vista Del Rey #20C 87112 D Yes [%] 2° Richard F Anderson UNCLAS 1211 1221 1421 COMPLETE THIS SECTION ON DELIVERY D. Is delivery address different from item 1? N\$'7 If YES, enter delivery address below: د در ا Albuquerque 4. Restricted Delivery? (Extra Fee) 717 7005 1820 0001 6804 7173 П С.О.D. B. Received by (Printed Name) 6804 Ed Certified Mail Service Type A. Signature 1000 Domeštic Return Receipt 1,820 × eri ÷, 7005. 1-21 Attach this card to the back of the mailplece, Print your name and address on the reverse Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. so that we can return the card to you. 1---1---1 121 SENDER: COMPLETE THIS SECTION BD 2900 Vista Del Rey #20C Albuquerque, NM 87112 PS Form 38111, February 2004 or on the front if space permits. aard F Anderson (Transfer from service label) **RICE** Operating Combany Article Addressed to: ġ 2. Article Number Hobbs, NM 88240 122 West Taylor . ÷ 1 3

15 71,80 0 il Only Provide 6804 S Hans Ucre IJ X Postage \$ 1000 CONTRAC Certified Fee Postoal Return Receipt Fee (Endorsement Required) C තා හි ආ ශ් ආ භා 454 455 465 1,820 Ś Restricted Delivery Fee (Endorsement Required) **7**.1 **%**C1 (3.)OLE CHER . NIN-·*** (1) \$ Total Postage & Fees (#*1);#*5 (323) (314 2002 -1¹148 -MODE IN ¢; 7 Ð Authorn and a strain and the destruction of the E A Smith 1.1.51, 1 Street, Apt. No.: or PO Box No. PO Box 97 City, State. ZIP Eunice, NM 88231 c::1 D.S. PUNTALE June 200 C Agent Date of Deliver LA Return Receipt for Merchandis 102595-02-M-15 D Yes چ چ 727 \$ 2 9 0 0 Eunice, NM 8823 新聞の多い。 COMPLETE THIS SECTION ON DELIVERY (134 (254 (254 (254) (254) D. Is delivery address different from item 1? PO Box 97 Ċ E A Smith 7180 If YES, enter delivery address below: C Express Mail 4. Restricted Delivery? (Extra Fee) D C.O.D. X Not Deliverable As Address and 05 1820 0001 6804 7180 B, Received by (Printed Name) 6904 Service Type II Certified Mail II Registered Insured Mail ORDER EXPIRED FORWARDING 1,820 0001 A. Signature Domastic Return Receipt × ė 7005. 126 Attach this card to the back of the mailpiece, Print your name and address on the reverse Complete items 1, 2, and 3. Also complete 550 N N 1777 SENDER: COMPLETE THIS SECTION item 4 if Restricted Delivery is desired so that we can return the card to you D No Such Street D Humber , "P: 0:17 ते ज 1911 D Unclaimed D Rofusod nwonki ton - baipinouk D C LI NOVED, Left No Address or on the front if space permits. 140 OPA PS Form 3811, February 2004 D vacant contractor :31 Vinsufficient Addrass Unable To Forward 0 (Transfer from service label) Eunice, NM 88231 3 1. Article Addressed to: 🕽 🖿 Operating Company PO Box 97 ند. ت E A Smith Article Number I Hobbs, NM 88240 122 West Taylor s, C

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT

	Complete items 1, 2, and 3. Als		A. Signature
_	item 4 !f Restricted Delivery is a	(X A CALL JOMAN & Addres
1	Princ your name and address o so that we can return the card		
14	Attach this card to the back of		B. Received by (Printed Name) C. Date of Deli
-	or on the front if space permits		PARON MERTIN 21:3/2"
			D. Is delivery address different from item 17 Yes
1.	Article Addressed to:		If YES, enter delivery address below: 🛛 No
	Jay D. Martin & Sharon 1	Martin	
	PO Box 416		
	Eunice, NM 88231		
	Edified, HW 00251		3. Service Type
			Certified Mail Express Mail
			Registered -Return Receipt for Merchan
			Insured Mail C.O.D.
	RÌ	5-26	4. Restricted Delivery? (Extra Fee)
2.	Article Number		
	(Transfer from service label)	7005	1850 0001 6804 7570
PS	Form 3811, February 2004	Domestic Re	eturn Receipt 102595-02-M
			· · ·
c.e.			COMPLETE THIS SECTION ON DELIVERY
J.	ENDER: COMPLETE THIS SE	CTION .	
R	Complete items 1, 2, and 3. Als	so complete	A. Signature
	irem 4 if Restricted Delivery is a		Agent
2	Print your name and address o	n the reverse	Kilenn Prural DAddres
	so that we can return the card	to you.	B. Received by (Printed Name) C. Date of Dely
置	Attach this card to the back of		GLENN TEAGUR 3/3/06
	or on the front if space permits		
1.	Article Addressed to:		D. Is delivery address different north terr 11
••			If YES, enter delivery address below:
		,	
	Glen A Teaque		
	PO Box 533		
	_		3. Service Type
	Eunice, NM 88231		Certified Mail Express Mail
			Registered Return Receipt for Merchan
		BD 7-24	4. Restricted Delivery? (Extra Fee) Yes
2.	Article Number (Transfer from service label)		4. Restricted Delivery? (Extra Fee)
	(Transfer from service label)	7005 l	4. Restricted Delivery? (Extra Fee) □ Yes 820 0001 6804 7494
			4. Restricted Delivery? (Extra Fee) □ Yes 820 0001 6804 7494
	(Transfer from service label)	7005 l	4. Restricted Delivery? (Extra Fee) □ Yes 820 0001 6804 7494 sturn Receipt 102595-02-M-
PS	(Transfer from service label)	7005 L Domestic Re	4. Restricted Delivery? (Extra Fee) □ Yes 820 0001 6804 7494
PS SI	(Transfer from service label) Form 3811, February 2004	70051 Domestic Re	4. Restricted Delivery? (Extra Fee) □ Yes 820 0001 6804 7494 sturn Receipt 102595-02-M-
PS SI	(Transfer from service label) Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als	70051 Domestic Re CTION so complete	4. Restricted Delivery? (Extra Fee) Yes B20 D L B04 7494 turn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERY A. Signature Jagent
PS S	(Transfer from service label) Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is o	7005 J Domestic Re CTION so complete desired.	4. Restricted Delivery? (Extra Fee) Yes B20 D L B04 7494 sturn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERY A. Signature If Agent
PS S	(Transfer from service label) Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is of Print your name and address of	7005 J Domestic Re CTION so complete desired. n the reverse	4. Restricted Delivery? (Extra Fee) Yes B20 D001 B804 7494 turn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERY A. Signature Sagent X M.T.A.I.A Address
PS Si	(Transfer from service label) Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is Print your name and address o so that we can return the card	7005 L Domestic Re CTION so complete desired. n the reverse to you.	4. Restricted Delivery? (Extra Fee) Yes B20 1000000000000000000000000000000000000
PS Si	(Transfer from service label) Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is Print your name and address o so that we can return the card Attach this card to the back of	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes B20 1000000000000000000000000000000000000
PS Si	(Transfer from service label) 5 Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is of Print your name and address of so that we can return the card Attach this card to the back of or on the front if space permits	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes B20 0001 6804 7494 eturn Receipt 102595-02-M COMPLETE THIS SECTION ON DELIVERY A. Signature 104 X 104 B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes
PS Si	(Transfer from service label) Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is Print your name and address o so that we can return the card Attach this card to the back of	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes B20 1000000000000000000000000000000000000
PS Si	(Transfer from service label) 5 Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is of Print your name and address of so that we can return the card Attach this card to the back of or on the front if space permits	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes B20 0001 6804 7494 eturn Receipt 102595-02-M COMPLETE THIS SECTION ON DELIVERY A. Signature 104 X 104 B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes
PS Si	(Transfer from service label) Form 3811, February 2004 ENDEM: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to:	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes B20 0001 6804 7494 eturn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERY A. Signature 104 X 104 B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes
PS Si	(Transfer from service label) Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to: Johnston Construction Inc	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes B20 0001 6804 7494 eturn Receipt 102595-02-M COMPLETE THIS SECTION ON DELIVERY A. Signature 104 X 104 B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes
PS S	(Transfer from service label) Form 3811, February 2004 ENDEM: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to:	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes B20 0001 6804 7494 eturn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERY A. Signature 104 X 104 B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes
PS Si	(Transfer from service label) Form 3811, February 2004 ENDER: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to: Johnston Construction Inc	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes A Eli IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
PS	(Transfer from service label) Form 3811, February 2004 ENDET: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is o Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to: Johnston Construction Inc PO Drawer 1769	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes A Eli IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
PS	(Transfer from service label) Form 3811, February 2004 ENDET: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is o Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to: Johnston Construction Inc PO Drawer 1769	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes A E I I I I A B I 4 7494 102595-02-M- turn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERY A. Signature I Address X I I I I A Maree) C. Date of Deli Address B. Received by (Printed Name) C. Date of Deli J. Is delivery address different from item 1? Yes If YES, enter delivery address below: No 3. Service Type Express Mail
PS	(Transfer from service label) Form 3811, February 2004 ENDET: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is o Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to: Johnston Construction Inc PO Drawer 1769	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes A E I I I I E B I 4 7494 102595-02-M- turn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERY A. Signature S-Agent X IIII Address 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 Service Type IC-Certified Mail Express Mail Registered III Return Receipt for Merchan
PS S	(Transfer from service label) Form 3811, February 2004 ENDET: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is o Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to: Johnston Construction Inc PO Drawer 1769	7005 L Dornestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes A E IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII
PS	(Transfer from service label) Form 3811, February 2004 ENDET: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is o Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to: Johnston Construction Inc PO Drawer 1769 Eunice, NM 88231 B	7005 L Domestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes A Elicitie Yes Aturn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERV A. Signature Section ON DELIVERV X Address 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 Service Type Certified Mail Express Mail Registered Pateurn Receipt for Merchander
	(Transfer from service label) Form 3811, February 2004 ENDET: COMPLETE THIS SE Complete items 1, 2, and 3. Als item 4 if Restricted Delivery is o Print your name and address o so that we can return the card Attach this card to the back of or on the front if space permits Article Addressed to: Johnston Construction Inc PO Drawer 1769	7005 L Dornestic Re CTION so complete desired. n the reverse to you. the mailpiece,	4. Restricted Delivery? (Extra Fee) Yes B20 00011 6804 7494 turn Receipt 102595-02-M- COMPLETE THIS SECTION ON DELIVERY A. Signature Section ON DELIVERY X Address B. Received by (Printed Name) C. Date of Delivery D. Is delivery address different from item 1? Yes If YES, enter delivery address below: Sector Sector 3. Service Type Service Type Incertified Mail Express Mail Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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 mailplece, or on the front if space permits. 1. Article Addressed to: Mitchell Tyree P.O. Box 665 	A. Signature X. Marking Agent EFAddressee B. Received by (Printed Name) WH-Ch TUYCC D. is delivery address different from item 12 If YES, enter delivery address below: No
Eunice, NM 88231	3. Service Type Scattering Scattering Express Mail Registered Scattering Insured Mail C.O.D.
J-26	4. Restricted Delivery? (Extra Fee)
2. Article Number (Transfer from service label) 7005 18	20 0001 6804 5001
PS Form 3811, February 2004 Domestic Re	turn.Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 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. 	A. Signature A. Signature A. Agent Addressee B. Received by (<i>Printed Name</i>) C. Date of Delivery
1. Article Addressed to: Tommie Williams P.O. Box 1355	D. Is delivery address different from item 1? Yes If YES, enter delivery address below: No
Eunice, NM 88231	3. Service Type >S Certified Mail Express Mail Registered -S Return Receipt for Merchandise Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee) Yes
2. Article Number (Transfer from service label)	5 1820 0001 6804 8101
PS Form 3811, February 2004 Domestic Retu	um Receipt 102595-02-M-1540



NEW MOXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

BILL RICHARDSON Governor

May 05, 2005

Joanna Prukop Cabinet Secretary Mark Fesmire Director Oil Conservation Division

Carolyn Doran Haynes Rice Operating Company 122 West Taylor Hobbs, New Mexico 88240

Re: Sites with confirmed Groundwater Contamination

Dear Ms. Haynes:

Pursuant to the New Mexico Oil Conservation Division rule 19.15.1.19 (Rule 19) Prevention and Abatement of Water Pollution requires all responsible persons who are abating water pollution in excess of the standards shall do so pursuant to an abatement plan approved by the director.

Therefore, Rice Operating Company is hereby required to submit individual abatement plans for OCD approval by July 15, 2005 for each of the following sites:

EME Sites;

H-13	UL	Η	Sec 13, T20s, R36E	1R0429
M-9	UL	Μ	Sec 9, T20s, R37E	1R0331
P-6	UL	Р	Sec 6, T20s, R37E	1R0422
Jct. N-5	UL	Ν	Sec 5, T20S, R37E	1R0427-90
Jct. M-16-1	UL	Μ	Sec 16, T20S, R37E	1R0427-93
Jct. K-33-1	UL	Κ	Sec 33, T19S, R37E	1R0427-92
Jct. A-20	UL	Α	Sec 20, T20S, R37E	1R0427-89
Jct. K-6	UL	Κ	Sec 6, T20S, R37E	1R0427-88
Marathon Barber EOL	UL	Ε	Sec 5, T20S, R37E	1R0427-91
jct. D-1 leak	UL	D	Sec. 1, T20S, R36E	not assigned

Carolyn Doran Hayner

May 05, 2005

Page 2

BD Sites:

Zachary Hinton EOL Jct. J-26 Jct. F-17 Jct. I-27 Jct. N-29 jct. E-3	UL UL UL UL UL	O J F I N E	Sec 12, T22S, R37E Sec 26, T21S, R37E Sec 17, T21S, R37E Sec 27, T21S, R37E Sec 29, T21S, R37E Sec 3, T22S, R37E	1R0426-36 1R0426-40 1R0426-33 1R0426-35 1R0426-37 1R0426-53
Justis Sites:				
jct. L-1 SWD H-2	UL UL	L H	Sec 1, T25S, R37E Sec 2, T26s, R37E	1R0423-0 1R0423-01
Hobbs Sites:				. .
Jct. F-29-1A I-29 Vent	UL UL	F I	Sec 29, T18S, R38E Sec 29, T18S, R38E	not assigned not assigned

After OCD receives the plans each site will be assigned a new Abatement Plan number (AP#) for tracking purposes. If you have any questions please do not hesitate to contact me at 505-476-3493 or E-mail <u>DJSanchez@state.nm.us;</u> or contact Wayne Price of my staff at 505-476-3487 or e-mail <u>WPRICE@state.nm.us</u>.

Sincerely;

Daniel La

Daniel Sanchez Enforcement and Compliance Manager DS/wp

Cc: OCD Hobbs office

Price, Wayne

From: Price, Wayne

Sent: Tuesday, February 22, 2005 8:58 AM

To: 'gil@trident-environmental.com'; Price, Wayne

Cc: Carolyn Doran Haynes (E-mail); Sheeley, Paul; Johnson, Larry

Subject: RE: J-26 site

OCD apologizes for the delayed response, Unfortunately I have been out with the worst case of Flu.

OCD hereby approves of your request with the following conditions:

- 1. Submit your findings with recommendations by March 22, 2005.
- 2. Obtain OCD approval for location of all future monitoring wells.

Please be advised that NMOCD approval of this plan does not relieve (Rice Operating) of liability should their operations fail to adequately investigate and remediate contamination that pose a threat to ground water, surface water, human health or the environment. In addition, NMOCD approval does not relieve (Rice Operating) of responsibility for compliance with any other federal, state, or local laws and/or regulations.

-----Original Message----- **From:** Gil Van Deventer [mailto:gilvandeventer@yahoo.com] **Sent:** Tuesday, February 15, 2005 10:30 AM **To:** Wayne Price **Subject:** J-26 site

Wayne

I tried caling you but there seems to be a problem with the phone system. Anyway, I submitted a response to your Dec 8th email for the BD J-26 Jct Box site (Case #1R0426-40) by your Feb 1 deadline (attached). In the response we propose 2 tasks. Task 1 is to Collect Regional Hydrogeologic Data. It turns out we need to do this *before* Task 2 which describes installing a *downgradient* MW. The data search in Task 1 is necessary because the true gradient direction is hard to determine so far. Each quarter of sampling it has shown a different *localized* direction. It turns out there are numerous water supply wells in the area so we need to know what influence they may have, if any, before installing one or more additional MWs and to determine the true downgradient direction.

So what I am asking is: do we have approval to proceed with Task 1 and hold Task 2 pending the results of Task 1?

Please advise.

Thanks, Gil

Gilbert J. Van Deventer, PG, REM, NMCS

Trident Environmental

www.trident-environmental.com

Office/Mobile: 432-638-3106



CERTIFIED MAIL RETURN RECIEPT NO. 7099 3400 0017 1737 2572

January 28, 2005

Mr. Wayne Price New Mexico Energy, Minerals, & Natural Resources Oil Conservation Division, Environmental Bureau 1220 S. St. Francis Drive Santa Fe, New Mexico 87504

Fill / Zuua

Oil Concervation Divi-1220 S. Saint Franci-Santa Fo. 1041

RE: UPDATE ON SITE WORK PLAN BD J-26 JUNCTION BOX SITE T21S-R37E-Section 26, Unit Letter J NMOCD CASE # 1R0426-40

Mr. Price:

RICE Operating Company (ROC) has retained Trident Environmental to address potential environmental concerns at the above-referenced site. The 2004 Annual Groundwater Monitoring Report for the J-26 Junction Box Site is being submitted with this update as a separate document. The recommendations herein propose further actions in response to the concerns expressed in your email dated December 8, 2004, which reads in part, as follows:

"Trident Environmental on behalf of Rice Operating Company (ROC) submitted a groundwater investigation plan dated June 20,2003. OCD approved of the plan on June 27, 2003. As of this date OCD has not received the comprehensive report with findings nor recommendations. Please provide this report no later than February 01, 2005. The report should include all of the reporting requirements as spelled out in the plan. In addition, please have your consultant provide detail information on how the groundwater gradient map is constructed, including calculations."

BACKGROUND

The J-26 Junction Box site is located in township 21 south, range 37 east, section 26, unit letter J approximately 1 mile north-northwest of the intersection of NM State Highway 18 and County Highway 176 near Eunice, NM as shown in Figure 1. Land in the site area is primarily utilized for oil and gas production and cattle ranching. Area oil and gas production is operated by John H. Hendrix Corp and the surface landowner is Delrose Scott.

PREVIOUS WORK

Initial soil sampling activities for delineation of the J-26 junction box area began on May 2, 2002, as part of ROC's junction box upgrade program. Sampling results indicated TPH and chloride impacts approaching the depth to groundwater at about 41 feet below ground surface (bgs).

In September 2002, excavation of TPH impacted soil was completed to a depth of 42 feet bgs. The excavated soil was land farmed on site, with the exception of 480 cubic yards of TPH impacted soil,

which was transported to the Sundance facility in Eunice, NM. Clean backfill was placed in the deep excavation from 42 feet to 27 feet bgs. A 12-inch compacted clay liner was then installed prior to backfilling with the remediated soil in 3-foot lifts. A second 12-inch compacted liner was installed at 5 feet bgs. The remaining remediated soil was placed above the clay liner and contoured to drain rainwater away from the area above the liner. A new replacement junction box was installed about 60 feet north of the former location. The surface was then reseeded and monitored for growth.

On October 10, 2002, a monitoring well (MW-1) was installed immediately adjacent to the southeast corner of the excavated area. Subsequent sampling of MW-1 confirmed that groundwater was impacted with chloride and TDS levels above WQCC standards, however there was no hydrocarbon impact based on BTEX concentrations below laboratory detection limit of 0.001 mg/L. The disclosure report detailing all of the above-referenced work was completed on October 29, 2002 and forwarded to the NMOCD in early 2003 along with the disclosure reports for other sites.

A work plan addressing further actions was submitted by Trident Environmental on June 20, 2003 and was approved by the NMOCD on June 27, 2003. In accordance with the work plan, monitoring wells MW-2 and MW-3 were installed approximately 220 feet down gradient (south-southeast) and approximately 150 feet upgradient (northwest) of MW-1, respectively, on August 19, 2003. Subsequent sampling results indicated MW-2 and MW-3 delineated the downgradient and upgradient extent of chloride and TDS impact to groundwater. Quarterly monitoring of the groundwater has been conducted since the installation of MW-1. A complete report of the past quarterly monitoring and sampling results has been forwarded to you.

The source of this impact is historical. There is no longer a threat of compounded impact from the vadose zone at this site because of the excavation, lining and backfilling of the former source area near MW-1. The rapid decline of chloride and TDS concentrations in MW-1 by more than an order of magnitude over the last 2 years support this fact. ROC understands your concern that there is a possibility that the rapid decline in chloride/TDS concentrations in MW-1 are a result of downgradient migration of the plume. Therefore, continued groundwater monitoring and a more complete delineation of the chloride/TDS plume are needed to assess any potential risk to downgradient receptors (water wells) from a migrating plume.

RECOMMENDATION FOR FURTHER ACTIONS

As discussed above, existing site data and analysis document impairment of ground water quality. The following tasks are designed to assist ROC in selecting an appropriate groundwater remedy.

Task 1 Collect Regional Hydrogeologic Data

Due to the varying groundwater gradient direction over the past four quarterly sampling events ROC has determined that an expanded data search for existing water wells in the area must be made to define the regional gradient pattern in order to determine the proper downgradient direction. Also, this data search is necessary to establish background water quality conditions, particularly chloride and TDS concentrations. Approximately nine water wells within a one-mile radius of the site were identified based on information from the United States Geological Survey (USGS) and New Mexico Office of the State Engineer (SEO) website databases. The location of these water wells are shown in Figure 1 and listed in Table 1. A site visit and well access is necessary to verify the existence of the area water wells and to acquire current data (depth to groundwater, chloride and TDS concentrations) from them. A regional groundwater gradient map and chloride/TDS concentration map will be constructed after compiling the necessary data.

Task 2 Evaluate Concentrations of Constituents of Concern in Ground Water

To address your concern whether the chloride/TDS plume has migrated offsite an additional monitoring well (MW-4) will be placed approximately halfway (1,000 feet east-southeast) between MW-1 and the nearest potential receptor which is an abandoned windmill (SEO File No. 0220). The proposed monitoring well location is on the site map (Figure 1). During drilling operations, soil samples will be collected periodically (five feet intervals) and field-tested for chloride content using the titration method. The monitoring well will be completed as described in the attached well construction diagram.

The information gathered from tasks 1 and 2 will be evaluated and utilized to design a groundwater remedy if needed. The ground water remedy that offers the greatest environmental benefit while causing the least environmental impairment will be selected. Such recommendations and findings will be presented to NMOCD in a subsequent Corrective Action Plan (CAP). When evaluating any proposed remedy or investigative work, ROC will confirm that there is a reasonable relationship between the benefits created by the proposed remedy or assessment and the economic and social costs.

ROC is the service provider (operator) for the BD SWD System and has no ownership of any portion of the pipeline, well, or facility. The System is owned by a consortium of oil producers, System Partners, who provide all operating capital on a percentage ownership/usage basis. Environmental projects of this magnitude require System Partner AFE approval and work begins as funds are received. In general, project funding is not forthcoming until NMOCD approves the work plan. Therefore, your timely review of this submission is requested.

We appreciate the opportunity to work with you on this project. Please feel free to call me at 432-638-3106 or Kristin Farris Pope at 505-393-9174, if you have any questions.

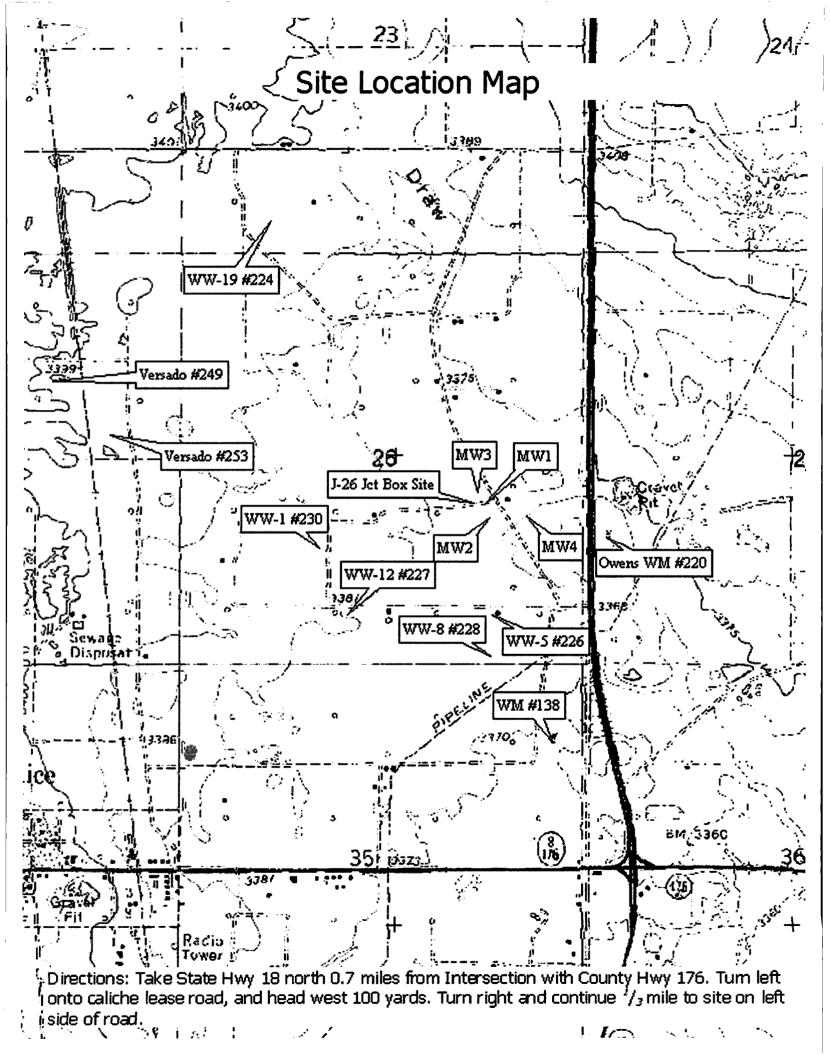
Sincerely,

Gilbert Of Van Dant

Gilbert J. Van Deventer, REM, PG, NMCS Project Manager

cc: CDH, KFP, file

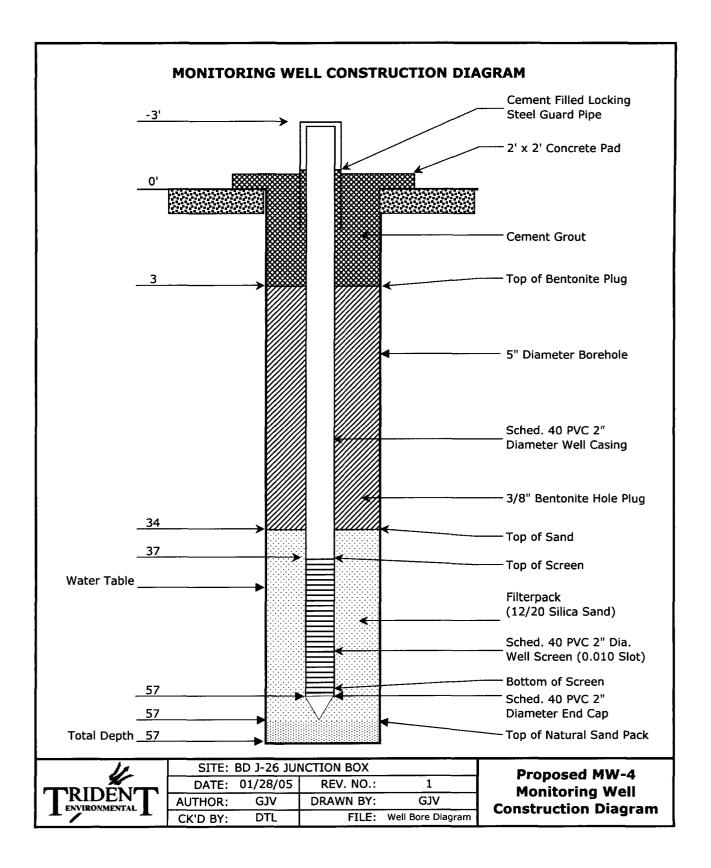
enclosures: site location map and photos



SEO File No. Ov 220 M	wner 1. W. Owens	Well Use	Well ID	XX7_11_X	Well	Distance/Direction
		Well Use	Well ID	XX7 - 11 T	— 1	
220 M	W Owens		n en ne	Well Location	Depth	From J-26 Jct Box
	1. W. OWCHS	Stock	Windmill	T21S R37E Sec 25.311	53'	1,200' ESE
226 Ve	ersado Gas Processors LLC	Industrial	WW-5	T21S R37E Sec 26.441	80'	1,700' SSE
230 Ve	ersado Gas Processors LLC	Industrial	WW-1	T21S R37E Sec 26.323	85'	1,900' SW
227 Ve	ersado Gas Processors LLC	Industrial	WW-12	T21S R37E Sec 26.432	85'	2,100' SW
228 Ve	ersado Gas Processors LLC	Industrial	WW-8	T21S R37E Sec 26.434	90'	2,200' SSE
138 M	Iarion and William O Stephens	Stock	Windmill	T21S R37E Sec 35.223	47'	3,500' SSE
224 Ve	ersado Gas Processors LLC	Industrial	WW-19	T21S R37E Sec 23.334	96'	4,300' NW
253 Ve	ersado Gas Processors LLC	Industrial		T21S R37E Sec 27.243	102'	4,600' WNW
249 Ve	ersado Gas Processors LLC	Industrial		T21S R37E Sec 27.232	102'	5,500' WNW

Water Wells Within One Mile of J-26 Junction Box Site

â



Price, Wayne

From: Sent: To: Cc: Subject: Price, Wayne Thursday, December 09, 2004 10:42 AM Carolyn Doran Haynes (E-mail); Kristin Farris Pope (E-mail) Randall Hicks (E-mail); Gil Van Deventer (E-mail) Path Forward

Dear Ms. Haynes:

The OCD has logged every ROC site into our RBDM system. I will be sending you this comprehensive list. The list will have case numbers for all of our sites. I would like to see Kristin add those numbers to here spreadsheet if possible. I will be in the process of reviewing all of the closure sites (i.e. green sheet cover) and hope to send you approvals so we can close those sites out. I would also think it would be helpful if ROC would spell out on your spread sheet how each site was being closed. For example if one of the generic plans is or was used please note that, If not then signify type of closure, i.e. case-by-case, etc.

For disclosure sites, I am going to try to let ROC set the priority for these sites, however if we receive a complaint or in OCD's opinion it is a possible threat to public health then we may ask you to address that particular site.

I have already sent you my comments concerning the monument area up-gradient groundwater issue. The vadose zone and groundwater issues will have to be addressed. One thing we might do is set a lower priority on those sites and delay work until we have more data.

The other issue of concern for OCD is where disclosure sites had groundwater contamination and over a period of time this contamination has been reduced below the groundwater standards by dilution. OCD is very concerned that salt density gradient plumes are simply moving off site and thus could degrade down-gradient fresh water sources. OCD has a fiduciary duty to make sure this is not happing. Therefore, ROC will be expected to demonstrate this phenomenon is not happing. OCD will not accept models that demonstrate this unless monitor wells are installed to calibrate the model.

1

Sincerely:

Wayne Price New Mexico Oil Conservation Division 1220 S. Saint Francis Drive Santa Fe, NM 87505 505-476-3487 fax: 505-476-3462 E-mail: WPRICE@state.nm.us

Price, Wayne

From:Gilbert J Van Deventer [kickbooty@juno.com]Sent:Thursday, December 09, 2004 9:03 AMTo:WPrice@state.nm.usCc:riceswd@leaco.net; enviro@leaco.netSubject:Re: BD J-26 site

Attached is the work plan for the BD J-26 Junction Box site in pdf format which you approved last year. Since the installation of the two proposed upgradient and downgradient monitoring wells in October 2003 Rice has been conducting quarterly sampling with the intention of sending a 2004 year-end report of conclusions and recommendations as spelled out in the plan (Page 3 under "Reporting Requirements"). Since we conducted the last quarter sampling for this year in November that report is being prepared at this time and will be submitted to you no later than February 01, 2005.

I will call you this morning to discuss options.

Thanks, Gil

Gilbert J. Van Deventer, PG, NMCS, REM <u>gil@trident-environmental.com</u> Trident Environmental, PO Box 7624, Midland TX 79708-7624 Office: 432-682-0808, Fax/Home: 432-682-0727, Mobile: 432-638-3106 Website Address: <u>www.trident-environmental.com</u> On Wed, 8 Dec 2004 16:58:11 -0700 "Price, Wayne" <<u>WPrice@state.nm.us</u>> writes:

Thank you for the information: I will still need the report for the plan I originally approved and investigation plan for the site to demonstrate that the salt plume has not simply moved off-site. Is it contaminating down gradient sources of fresh water? The only way to tell this and build confidence in this approach is to install a monitor well. Rice shall submit the plan I requested.

-----Original Message----- **From:** Gilbert J Van Deventer [mailto:kickbooty@juno.com] **Sent:** Wednesday, December 08, 2004 3:58 PM **To:** WPrice@state.nm.us **Cc:** riceswd@leaco.net; enviro@leaco.net **Subject:** Re: BD J-26 site

Wayne:

Attached is the latest data for J-26 in Adobe pdf format. This site was recently sampled last month (11-09-04).

To answer your question regarding how the groundwater gradient map is constructed I have been using Surfer® (version 6.0) to determine groundwater gradients. This program has been around for many years (over 10) and seems to be the industry standard for constructing groundwater gradient maps and isopleths for contaminants of concern. Of the options available within Surfer I use the following methods for constructing most of my groundwater gradient maps: Grid Method: Kriging Variogram Model: Quadratic Drift Type: Linear (Because the groundwater gradients tend to vary around a linear trend) Scale (C) = 0.295, Length (A) = 180

After getting the final output (groundwater gradient map) from Surfer, I export it into dxf format so I can then import it into my CAD program (TurboCad) for a much better look, that is, so I can include site features (roads, tanks, etc.), legends, scale bar, analytical results, etc.

Attached is another pdf file that explains the options in Surfer and how they are used. As far as calculations go I can provide you the spreadsheet files, input and output files but I'm guessing you don't want that level of detail.

If you have any questions please feel free to call or email me.

Sincerely,

Gilbert J. Van Deventer, PG, NMCS, REM <u>gil@trident-environmental.com</u> Trident Environmental, PO Box 7624, Midland TX 79708-7624 Office: 432-682-0808, Fax/Home: 432-682-0727, Mobile: 432-638-3106 Website Address: <u>www.trident-environmental.com</u>

On Wed, 8 Dec 2004 13:46:33 -0700 "Price, Wayne" <<u>WPrice@state.nm.us</u>> writes: Dear Ms. Haynes:

Trident Environmental on behalf of Rice Operating Company (ROC) submitted a groundwater investigation plan dated June 20,2003. OCD approved of the plan on June 27, 2003. As of this date OCD has not received the comprehensive report with findings nor recommendations. Please provide this report no later than February 01, 2005. The report should include all of the reporting requirements as spelled out in the plan. In addition, please have your consultant provide detail information on how the groundwater gradient map is constructed, including calculations.

OCD is in receipt of ROC annual monitoring reports. The reports indicate groundwater has been impacted by ROC operations, so therefore please include a remediation plan to address removing the groundwater contamination.

Sincerely:

Wayne Price New Mexico Oil Conservation Division 1220 S. Saint Francis Drive Santa Fe, NM 87505 505-476-3487 fax: 505-476-3462

E-mail: <u>WPRICE@state.nm.us</u>

Confidentiality Notice: This e-mail,including all attachments is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited unless specifically provided under the New Mexico Inspection of Public Records Act. If you are not the intended recipient, please contact the sender and destroy all copies of this message. -- This email has been scanned by the MessageLabs Email Security System.

This email has been scanned by the MessageLabs Email Security System. For more information please visit http://www.messagelabs.com/email

Confidentiality Notice: This e-mail, including all attachments is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited unless specifically provided under the New Mexico Inspection of Public Records Act. If you are not the intended recipient, please contact the sender and destroy all copies of this message. -- This email has been scanned by the MessageLabs Email Security System.

This email has been scanned by the MessageLabs Email Security System. For more information please visit http://www.messagelabs.com/email



June 20, 2003

Mr. Wayne Price Environmental Bureau New Mexico Oil Conservation Division 1220 South St. Francis Drive Santa Fe, New Mexico 87505

RE: Work Plan for Blinebry-Drinkard J-26 Junction Box Site T21S, R37E, SEC 26, Unit Letter J Lea County, New Mexico

Dear Mr. Price:

Trident Environmental has been retained by Rice Operating Company (Rice) to develop and submit this work plan for further actions regarding the chloride and total dissolved solids (TDS) -impacted groundwater at the Blinebry-Drinkard J-26 junction box site. NMOCD approval of this work plan will be necessary so that Rice can obtain an authorization for expenditure (AFE) from their system partners prior to initiating the activities specified herein.

Although the concentrations of chloride (4,520 mg/L) and TDS (9,020 mg/L) are above the New Mexico Water Quality Control Commission (WQCC) standards of 250 mg/L and 1,000 mg/L, respectfully, significant remediation work has already been completed by Rice (excavation to 42 feet below land surface and placement of clay liners at 5 feet at 27 feet). In fact, chloride and TDS concentrations have already decreased significantly since completion of the remediation work. With that in mind, Trident recommends the actions described below be taken.

Potential Receptors

No residence or manned facilities are located within one half mile of the site. Numerous oil and gas operations are in the site area including an active tank battery and oil well located approximately 200 feet east and 400 feet east-northeast of the site, respectively. Based on a review of water well records listed on the New Mexico State Engineer Office and United States Geological Survey (USGS) websites, windmills marked on the USGS Hobbs SW topographic map, there are no water supply wells located within 1,000 feet of the site.

Installation of Groundwater Monitoring Wells

One monitoring well (MW-1) was installed directly within the former source area on October 10, 2002, and sampled on a quarterly basis for major ions (chloride, sulfate, bicarbonate, carbonate, calcium, magnesium, sodium, potassium), total dissolved solids (TDS), and benzene, toluene, ethylbenzene, and xylenes (BTEX). A summary of pertinent analytical results is listed in the following table.



Blinebry-Drinkard J-26 Junction Box June 20, 2003 Page 2 of 3

Date	Depth to Groundwater	Chloride	TDS	BTEX
Sampled 10/29/02	(feet) 43.02	(mg/L) 4,520	(mg/L) 9.020	(mg/L) < 0.001
02/28/02	43.02	4,520 3,470	9,020 6,870	< 0.001

Summary of Groundwater Analytical Results for MW-1

Based on the chloride and TDS concentrations observed in MW-1, Trident recommends the installation of additional monitoring wells to delineate the horizontal extent of the chloride/TDS plume and determine the magnitude and direction of the groundwater gradient. The suspected direction of groundwater flow is to the southeast, therefore Trident recommends installation of the additional monitoring wells at the locations listed below.

- MW-2 approximately 220 ft. southeast of MW-1 in the presumed down gradient direction.
- MW-3 approximately 150 ft. west-northwest of MW-1 in the presumed upgradient direction
- MW-4 approximately 100 200 ft. down gradient from MW2 only if MW2 indicates groundwater is impacted with greater than 250 mg/l chlorides or 1,000 mg/l TDS

A site map showing the proposed monitoring well locations is included in Attachment A. During drilling operations, soil samples will be collected periodically (five feet intervals) and field-tested for chloride content using the titration method (QP-03 in Attachment B). Monitoring wells will be completed as described in the well construction diagram in Attachment B.

Monitoring Well Sampling Procedures

Prior to sampling, the monitoring will be gauged for depth to groundwater using an electronic water level indicator. Immediately prior to collecting groundwater samples, each monitoring well will be purged of a minimum of three well casing volumes of water using a new, clean, decontaminated disposable bailer. Water samples will be collected with the disposable bailer and transferred into appropriately preserved containers for analysis of major ions, TDS, and BTEX. Chain-of-custody (COC) forms documenting sample identification numbers, collection times, and delivery times to the laboratories will be completed for each set of samples. The water samples will be placed in an ice-filled cooler immediately after collection and transported to Environmental Lab of Texas in Odessa, Texas, or other approved laboratory, for analysis of the aforementioned constituents. Purging and water sampling procedures are described in further detail in Attachment B (QP-04 and QP-05).

Fate and Transport Modeling

If chloride concentrations in upgradient areas indicate that past operations at the BD J-26 site have impaired groundwater quality to levels above background levels, then fate and transport modeling is appropriate. The data obtained from the on site monitoring wells with other site specific information will be input into a fate and transport model such as WinTran (Version 1.3) to determine if the chloride/TDS plume will eventually attenuate by dispersion and dilution to levels below WQCC standards without risk to the human health and the environment.



Blinebry-Drinkard J-26 Junction Box June 20, 2003 Page 3 of 3

Reporting Requirements

Depth to water measurements and groundwater samples will be obtained on a quarterly frequency for one year beginning immediately after the installation of the proposed new monitoring wells and annually thereafter. An annual groundwater investigation and monitoring report describing the monitoring well construction, sampling procedures, analytical results, modeling results, and conclusions of the investigation will be submitted to the New Mexico Oil Conservation Division (NMOCD). The following elements will be included in the annual report:

- ▲ A lithologic description and well completion diagram of the subsurface soils encountered, conditions observed, and construction details of each monitoring well.
- Groundwater elevation data and chloride and TDS concentrations for each monitoring event will be summarized in tabular format.
- Groundwater elevation map depicting the water table elevations and direction of groundwater flow for each sampling event.
- Chloride and TDS concentration maps for each sampling event.
- Maps displaying the modeled fate and transport of the chloride/TDS plume with respect to time.
- Identification of potential receptors
- **Kecommended further actions.**

The proposed activities will be performed in accordance with NMOCD "Guidelines for Remediation of Leaks, Spills, and Releases" (August 13, 1993). Notice will be provided to the NMOCD at least one week prior to each sampling event.

NMOCD approval of this work plan is hereby requested so that Rice can obtain an AFE from their system partners prior to initiating these activities. We appreciate the opportunity to work with you on this project. Please feel free to call me at 432-682-0808, or Carolyn Haynes at 505-393-9174, if you have any questions.

Sincerely,

Gilbert J. Van Deventer, REM, NMCS Project Manager

cc: Carolyn Haynes (Rice Operating Company - Hobbs, NM)

Attachments

ATTACHMENTS

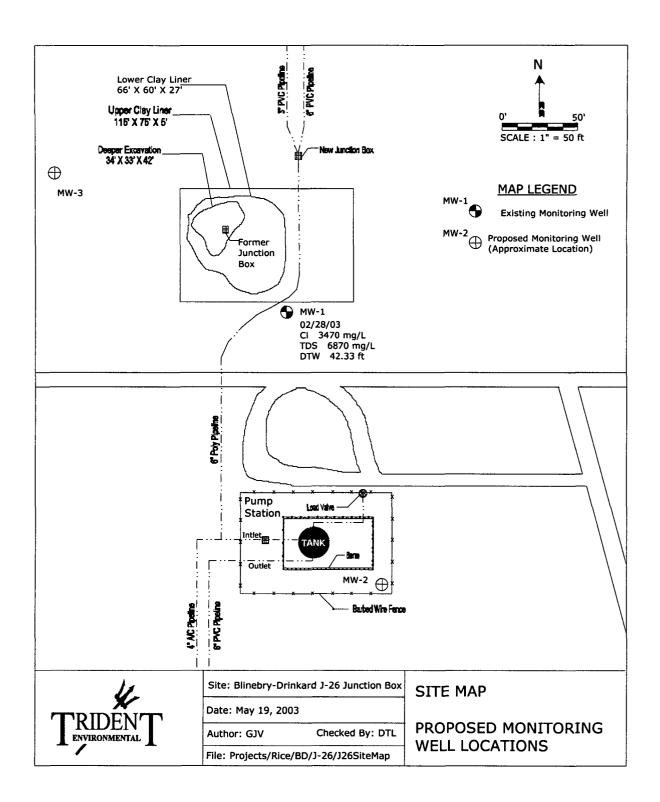
,

ATTACHMENT A

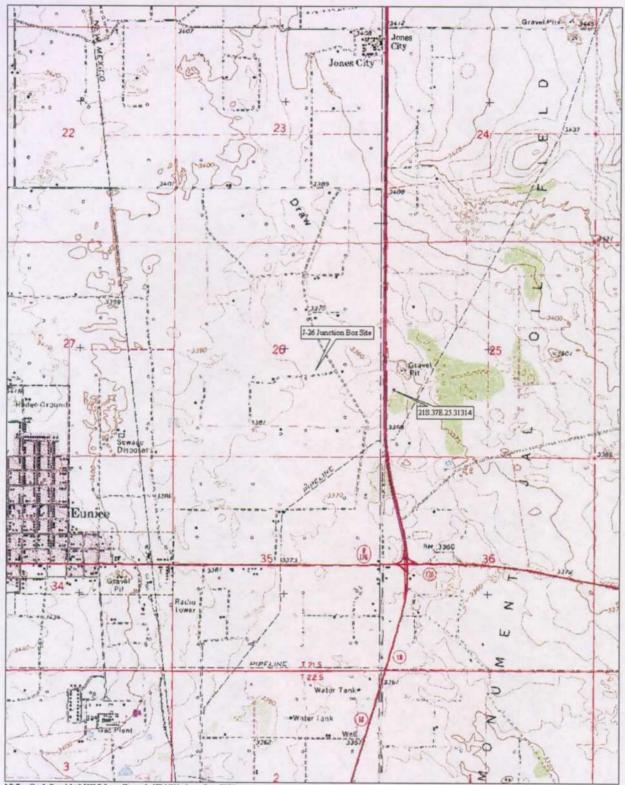
.

PROPOSED MONITORING WELL LOCATION MAP

AND TOPOGRAPHIC MAP



ļ



3-D Tope Quads Copyright © 1999 DeLarme Yannouth, ME 64096 Source Data: USG5 ______ 700 ft Scale: 1 : 24,000 Detail: 13-0 Datam: WG584

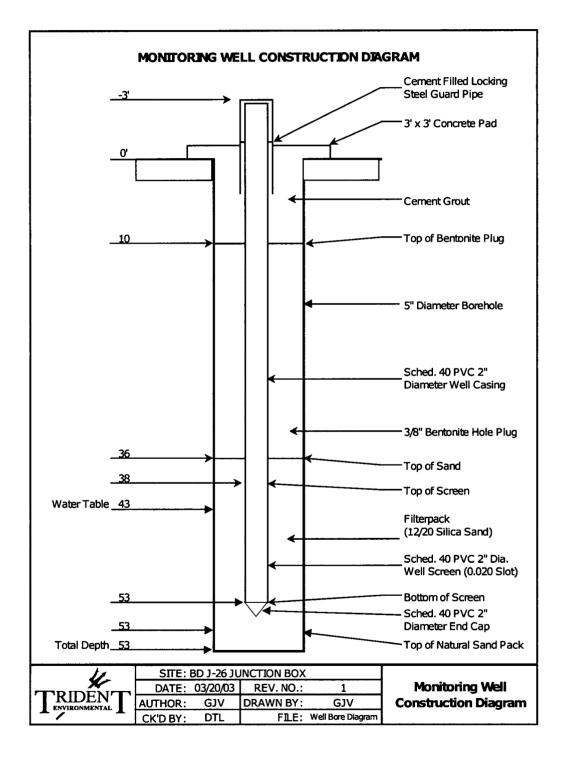
ATTACHMENT B

MONITORING WELL CONSTRUCTION DIAGRAM

SAMPLING AND TESTING PROTOCOL FOR CHLORIDE TITRATION

PROCEDURE FOR DEVELOPING CASED WATER MONITORING WELLS

PROCEDURE FOR OBTAINING WATER SAMPLES (CASED WELLS)



Price, Wayne

From: Price, Wayne

Sent: Wednesday, December 08, 2004 4:58 PM

To: 'Gilbert J Van Deventer'; Price, Wayne; Carolyn Doran Haynes (E-mail); Kristin Farris Pope (E-mail)

Cc: riceswd@leaco.net; enviro@leaco.net

Subject: RE: BD J-26 site

Thank you for the information: I will still need the report for the plan I originally approved and investigation plan for the site to demonstrate that the salt plume has not simply moved off-site. Is it contaminating down gradient sources of fresh water? The only way to tell this and build confidence in this approach is to install a monitor well. Rice shall submit the plan I requested.

-----Original Message----- **From:** Gilbert J Van Deventer [mailto:kickbooty@juno.com] **Sent:** Wednesday, December 08, 2004 3:58 PM **To:** WPrice@state.nm.us **Cc:** riceswd@leaco.net; enviro@leaco.net **Subject:** Re: BD J-26 site

Wayne:

Attached is the latest data for J-26 in Adobe pdf format. This site was recently sampled last month (11-09-04).

To answer your question regarding how the groundwater gradient map is constructed I have been using Surfer® (version 6.0) to determine groundwater gradients. This program has been around for many years (over 10) and seems to be the industry standard for constructing groundwater gradient maps and isopleths for contaminants of concern. Of the options available within Surfer I use the following methods for constructing most of my groundwater gradient maps:

Grid Method: Kriging Variogram Model: Quadratic Drift Type: Linear (Because the groundwater gradients tend to vary around a linear trend) Scale (C) = 0.295, Length (A) = 180

After getting the final output (groundwater gradient map) from Surfer, I export it into dxf format so I can then import it into my CAD program (TurboCad) for a much better look, that is, so I can include site features (roads, tanks, etc.), legends, scale bar, analytical results, etc.

Attached is another pdf file that explains the options in Surfer and how they are used. As far as calculations go I can provide you the spreadsheet files, input and output files but I'm guessing you don't want that level of detail.

If you have any questions please feel free to call or email me.

Sincerely,

Gilbert J. Van Deventer, PG, NMCS, REM gil@trident-environmental.com Trident Environmental, PO Box 7624, Midland TX 79708-7624 Office: 432-682-0808, Fax/Home: 432-682-0727, Mobile: 432-638-3106 Website Address: www.trident-environmental.com

On Wed, 8 Dec 2004 13:46:33 -0700 "Price, Wayne" <<u>WPrice@state.nm.us</u>> writes: Dear Ms. Haynes:

Trident Environmental on behalf of Rice Operating Company (ROC) submitted a groundwater investigation plan dated June 20,2003. OCD approved of the plan on June 27, 2003. As of this date OCD has not received the comprehensive report with findings nor recommendations. Please provide this report no later than February 01, 2005. The report should include all of the reporting requirements as spelled out in the plan. In addition, please have your consultant provide detail information on how the groundwater gradient map is constructed, including calculations.

OCD is in receipt of ROC annual monitoring reports. The reports indicate groundwater has been impacted by ROC operations, so therefore please include a remediation plan to address removing the groundwater contamination.

Sincerely:

Wayne Price New Mexico Oil Conservation Division 1220 S. Saint Francis Drive Santa Fe, NM 87505 505-476-3487 fax: 505-476-3462 E-mail: <u>WPRICE@state.nm.us</u>

Confidentiality Notice: This e-mail, including all attachments is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited unless specifically provided under the New Mexico Inspection of Public Records Act. If you are not the intended recipient, please contact the sender and destroy all copies of this message. -- This email has been scanned by the MessageLabs Email Security System.

This email has been scanned by the MessageLabs Email Security System. For more information please visit http://www.messagelabs.com/email

Page 1 of 2

Price, Wayne

4

From: Gilbert J Van Deventer [kickbooty@juno.com]

Sent: Wednesday, December 08, 2004 3:58 PM

To: WPrice@state.nm.us

Cc: riceswd@leaco.net; enviro@leaco.net

Subject: Re: BD J-26 site

Wayne:

Attached is the latest data for J-26 in Adobe pdf format. This site was recently sampled last month (11-09-04).

To answer your question regarding how the groundwater gradient map is constructed I have been using Surfer® (version 6.0) to determine groundwater gradients. This program has been around for many years (over 10) and seems to be the industry standard for constructing groundwater gradient maps and isopleths for contaminants of concern. Of the options available within Surfer I use the following methods for constructing most of my groundwater gradient maps:

Grid Method: Kriging Variogram Model: Quadratic Drift Type: Linear (Because the groundwater gradients tend to vary around a linear trend) Scale (C) = 0.295, Length (A) = 180

After getting the final output (groundwater gradient map) from Surfer, I export it into dxf format so I can then import it into my CAD program (TurboCad) for a much better look, that is, so I can include site features (roads, tanks, etc.), legends, scale bar, analytical results, etc.

Attached is another pdf file that explains the options in Surfer and how they are used. As far as calculations go I can provide you the spreadsheet files, input and output files but I'm guessing you don't want that level of detail.

If you have any questions please feel free to call or email me.

Sincerely,

Gilbert J. Van Deventer, PG, NMCS, REM gil@trident-environmental.com Trident Environmental, PO Box 7624, Midland TX 79708-7624 Office: 432-682-0808, Fax/Home: 432-682-0727, Mobile: 432-638-3106 Website Address: www.trident-environmental.com

On Wed, 8 Dec 2004 13:46:33 -0700 "Price, Wayne" <<u>WPrice@state.nm.us</u>> writes: Dear Ms. Haynes:

Trident Environmental on behalf of Rice Operating Company (ROC) submitted a groundwater investigation plan dated June 20,2003. OCD approved of the plan on June 27, 2003. As of this date OCD has not received the comprehensive

report with findings nor recommendations. Please provide this report no later than February 01, 2005.

The report should include all of the reporting requirements as spelled out in the plan. In addition, please have your consultant provide detail information on how the groundwater gradient map is constructed, including calculations.

OCD is in receipt of ROC annual monitoring reports. The reports indicate groundwater has been impacted by ROC operations, so therefore please include a remediation plan to address removing the groundwater contamination.

Sincerely:

r;

Wayne Price New Mexico Oil Conservation Division 1220 S. Saint Francis Drive Santa Fe, NM 87505 505-476-3487 fax: 505-476-3462 E-mail: <u>WPRICE@state.nm.us</u>

Confidentiality Notice: This e-mail,including all attachments is for the sole use of the intended recipient(s) and may contain confidential and privileged information. Any unauthorized review, use, disclosure or distribution is prohibited unless specifically provided under the New Mexico Inspection of Public Records Act. If you are not the intended recipient, please contact the sender and destroy all copies of this message. -- This email has been scanned by the MessageLabs Email Security System.

This email has been scanned by the MessageLabs Email Security System. For more information please visit http://www.messagelabs.com/email Surfer allows for a general nested variogram model incorporating three components. Because of this there are more than five hundred possible combinations of variogram models. Each of the three components can be selected from seven common variogram functions: Spherical, Exponential, Linear, Gaussian, Hole-Effect, Quadratic, and Rational Quadratic. Each of the components allow for independent specification of the anisotropy.

Computing an experimental variogram from your data is the only certain way to determine which variogram model you should use. A detailed variogram analysis can offer insights into the data that would not otherwise be available, and it allows for an objective assessment of the variogram scale and anisotropy. There are lengthy chapters in many geostatistics textbooks discussing the tools and techniques necessary to generate a variogram (e.g. Isaaks and Srivastava, 1989).

When in doubt, you should use the Linear variogram model with the default Scale (C) and Length (A) parameters.

With the exception of the Linear variogram model (which does not have a sill), the Scale parameters (denoted by C in the variogram equations) define the sill for the variogram components you select. Thus, the sill of the variogram model equals the Nugget Effect plus the sum of the components Scale (C) parameters. In most situations, the variogram model sill is approximately equal to the variance of the observed data.

The Length (A) parameters define how rapidly the variogram components change with increasing separation distance. The Length (A) parameter for a variogram component is used to scale the physical separation distance. For the Spherical and Quadratic variogram functions, the Length (A) parameter is also known as the variogram range.

With a Linear variogram model, the slope is given by the Scale/Radius. By allowing an anisotropic radius, it is possible to specify an anisotropic linear variogram slope.

<u>Drift Typ</u>e

ĩ,

When the data points are evenly dispersed within the area of interest, the Drift Type option has little effect on the generated grid. The Drift Type option will have a significant effect during gridding when interpolating across large holes in the data distribution pattern, and when extrapolating beyond the limits of the data.

Three drift options are available in Surfer: No Drift, Linear Drift, and Quadratic Drift. When in doubt, it is best to use the No Drift option, meaning that the interpolation uses "Ordinary Kriging". No Drift is appropriate when your data is evenly dispersed.

The Linear Drift and Quadratic Drift options are used to implement "Universal Kriging". The use of linear or quadratic drift should be based upon knowledge of an underlying trend of the data. If the data tends to vary around a linear trend, then the Linear Drift option is most appropriate. If the data tends to vary around a quadratic trend (e.g. a parabolic bowl), then the Quadratic Drift option is most appropriate.

When using Surfer ro create groundwater gradient maps I select Kriging as the Gridding Method. Below is the how to explanations of the methods used from the Surfer help manual.

* In the Variogram Model group you can specify up to three nested variograms, and the Scale (C) and Length (A) parameters to use for each. If you do not know which variogram type to select, Linear works well in most cases. If you want to be more precise with the variogram type you should generate a variogram based on your data and compare the generated variogram with models of the different type

The Scale (C) parameter controls the vertical scale for the variogram. The variogram sill is defined as the Scale plus the Nugget Effect. You can refer to the Surfer Users Guide for more information.

You can also define anisotropy for each variogram you specify. Click the Anisotropy button and the Variogram Anisotropy dialog box is displayed. Specify the Ratio and Angle values, and the graphic image indicates the anisotopy ellipse to be applied. Click OK to return to the Kriging Options dialog box.

* The Drift Type group box allows you to select the type of drift model to apply during the Kriging operation. You can select from three models.

The No Drift selection invokes Ordinary Kriging and is appropriate for Kriging of data sets with a uniformly dense distribution.

The Linear Drift and Quadratic Drift selections are most effective on data sets where large holes exist between data points, or where you are extrapolating beyond the limits of your input data.

<u>Kriging</u>

Kriging is a geostatistical gridding method that has proven useful and popular in many fields. This method produces visually appealling contour and surface plots from irregularly spaced data. Kriging attempts to express trends that are suggested in your data, so that, for example, high points might be connected along a ridge, rather than isolated by bull's-eye type contours.

Kriging is a very flexible gridding method. It can be custom fit to a data set by specifying the appropriate variogram model. Within Surfer, Kriging can be either an exact interpolator or a smoothing interpolator depending on the user specified parameters. It incorporates anisotropy and underlying trends in an efficient and natural manner.

There are three factors that are uniquely incorporated in the Kriging method: Variogram Model, the Drift Type and the Nugget Effect. These factors can all be controlled from the Kriging Options dialog box.

Variogram Model

The variogram model mathematically specifies the spatial variability of the data set and the resulting grid. The interpolation weights, which are applied to data points during the grid node calculations, are direct functions of the variogram model.

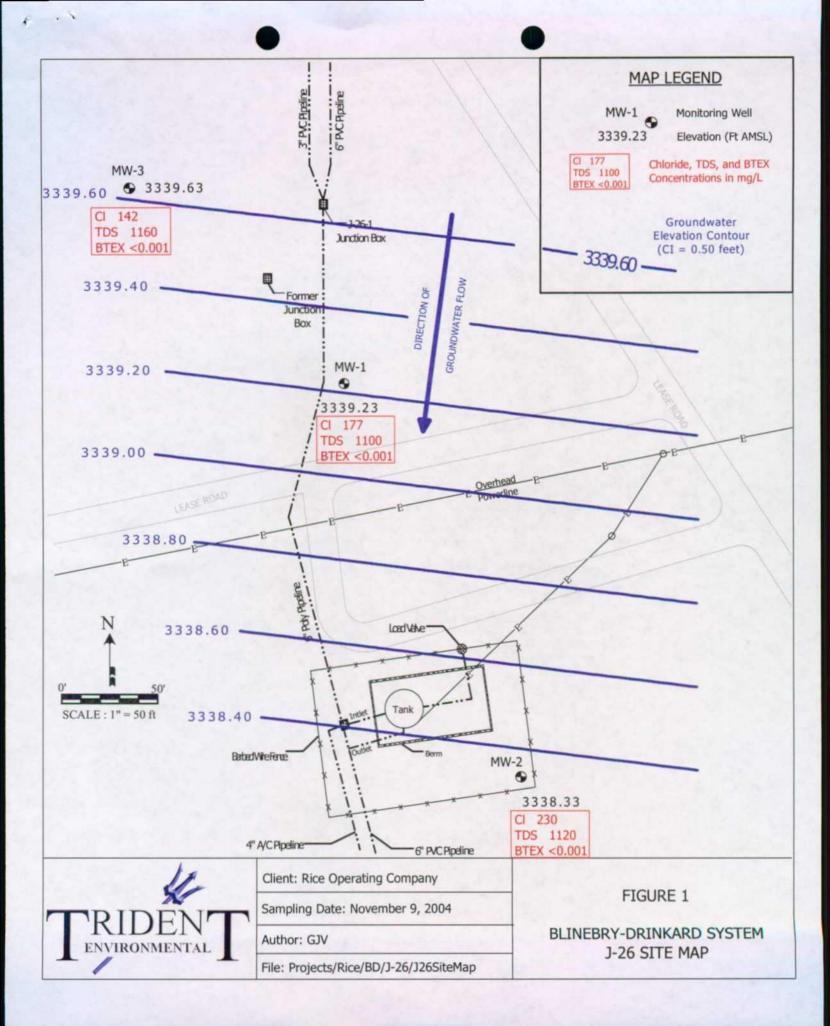




Table 1					
Summary of Groundwater Sampling Results					

BD J-26 Junction Box									
Monitoring	Sample	Chloride	TDS	Benzene	Toluene	Ethylbenzene	Xylene	Depth to	Groundwater
	10/29/02	4520	9020	< 0.001	< 0.001	< 0.001	< 0.001	43.02	3332.82
	02/28/03	3470	6870	< 0.001	< 0.001	< 0.001	< 0.001	42.33	3333.51
	06/05/03	1460	3280	< 0.001	< 0.001	< 0.001	< 0.001	43.00	3332.84
	08/22/03	957	2620	< 0.001	< 0.001	< 0.001	< 0.001	43.72	3332.12
MW-1	10/30/03	620	2040	< 0.001	< 0.001	< 0.001	< 0.001	43.91	3331.93
IV1 VV - I	02/18/04	478	1630	< 0.001	< 0.001	< 0.001	< 0.001	43.70	3332.14
	05/05/04	390	1440	< 0.001	< 0.001	< 0.001	< 0.001	40.80	3335.04
	07/08/04	230	1140	< 0.001	< 0.001	< 0.001	< 0.001	40.80	3335.04
	08/10/04	195	1080	< 0.001	< 0.001	< 0.001	< 0.001	37.02	3338.82
	11/09/04	177	1100	< 0.001	< 0.001	< 0.001	< 0.001	36.61	3339.23
	08/22/03	239	1180	< 0.001	< 0.001	< 0.001	< 0.001	43.99	3331.33
	10/30/03	239	1240	< 0.001	< 0.001	< 0.001	< 0.001	44.17	3331.15
MW-2	02/18/04	221	1150	< 0.001	0.001	< 0.001	< 0.001	43.91	3331.41
IVI VV -2	05/05/04	204	1060	< 0.001	0.001	< 0.001	< 0.001	40.98	3334.34
	08/10/04	230	1120	< 0.001	< 0.001	< 0.001	< 0.001	37.14	3338.18
	11/09/04	230	1120	< 0.001	< 0.001	< 0.001	< 0.001	36.99	3338.33
	08/22/03	160	904	< 0.001	< 0.001	< 0.001	< 0.001	43.06	3332.79
	10/30/03	168	1070	< 0.001	< 0.001	< 0.001	< 0.001	43.28	3332.57
MW-3	02/18/04	160	862	< 0.001	< 0.001	< 0.001	< 0.001	43.03	3332.82
IVI VV-3	05/05/04	160	891	< 0.001	< 0.001	< 0.001	< 0.001	40.04	3335.81
	08/10/04	164	941	< 0.001	< 0.001	< 0.001	< 0.001	36.55	3339.30
	11/09/04	142	1160	< 0.001	< 0.001	< 0.001	< 0.001	36.22	3339.63
	03/19/04	620	1730					42.04	3326.66
Windmill	05/14/04	195	736					36.33	3332.37
vv mumm	08/10/04	709	1850					32.45	3336.25
	11/09/04	727	1910					31.94	3336.76
WOCC Stan	dards	250	1000	0.01	0.75	0.75	0.62		

 WQCC Standards
 250
 1000
 0.01
 0.75
 0.75

 Total Dissolved Soilds (TDS), chloride, and BTEX concentrations listed in milligrams per liter (mg/L)
 0.01
 0.75
 0.75

Analyses performed by Cardinal Labs, Hobbs, NM (1995-1998) and Environmental Lab of Texas, Odessa, TX (1999-2003).

Values in boldface type indicate concentrations exceed New Mexico Water Quality Commission (WQCC) standards.

AMSL - Above Mean Sea Level; BTOC - Below Top of Casing

Elevations and state plane coordinates surveyed by Basin Surveys, Hobbs, NM.

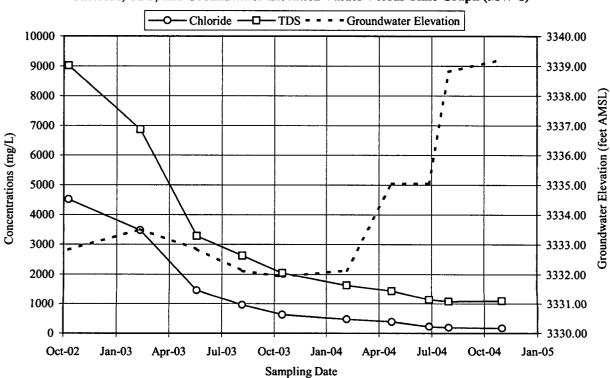


Figure 2 Chloride, TDS, and Groundwater Elevation Values Versus Time Graph (MW-1)

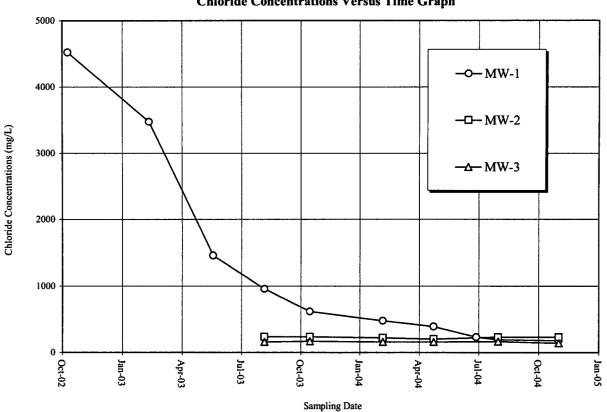
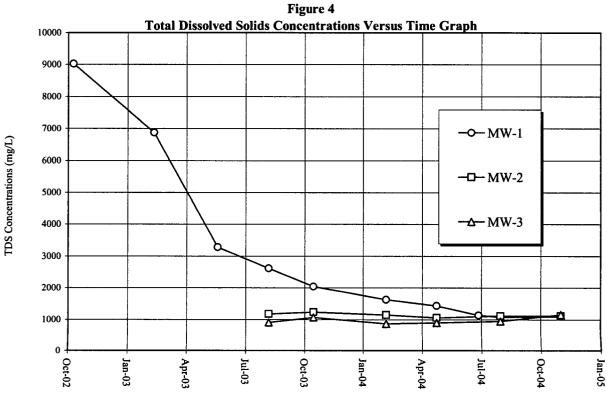


Figure 3 Chloride Concentrations Versus Time Graph

. h

,4,2



Price, Wayne

From: Sent: To: Cc: Subject: Price, Wayne Wednesday, December 08, 2004 1:47 PM Carolyn Doran Haynes (E-mail); Kristin Farris Pope (E-mail) Gil Van Deventer (E-mail) BD J-26 site

Dear Ms. Haynes:

Trident Environmental on behalf of Rice Operating Company (ROC) submitted a groundwater investigation plan dated June 20,2003. OCD approved of the plan on June 27, 2003. As of this date OCD has not received the comprehensive report with findings nor recommendations. Please provide this report <u>no later than February 01, 2005.</u> The report should include all of the reporting requirements as spelled out in the plan. In addition, please have your consultant provide detail information on how the groundwater gradient map is constructed, including calculations.

OCD is in receipt of ROC annual monitoring reports. The reports indicate groundwater has been impacted by ROC operations, so therefore please include a remediation plan to address removing the groundwater contamination.

Sincerely:

Wayne Price New Mexico Oil Conservation Division 1220 S. Saint Francis Drive Santa Fe, NM 87505 505-476-3487 fax: 505-476-3462 E-mail: WPRICE@state.nm.us RECEIVED

JUN 2 6 2003

Oll Conservation Division

June 20, 2003

Mr. Wayne Price Environmental Bureau New Mexico Oil Conservation Division 1220 South St. Francis Drive Santa Fe, New Mexico 87505

RE: Work Plan for Blinebry-Drinkard J-26 Junction Box Site T21S, R37E, SEC 26, Unit Letter J Lea County, New Mexico

Dear Mr. Price:

Trident Environmental has been retained by Rice Operating Company (Rice) to develop and submit this work plan for further actions regarding the chloride and total dissolved solids (TDS) -impacted groundwater at the Blinebry-Drinkard J-26 junction box site. NMOCD approval of this work plan will be necessary so that Rice can obtain an authorization for expenditure (AFE) from their system partners prior to initiating the activities specified herein.

Although the concentrations of chloride (4,520 mg/L) and TDS (9,020 mg/L) are above the New Mexico Water Quality Control Commission (WQCC) standards of 250 mg/L and 1,000 mg/L, respectfully, significant remediation work has already been completed by Rice (excavation to 42 feet below land surface and placement of clay liners at 5 feet at 27 feet). In fact, chloride and TDS concentrations have already decreased significantly since completion of the remediation work. With that in mind, Trident recommends the actions described below be taken.

Potential Receptors

No residence or manned facilities are located within one half mile of the site. Numerous oil and gas operations are in the site area including an active tank battery and oil well located approximately 200 feet east and 400 feet east-northeast of the site, respectively. Based on a review of water well records listed on the New Mexico State Engineer Office and United States Geological Survey (USGS) websites, windmills marked on the USGS Hobbs SW topographic map, there are no water supply wells located within 1,000 feet of the site.

Installation of Groundwater Monitoring Wells

One monitoring well (MW-1) was installed directly within the former source area on October 10, 2002, and sampled on a quarterly basis for major ions (chloride, sulfate, bicarbonate, carbonate, calcium, magnesium, sodium, potassium), total dissolved solids (TDS), and benzene, toluene, ethylbenzene, and xylenes (BTEX). A summary of pertinent analytical results is listed in the following table.



Date Sampled	Depth to Groundwater (feet)	Chloride (mg/L)	TDS (mg/L)	BTEX (mg/L)	
10/29/02	43.02	4,520	9,020	< 0.001	
02/28/02	42.33	3,470	6,870	< 0.001	

Summary of Groundwater Analytical Results for MW-1

Based on the chloride and TDS concentrations observed in MW-1, Trident recommends the installation of additional monitoring wells to delineate the horizontal extent of the chloride/TDS plume and determine the magnitude and direction of the groundwater gradient. The suspected direction of groundwater flow is to the southeast, therefore Trident recommends installation of the additional monitoring wells at the locations listed below.

- MW-2 approximately 220 ft. southeast of MW-1 in the presumed down gradient direction.
- MW-3 approximately 150 ft. west-northwest of MW-1in the presumed upgradient direction
- MW-4 approximately 100 200 ft. down gradient from MW2 *only if* MW2 indicates groundwater is impacted with greater than 250 mg/l chlorides or 1,000 mg/l TDS

A site map showing the proposed monitoring well locations is included in Attachment A. During drilling operations, soil samples will be collected periodically (five feet intervals) and field-tested for chloride content using the titration method (QP-03 in Attachment B). Monitoring wells will be completed as described in the well construction diagram in Attachment B.

Monitoring Well Sampling Procedures

Prior to sampling, the monitoring will be gauged for depth to groundwater using an electronic water level indicator. Immediately prior to collecting groundwater samples, each monitoring well will be purged of a minimum of three well casing volumes of water using a new, clean, decontaminated disposable bailer. Water samples will be collected with the disposable bailer and transferred into appropriately preserved containers for analysis of major ions, TDS, and BTEX. Chain-of-custody (COC) forms documenting sample identification numbers, collection times, and delivery times to the laboratories will be completed for each set of samples. The water samples will be placed in an ice-filled cooler immediately after collection and transported to Environmental Lab of Texas in Odessa, Texas, or other approved laboratory, for analysis of the aforementioned constituents. Purging and water sampling procedures are described in further detail in Attachment B (QP-04 and QP-05).

Fate and Transport Modeling

If chloride concentrations in upgradient areas indicate that past operations at the BD J-26 site have impaired groundwater quality to levels above background levels, then fate and transport modeling is appropriate. The data obtained from the on site monitoring wells with other site specific information will be input into a fate and transport model such as WinTran (Version 1.3) to determine if the chloride/TDS plume will eventually attenuate by dispersion and dilution to levels below WQCC standards without risk to the human health and the environment.

Reporting Requirements

Depth to water measurements and groundwater samples will be obtained on a quarterly frequency for one year beginning immediately after the installation of the proposed new monitoring wells and annually thereafter. An annual groundwater investigation and monitoring report describing the monitoring well construction, sampling procedures, analytical results, modeling results, and conclusions of the investigation will be submitted to the New Mexico Oil Conservation Division (NMOCD). The following elements will be included in the annual report:

- A lithologic description and well completion diagram of the subsurface soils encountered, conditions observed, and construction details of each monitoring well.
- Groundwater elevation data and chloride and TDS concentrations for each monitoring event will be summarized in tabular format.
- Groundwater elevation map depicting the water table elevations and direction of groundwater flow for each sampling event.
- Chloride and TDS concentration maps for each sampling event.
- Maps displaying the modeled fate and transport of the chloride/TDS plume with respect to time.
- Identification of potential receptors
- Recommended further actions.

The proposed activities will be performed in accordance with NMOCD "Guidelines for Remediation of Leaks, Spills, and Releases" (August 13, 1993). Notice will be provided to the NMOCD at least one week prior to each sampling event.

NMOCD approval of this work plan is hereby requested so that Rice can obtain an AFE from their system partners prior to initiating these activities. We appreciate the opportunity to work with you on this project. Please feel free to call me at 432-682-0808, or Carolyn Haynes at 505-393-9174, if you have any questions.

Sincerely

Gilbert J. Van Deventer, REM, NMCS Project Manager

cc: Carolyn Haynes (Rice Operating Company - Hobbs, NM)

Attachments

ATTACHMENTS

į.

• •

ъ. ., - . . --

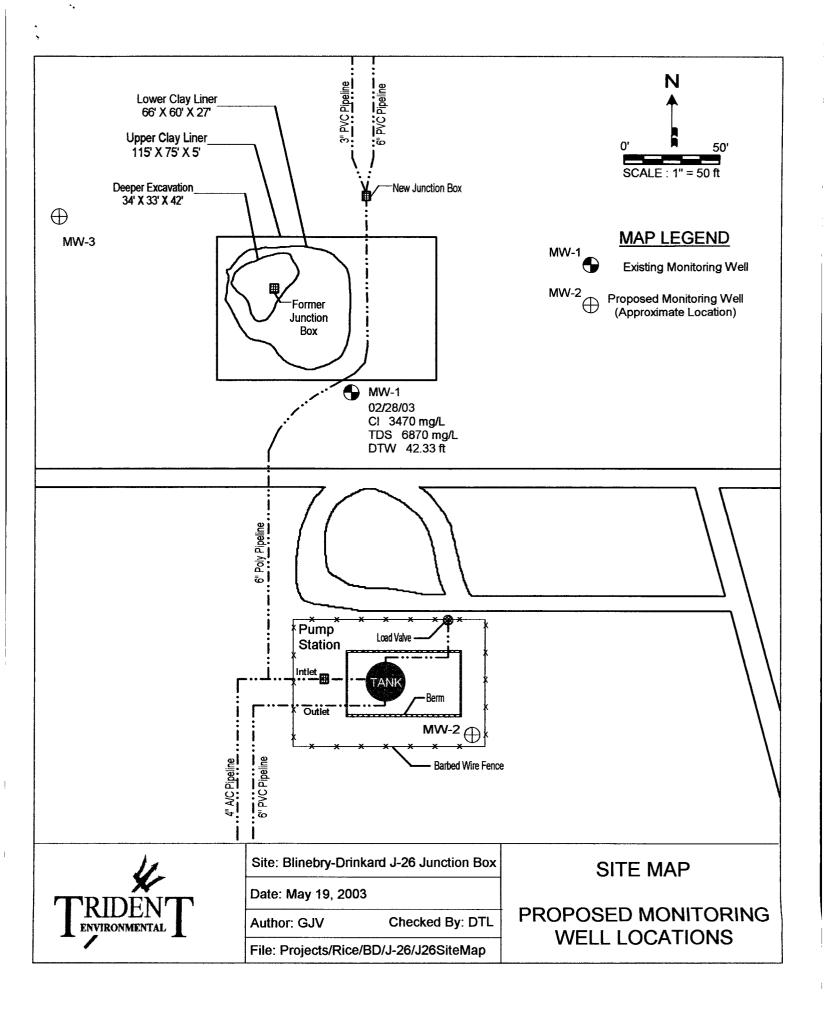
ATTACHMENT A

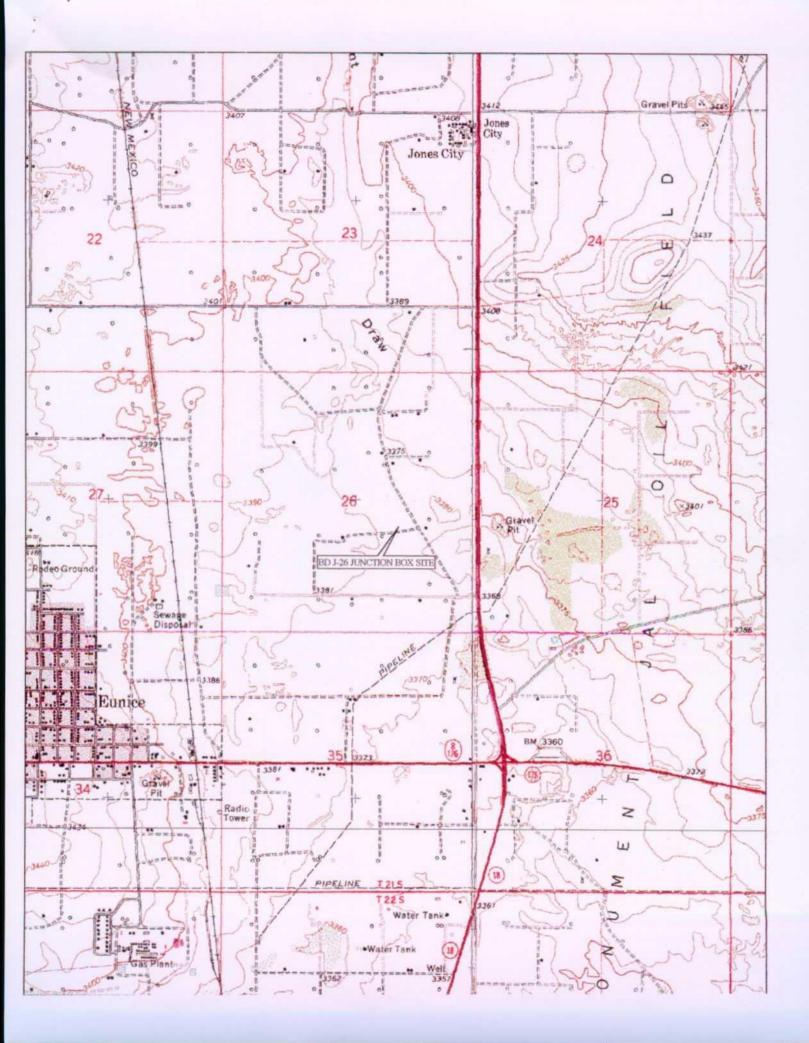
٠.

- -

PROPOSED MONITORING WELL LOCATION MAP

AND TOPOGRAPHIC MAP





ATTACHMENT B

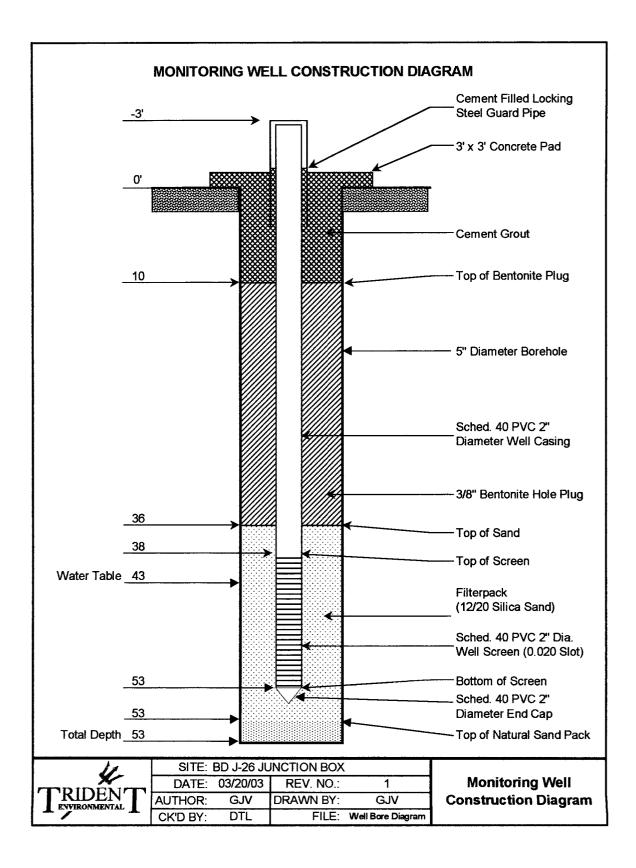
•

MONITORING WELL CONSTRUCTION DIAGRAM

SAMPLING AND TESTING PROTOCOL FOR CHLORIDE TITRATION

PROCEDURE FOR DEVELOPING CASED WATER MONITORING WELLS

PROCEDURE FOR OBTAINING WATER SAMPLES (CASED WELLS)



*.

Rice Operating Company

QUALITY PROCEDURE

Sampling and Testing Protocol Chloride Titration Using .282 Normal Silver Nitrate Solution

1.0 Purpose

This procedure is to be used to determine the concentration of chloride in soil.

2.0 Scope

This procedure is to be used as the standard field measurement for soil chloride concentrations.

3.0 Sample Collection and Preparation

- 3.1 Collect at least 80 grams of soil from the sample collection point. Take care to insure that the sample is representative of the general background to include visible concentrations of hydrocarbons and soil types. If necessary, prepare a composite sample for soils obtained at several points in the sample area. Take care to insure that no loose vegetation, rocks or liquids are included in the sample(s).
- 3.2 The soil sample(s) shall be immediately inserted into a one-quart or larger polyethylene freezer bag. Care should be taken to insure that no cross-contamination occurs between the soil sample and the collection tools or sample processing equipment.
- 3.3 The sealed sample bag should be massaged to break up any clods.

4.0 Sample Preparation

- 4.1 Tare a clean glass vial having a minimum 40 ml capacity. Add at least 10 grams of the soil sample and record the weight.
- 4.2 Add at least 10 grams of reverse osmosis water to the soil sample and shake for 20 seconds.
- 4.3 Allow the sample to set for a period of 5 minutes or until the separation of soil and water.
- 4.4 Carefully pour the free liquid extract from the sample through a paper filter into a clean plastic cup if necessary.

1

5.0 Titration Procedure

•

- 5.1 Using a graduated pipette, remove 10 ml extract and dispense into a clean plastic cup.
- 5.2 Add 2-3 drops potassium chromate (K_2CrO_4) to mixture.
- 5.3 If the sample contains any sulfides (hydrogen or iron sulfides are common to oilfield soil samples) add 2-3 drops of hydrogen peroxide (H₂O₂) to mixture.
- 5.4 Using a 1 ml pipette, carefully add .282 normal silver nitrate (one drop at a time) to the sample while constantly agitating it. Stop adding silver nitrate when the solution begins to change from yellow to red. Be consistent with endpoint recognition.
- 5.5 Record the ml of silver nitrate used.

6.0 Calculation

To obtain the chloride concentration, insert measured data into the following formula:

<u>.282 X 35,450 X ml AgNO3</u>	Х	grams of water in mixture
ml water extract		grams of soil in mixture

Using Step 5.0, determine the chloride concentration of the RO water used to mix with the soil sample. Record this concentration and subtract it from the formula results to find the net chloride in the soil sample.

Record all results on the delineation form.

Rice Operating Company

Quality Procedure

Procedure for Developing Cased Water Monitoring Wells

1.0 Purpose

This procedure outlines the methods to be employed to develop cased monitoring wells.

2.0 Scope

This procedure shall be used for developed, cased water monitoring wells. It is not to be used for standing water samples such as ponds or streams.

3.0 Sample Collection and Preparation

- 3.1 Prior to development, the static water level and height of the water column within the well casing will be measured with the use of an electric D.C. probe or a steel engineer's tape and water sensitive paste.
- 3.2 All measurements will be recorded within a field log notebook.
- 3.3 All equipment used to measure the static water level will be decontaminated after each use by means of Liquinox, a phosphate free laboratory detergent, and water to reduce the possibility of crosscontamination. The volume of water in each well casing will be calculated.

4.0 Purging

- 4.1 Wells will be purged by using a 2" decontaminated submersible pump or dedicated one liter Teflon bailer. Wells should be purged until the pH and conductivity are stabilized and the turbidity has been reduced to the greatest extent possible.
- 4.2 If a submersible is used the pump will be decontaminated prior to use by scrubbing the outside surface of tubing and wiring with a Liquinox water mixture, pumping a Liquinox-water mixture through the pump, and a final flush with fresh water.

5.0 Water Disposal

5.1 All purge and decontamination water will be temporarily stored within a portable tank to be later disposed of in an appropriate manner.

6.0 Records

•;

6.1 Rice Operating Company will record the amount of water removed from the well during development procedures. The purge volume will be reported to the appropriate regulatory authority when filing the closure report.

Rice Operating Company

Quality Procedure

Procedure for Obtaining Water Samples (Cased Wells) Using One Liter Bailer

1.0 Purpose

÷.,

This procedure outlines the methods to be employed in obtaining water samples from cased monitoring wells.

2.0 Scope

This procedure shall be used for developed, cased water monitoring wells. It is not to be used for standing water samples such as ponds or streams.

3.0 Preliminary

- 3.1 Obtain sterile sampling containers from the testing laboratory designated to conduct analyses of the water. The shipment should include a Certificate of Compliance from the manufacturer of the collection bottle or vial and a Serial Number for the lot of containers. Retain this Certificate for future documentation purposes.
- 3.2 The following table shall be used to select the appropriate sampling container, preservative method and holding times for the various elements and compounds to be analyzed.

Compound to be Analyzed	Sample Container Size	Sample Container Description	Cap Requirements	Preservative	Maximum Hold Time	
BTEX	40 ml	VOA Container	Teflon Lined	HCI	7 days	
TPH	1 liter	clear glass	Teflon Lined	HCI	28 days	
РАН	1 liter	amber glass	Teflon Lined	Ice	7 days	
Cation/Anion	1 liter	clear glass	Teflon Lined	None	48 Hrs	
Metals	1 liter	HD polyethylene	Any Plastic	Ice/HNO ₃	28 Days	
TDS	300 ml	clear glass	Any Plastic	Ice	7 Days	

1

4.0 Chain of Custody

- 4.1 Prepare a Sample Plan. The plan will list the well identification and the individual tests to be performed at that location. The sampler will check the list against the available inventory of appropriate sample collection bottles to insure against shortage.
- 4.2 Transfer the data to the Laboratory Chain of Custody Form. Complete all sections of the form except those that relate to the time of delivery of the samples to the laboratory.
- 4.3 Pre-label the sample collection jars. Include all requested information except time of collection. (Use a fine point Sharpie to insure that the ink remains on the label). Affix the labels to the jars.

5.0 Bailing Procedure

- 5.1 Identify the well from the sites schematics. Place pre-labeled jar(s) next to the well. Remove the plastic cap from the well bore by first lifting the metal lever and then unscrewing the entire assembly.
- 5.2 Using a dedicated one liter Teflon bailer, purge a minimum of three well volumes. Place the water in storage container for transport to a ROC disposal facility.
- 5.3 Take care to insure that the bailing device and string do not become cross-contaminated. A clean pair of rubber gloves should be used when handling either the retrieval string or bailer. The retrieval string should not be allowed to come into contact with the ground.

6.0 Sampling Procedure

- 6.1 Once the well has been bailed in accordance with 5.2 of this procedure, a sample may be decanted into the appropriate sample collection jar directly from the bailer. The collection jar should be filled to the brim. Once the jar is sealed, turn the jar over to detect any bubbles that may be present. Add additional water to remove all bubbles from the sample container.
- 6.2 Note the time of collection on the sample jar with a fine Sharpie.

- 6.3 Place the sample directly on ice for transport to the laboratory. The preceding table shows the maximum hold times between collection and testing for the various analyses.
- 6.4 Complete the Chain of Custody form to include the collection times for each sample. Deliver all samples to the laboratory.

7.0 Documentation

- 7.1 The testing laboratory shall provide the following minimum information:
 - A. Project and sample name.
 - B. Signed copy of the original Chain of Custody Form including the time the sample was received by the lab.
 - C. Results of the requested analyses
 - D. Test Methods employed
 - E. Quality Control methods and results

Calculation for Determining the Minimum Bailing Volume for Monitor Wells Formula V= $(\pi r^2 h)$ 2" well [V/231=gal] X 3 = Purge Volume

V=Volume
π=pi
r=inside radius of the well bore
h=maximum height of well bore in water table

Example:

π	r ²	h(in)	V(cu.in)	V(gal)	X 3 Volumes	Actual
3.1416	1	180	565.488	2.448	7.34 gal	>10 gal