

# United Gas Search, Inc.

P.O. Box 151  
Tulsa, OK 74101-0151

OIL CONSERVATION DIVISION  
RECEIVED

'91 JUL 26 AM 9 19

Fax (918) 241-4752

(918) 245-2060

July 15, 1991

State of New Mexico  
Energy, Minerals & Natural Resources Department  
New Mexico Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87501-2088

ATTN: William J. Lemay, Director

RE: Application for Unorthodox  
Well Location  
United Gas Search, Inc.  
Lea County, New Mexico

Gentlemen:

Please consider this letter the formal application of United Gas Search, Inc. for an unorthodox well location for its Leonard Brothers #21 well pursuant to the provisions of Rule 104 (F) of the Rules and Regulations of the New Mexico Oil Conservation Division (1991), whereby United Gas Search, Inc., as operator of said well, seeks administrative approval thereof based upon the following facts and circumstances:

LOCATION OF WELL. The Leonard Brothers #21 well is located 1980' FNL and 2180' FWL of Section 14, Township 26 South, Range 37 East, Lea County, New Mexico. This well was originally drilled and completed in the Queen Formation in 1978 by Tenneco Oil and produced oil therefrom, said location being orthodox for the forty (40) acre unit designated therefor; thereafter it was utilized for injection purposes for a waterflood program. In 1990, the property was purchased by United Gas Search, Inc. of Tulsa, Oklahoma and was plugged back and completed into the ~~Rhodes Yates Seven Rivers Gas~~ Formation, a non-prorated gas pool in which spacing is defined by rule to be 160 acres per unit, with permitted locations being no closer than 660' from the outer boundaries of such unit (per Rule 104 C. II.a). In June, 1991 a frac job was performed upon the well and the same is capable of production from said formation. As located, the well is 200' closer to the east boundary of the unit comprised of the NW4 of said Section 14 than is authorized per the quoted Rule. United Gas Search, Inc. now files this application to approve the unorthodox location by virtue of its re-completion of the existing well from a deeper horizon (Queen) wherein the location for oil production was orthodox to a shallower horizon where gas production has been established. The approval of this application

is sought in order to prevent the drilling of unnecessary wells, to prevent waste, and also correlative rights are protected inasmuch as there is common ownership of the minerals (United States of America) and operating rights (United Gas Search, Inc.) in the units toward the east and southeast of the subject well and to which the unorthodox location represents a 200' removal. (See Exhibits).

OFFSETTING INFORMATION. Attached to this application is a current rendering of leasehold ownership provided by Midland Map on July 3, 1991 and also a plat showing well completions for the NW4 Section 14, T26S-R37E, Lea County, NM which is the subject unit, and for the eight contiguous 160 acre units as to the Rhodes Yates Seven Rivers Gas Formation. The only wells producing from the subject horizon are located in the SW4 Section 14, T26S-R37E, operated by United Gas Search, Inc. (Leonard Federal #13), and in the SE4 Section 15, T26S-R37E, operated by Meridian Oil, Inc. As illustrated on the plat, the unorthodox location sought by this application moves toward the SE4 and NE4 160 acre units in Section 14, wherein there is no Rhodes Yates Seven Rivers production and which are owned and operated by United Gas Search, Inc. under United States Oil and Gas Lease #NM 7951 (which is the same lease underlying the remainder of Section 14 and the S2 of Section 11, to the north). For clarification, it should be noted that there is a well located in the SW4SW4 Section 14 listed as being operated by Bettis, Boyle & Stovall as to the subject formation; this well no longer produces and the acreage covered thereby was joined with the acreage owned by United Gas Search in the SW4 Section 14 to form a unit with the Leonard Federal #13 designated as the unit well as approved by the OCD in February, 1991.

NOTIFICATION. Copies of this application were sent by certified mail, return receipt requested (see exhibit), to the following companies who are the operators of offsetting units or owners of offsetting leasehold which could form a unit:

Meridian Oil  
2919 Allen Parkway  
Suite 1100  
Houston, TX 77019

Oryx Energy Company  
(successor to Sun Exploration & Production)  
P. O. Box 2880  
Dallas, TX 75221-2880

Union Texas Petroleum  
P. O. Box 2120  
Houston, TX 77252

Doyle Hartman  
500 North Main  
Midland, TX 79701

NOTE: The exhibits attached hereto regarding the Well Completion Report initially filed by Tenneco Oil on the subject well contained an error in the location whereby the coordinates thereof were transposed. Your attention is directed to the New Mexico Oil Conservation Commission Well Location and Acreage Dedication Plat filed by Tenneco per the survey performed on January 4, 1978 by John W. West and to the certification as to the location 2180' FWL and 1980' FNL Section 14, T26S-R37E, Lea County, NM.

\* \* \* \* \*

In view of the foregoing, United Gas Search, Inc. requests that this application for an unorthodox well location be handled administratively, in accordance with the Rules and Regulations of the New Mexico Oil Conservation Division, and that an Order approving said location be issued; or, otherwise, that it be set for hearing upon the next appropriate docket. Please advise should any additional information be required.

Yours truly,

UNITED GAS SEARCH, INC.

  
Randall T. Holmes  
General Counsel

RTH:rt

Exhibits

cc: J. T. Sexton  
Supervisor, District I Office  
New Mexico Oil Conservation Division  
P. O. Box 1980  
Hobbs, NM 88240

EXHIBITS TO APPLICATION OF UNITED GAS SEARCH, INC.  
FOR AN UNORTHODOX WELL LOCATION FOR THE  
LEONARD BROTHERS #21 WELL LOCATED  
2180' FWL and 1980' FNL, SECTION 14  
in TOWNSHIP 26 SOUTH, RANGE 37 EAST, LEA CO., NM

Exhibit A. Plat showing location of wells producing from the Rhodes Yates Seven Rivers Gas Formation in the Subject Unit and the eight contiguous units.

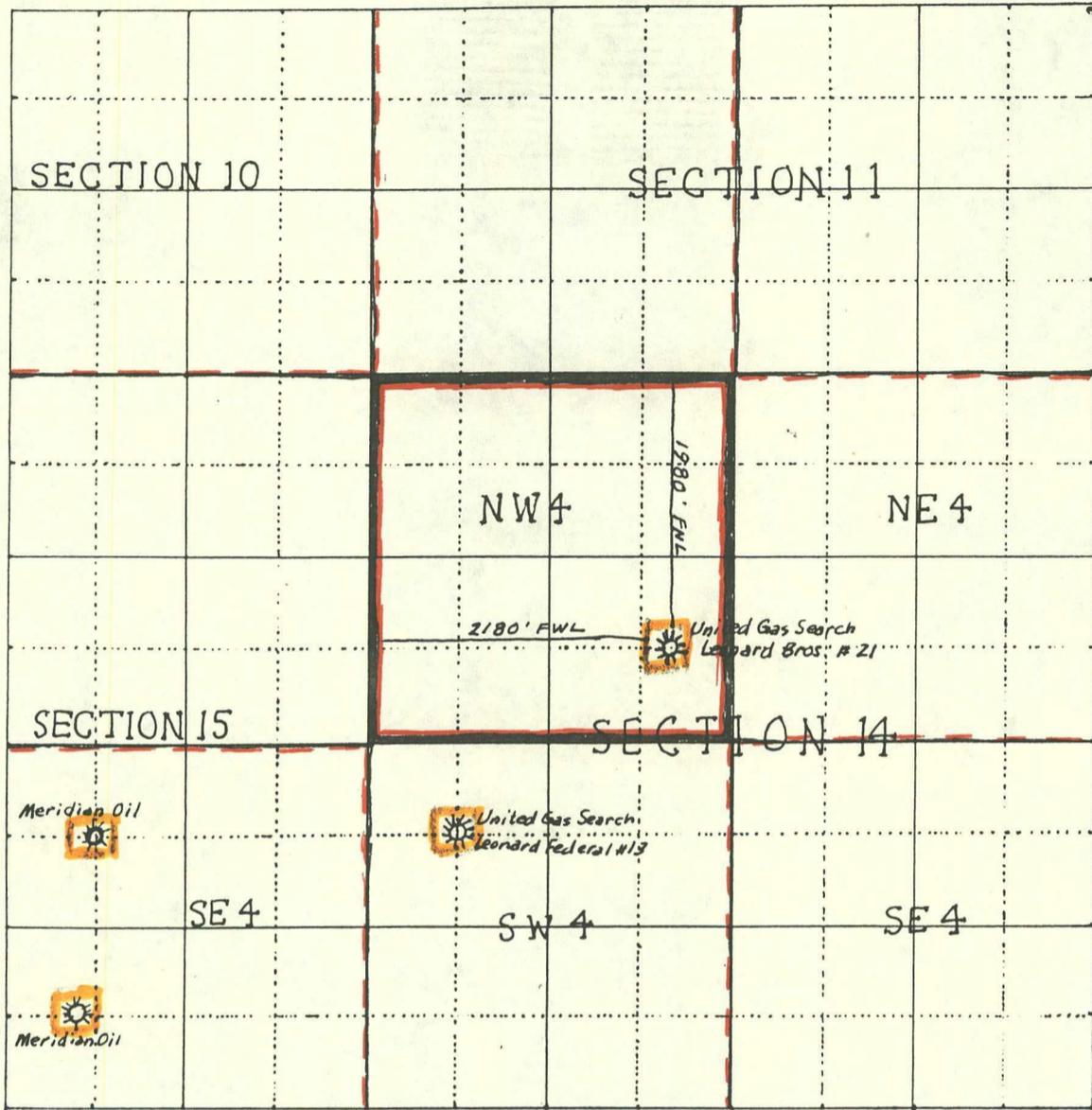
Exhibit B. Plat showing leasehold ownership in the Subject Unit and the eight contiguous units, as supplied by Midland Map, July 3, 1991.

Exhibit C. Well Location and Acreage Dedication Plat, Well Completion or Recompletion Report and Log as filed by Tenneco Oil, original operator of the subject well, for oil production from the Queen formation.

Exhibit D. Administrative Order WFX No. 476 of the New Mexico Oil Conservation Division dated 10/19/79, in favor of Tenneco Oil for waterflood injection.

Exhibit E. Sundry Notice, Well Completion Report, Well Location and Acreage Dedication Plat, and Request for Allowable and Authorization to Transport Oil and Natural Gas of United Gas Search, Inc. for the subject well as re-completed in the Rhodes Yates Seven Rivers Gas Formation.

Exhibit F. Evidence of certified mailing.



TOWNSHIP 26 SOUTH, RANGE 37 EAST

PLAT SHOWING PRODUCING WELLS IN THE  
 RHODES YATES SEVEN RIVERS GAS  
 FORMATION FOR THE NW 4  
 OF SECTION 14, TOWNSHIP 26 SOUTH, RANGE 37 EAST  
 IN LEA CO., NM. AND 8 CONTIGUOUS  
 160 ACRE UNITS OFFSET THERETO

Exhibit A

8/15/91

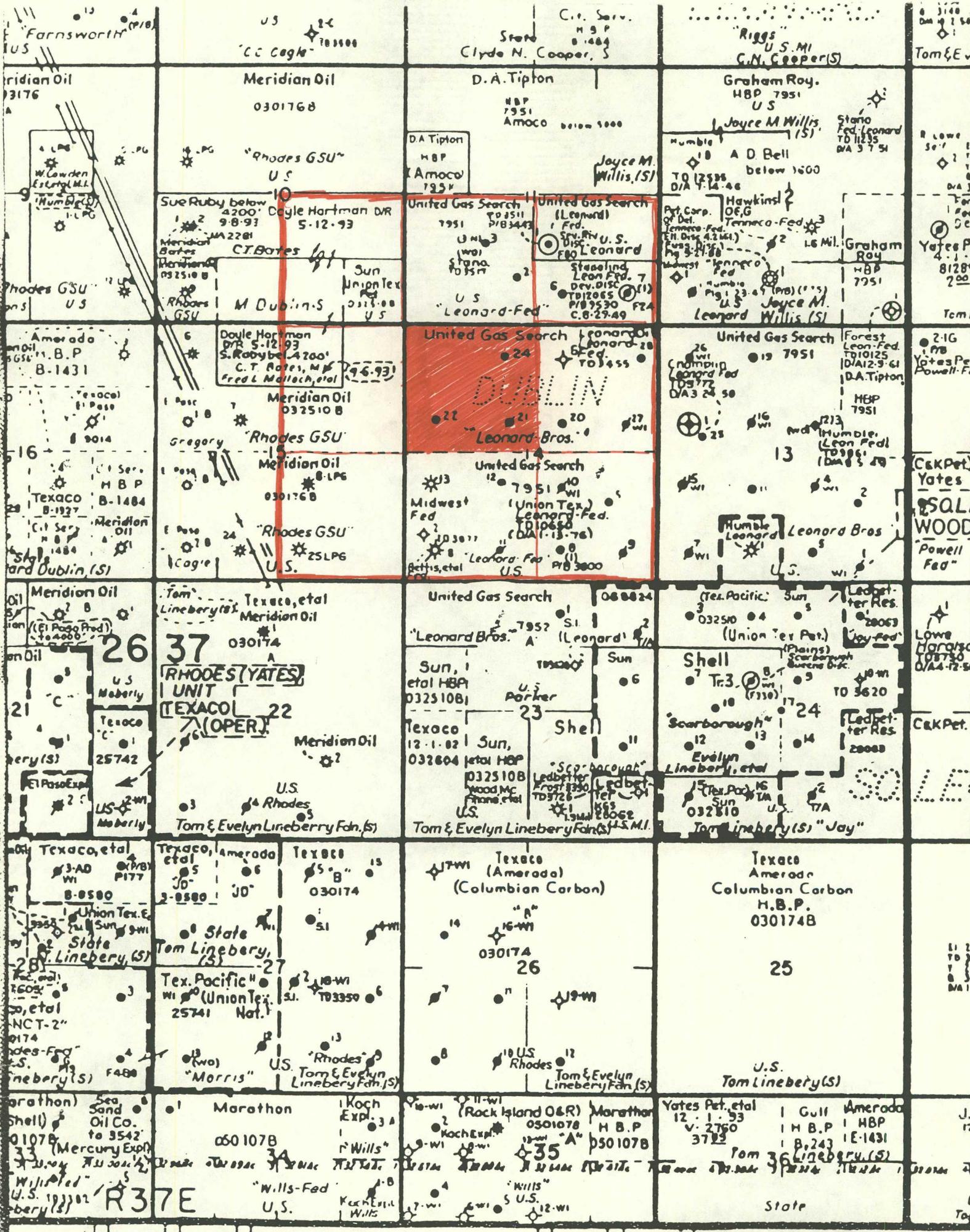


EXHIBIT B

NEW MEXICO OIL CONSERVATION COMMISSION  
WELL LOCATION AND ACREAGE DEDICATION PLAT

Form C-102  
Supersedes C-128  
Effective 1-1-65.

All distances must be from the outer boundaries of the Section.

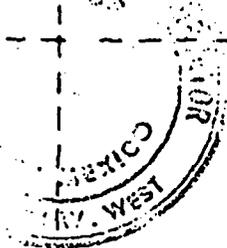
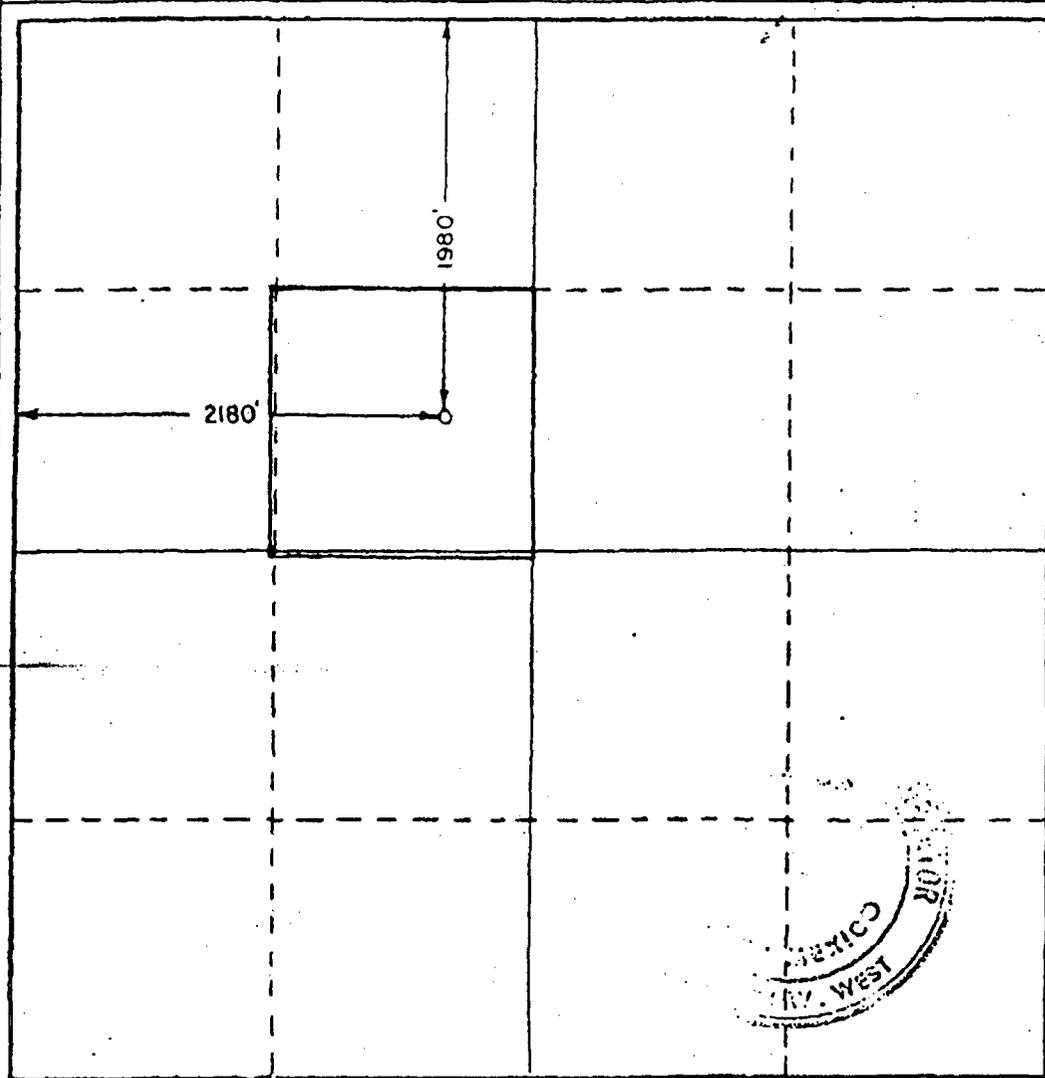
Operator <b>Tenneco Oil Co.</b>		Lease <b>Leonard Brothers</b>		Well No. <b>21</b>
Unit Letter <b>F</b>	Section <b>14</b>	Township <b>26 South</b>	Range <b>37 East</b>	County <b>Lea</b>
Actual Footage Location of Well: <b>2180</b> feet from the <b>West</b> line and <b>1980</b> feet from the <b>North</b> line				
Ground Level Elev. <b>2996.5</b>	Producing Formation <b>Queen - Penrose</b>	Pool <b>Leonard Queen South</b>	Dedicated Acreage: <b>40</b> Acres	

1. Outline the acreage dedicated to the subject well by colored pencil or hachure marks on the plat below.
2. If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty):
3. If more than one lease of different ownership is dedicated to the well, have the interests of all owners been consolidated by communitization, unitization, force-pooling, etc?

Yes  No If answer is "yes," type of consolidation \_\_\_\_\_

If answer is "no," list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary.) \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interests, has been approved by the Commission.



**CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Name  
*John W. West*

Position  
**Production Analyst**

Company  
**Tenneco Oil Company**

Date  
**1/9/78**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed  
**1/4/78**

Registered Professional Engineer and/or Land Surveyor  
*John W. West*

Certificate No. **John W. West**

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 42-R355.5.

5. LEASE DESIGNATION AND SERIAL NO.

NM - 7951

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Leonard Bros.

9. WELL NO.

21

10. FIELD AND POOL, OR WILDCAT

Leonard Queen South

11. SEC., T., R., M., OR BLOCK AND SURVEY OR AREA

Sec. 14; T26S, R37E

12. COUNTY OR PARISH

Lea

13. STATE

NM

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL: OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

b. TYPE OF COMPLETION: NEW WELL  WORK OVER  DEEP-EN  PLOG BACK  DIFF. LEVEL  Other \_\_\_\_\_

2. NAME OF OPERATOR  
Tenneco Oil Company

3. ADDRESS OF OPERATOR  
720 S. Colo. Blvd., Denver, Colo.-80222

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 2180' FNL & 1980' FWL Unit F

At top prod. interval reported below

At total depth

14. PERMIT NO. DATE ISSUED

15. DATE RECDDED 4-27-78 16. DATE T.D. REACHED 5-6-78 17. DATE CONPL. (Ready to prod.) 5-19-78 18. ELEVATIONS (DF, REB, RT, GR, ETC.)\* 2997' GL 19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD 3640 21. PLOG BACK T.D., MD & TVD 3605 22. IF MULTIPLE COMPL. HOW MANY\* 23. INTERVALS DRILLED BY ROTARY TOOLS 0' TO TD CABLE TOOLS

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* Queen 3320 - 3590 25. WAS DIRECTIONAL SURVEY MADE Yes

26. TYPE ELECTRIC AND OTHER LOGS RUN CNL, CDL, Dual Laterolog 27. WAS WELL CORED Yes

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT POLLED
8 5/8"	24	502	12 1/4"	500 SX	NONE
5 1/2"	15.5	3640	7 7/8"	1025 SX	NONE

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
					2 7/8"	3520	NONE

31. PERFORATION RECORD (Interval, size and number)  
3570 - 08', 3484 - 27', 3416 - 12'  
w/ 1 JSPF

32. ACID. SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
3412 - 3570	Acidize w/ 60 BBls acid
3412 - 3570	Frac'd w/ 64,000 Gal Gel Wtr w/ 104,000 # 20-40 Sand & 36,000 # 10-20 Sand in 2% KCL Base in 2 stages

33. PRODUCTION  
DATE FIRST PRODUCTION 5-21-78 PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Pumping WELL STATUS (Producing or shut-in) Producing

DATE OF TEST 5-26-78 HOURS TESTED 24 CROCK SIZE PROD'N. FOR TEST PERIOD OIL—BSL. 10 GAS—MCF. 20 WATER—BSL. 99 GAS-OIL RATIO 2000

FLOW. TUBING PRESS. CASING PRESSURE CALCULATED 24-HOUR RATE OIL—BSL. 10 GAS—MCF. 20 WATER—BSL. 99 OIL GRAVITY-API (CORR.) 34.4

34. DISPOSITION OF GAS (Bold, used for fuel, vented, etc.) TO BE SOLD TEST WITNESSED BY

35. LIST OF ATTACHMENTS LOGS PREVIOUSLY FORWARDED

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records  
SIGNED Orville J. Hattam TITLE Adm. Supv. DATE 5/31/78

**General:** This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on Items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached hereto, to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see Item 33.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. Items 22 and 24: If this well is completed for separate production from more than one interval zone (multiple completion), so state in Item 22, and in Item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in Item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 23: "Stacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for Items 22 and 24 above.)

**17. SUMMARY OF POIHOIS ZONES:**

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.			GEOLOGIC MARKERS		
			MEAS. DEPTH	TOP	TRUE VERT. DEPTH	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
TANSILL	2485	2645						
WATES	2645							
QUEEN	3320							

APPLICATION OF TENNECO OIL COMPANY  
TO EXPAND ITS WATER FLOOD PROJECTS  
IN THE LEONARD-QUEEN POOL IN LEA  
COUNTY, NEW MEXICO.

ORDER WFX NO. 476

ADMINISTRATIVE ORDER  
OF THE OIL CONSERVATION DIVISION

Under the provisions of Order No. R-5675, Tenneco Oil Company has made application to the Division on September 6, 1979, for permission to expand its Leonard Federal Waterflood Project and its Leonard Brothers Waterflood Project in the Leonard-Queen Pool in Lea County, New Mexico.

NOW, on this 19th day of October, 1979, the Division Director finds:

1. That application has been filed in due form.
2. That satisfactory information has been provided that all offset operators have been duly notified of the application.
3. That no objection has been received within the waiting period as prescribed by Order No. R-5675.
4. That the proposed injection wells are eligible for conversion to water injection under the terms of Order No. R-5675.
5. That the proposed expansion of the above referenced water flood projects will not cause waste nor impair correlative rights.
6. That the application should be approved.

IT IS THEREFORE ORDERED:

That the applicant, Tenneco Oil Company, be and the same is hereby authorized to inject water into the Queen formation through plastic-lined tubing set in packers at approximately 100 feet above the perforations. in the following described wells for purposes of secondary recovery, to wit:

Leonard Federal Well No. 9, located in Unit P of Section 14, Leonard Federal Well No. 10, located in Unit J of Sec. 14, Leonard Federal Well No. 11, located in Unit N of Sec. 14, Leonard Federal Well No. 13, located in Unit L of Sec. 14, all in the Tenneco Oil Company Leonard Federal Waterflood Project in Township 26 South, Range 37 East, NMPM, Lea County, New Mexico, and

Leonard Brothers Well No. 14, located in Unit B of Sec. 14, and Leonard Brothers Well No. 21, located in Unit F of Section 14, both in the Tenneco Oil Company Leonard Brothers Waterflood Project in Township 26 South, Range 37 East, NMPM, Lea County, New Mexico.

IT IS FURTHER ORDERED:

That the operator shall take all steps necessary to ensure that the injected water enters only the proposed injection interval and is not permitted to escape to other formations or onto the surface.

That the casing-tubing annulus shall be loaded with an inert fluid and equipped with a pressure gauge at the surface

EXHIBIT D

or left open to the atmosphere to facilitate detection of leakage in the casing, tubing, or packer.

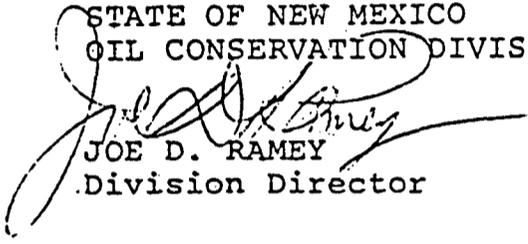
That the injection well or system shall be equipped with a pop-off valve or device which will limit the wellhead pressure to a maximum of 680 pounds per square inch; provided however that the Division Director may administratively authorize a pressure limitation in excess of the above upon the operator's establishing that such higher pressure will not result in fracturing of confining strata.

That the operator shall notify the supervisor of the Division's Hobbs District Office before injection is commenced through said well;

That the operator shall immediately notify the Supervisor of the Division's Hobbs District Office of the failure of the tubing, casing, or packer in said well or the leakage of water from or around said well and shall take such steps as may be timely or necessary to correct such failure or leakage.

DONE at Santa Fe, New Mexico, on the day and year hereinabove designated.

STATE OF NEW MEXICO  
OIL CONSERVATION DIVISION

  
JOE D. RAMEY  
Division Director

S E A L

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONTACT RECEIVING  
OFFICE FOR NUMBER  
OF COPIES REQUIRED  
(Other instructions on re-  
verse side)

NM Roswell District  
Modified Form No.  
NMO-3160-4

**SUNDRY NOTICES AND REPORTS ON WELLS**

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NM-7951
2. NAME OF OPERATOR United Das Search, Inc		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P. O. Box 755, Hobbs, NM 88241		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FNL & 2180' FWL		8. FARM OR LEASE NAME Leonard Brothers
14. PERMIT NO. API #30-025-25860		9. WELL NO. 21
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 3008 KB		10. FIELD AND POOL, OR WILDCAT Rhodes Yates SevenRivers
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 14 T26S R37E
		12. COUNTY OR PARISH Lea
		13. STATE NM

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <u>Recomplete to Rhodes Yates-SR</u> <input type="checkbox"/>	

(NOTE: Report results of multiple completion or Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROMISED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

Work began 10/4/90. Set CIBP @ 3100, cap with 35' cement.  
Perforated 2644-48, 2658-64, 2672-76, 2684-86, 2700-12,  
2798-2810, 2860-70, 2930-38 with 1 shot per foot, Shut-In  
waiting on frac treatment. 6/21/91 Treated with 1,000 bbls  
gelled water & 155,000# 20/40 sand. Maximum pressure 2200#.  
6/22/91 Flowed 3200 MCF gas per day thru 24/64" choke, FCP 605#.

18. I hereby certify that the foregoing is true and correct

SIGNED Wanda Walker TITLE Agent DATE 6-25-91

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

EXHIBIT E

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE\*

(See other instructions on reverse side)

Form approved.  
Budget Bureau No. 1004-0137  
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG \*

1a. TYPE OF WELL OIL WELL  GAS WELL  DRY  Other \_\_\_\_\_

b. TYPE OF COMPLETION:  
NEW WELL  WORK OVER  DEEP EN  FILL BACK  DIFF RESRV  Other \_\_\_\_\_

2. NAME OF OPERATOR  
United Gas Search, Inc.

3. ADDRESS OF OPERATOR  
c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)\*  
At surface 1980' FNL & 2180' FWL of Sec 14

At top prod interval reported below

At total depth

14. PERMIT NO. DATE ISSUED  
API#30-025-25860

5. LEASE DESIGNATION AND SERIAL NO.

NM-7951

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Leonard Brothers

9. WELL NO.

21

10. FIELD AND POOL, OR WILDCAT

Rhodes Yates Seven Rivers

11. SEC., T. R., M., OR BLOCK AND SURVEY OR AREA

Sec 14, T26S, R37E

12. COUNTY OR PARISH  
Lea

13. STATE  
NM

15. DATE SPUNDED 16. DATE T.O. REACHED 17. DATE COMPL. (Ready to prod.) 18. ELEVATIONS (DF, RKB, RT, GB, ETC.)\* 19. ELEV. CASINGHEAD  
Recomp 10/4/90 6/21/91 3008 KB

20. TOTAL DEPTH, MD & TVD 21. PLUG. BACK T.D., MD & TVD 22. IF MULTIPLE COMPL. HOW MANY\* 23. INTERVALS DRILLED BY ROTARY TOOLS CABLE TOOLS  
3640 3065 → 0-TD

24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)\* 25. WAS DIRECTIONAL SURVEY MADE  
2644-2938 Yates Seven Rivers No

26. TYPE ELECTRIC AND OTHER LOGS RUN 27. WAS WELL CORED  
No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	24#	502	12 1/4	500 SX	None
5 1/2	15.5#	3640	7 7/8	1025 SX	None

29. LINER RECORD 30. TUBING RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)

31. PERFORATION RECORD (Interval, size and number) 32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

INTERVAL	SIZE	AMOUNT AND KIND OF MATERIAL USED
2644-48, 2658-64, 2672-76, 2684-86, 2700-12, 2740-46, 2798-2810, 2860-70, 2930-38, 1 shot per foot		1,000 bbls gelled water, 155,000# 20/40 sand

33.\* PRODUCTION

DATE FIRST PRODUCTION	PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)	WELL STATUS (Producing or shut-in)
6/22/91	Flowing	

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
6/22/91	24	24/64	→	None	3200	None	

FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
	605	→				

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.) TEST WITNESSED BY  
sold Roy S. Peugh, Jr

35. LIST OF ATTACHMENTS  
None

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Walter Walker TITLE Agent DATE 6-25-91

\*(See Instructions and Spaces for Additional Data on Reverse Side)

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS			
				NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
Yates - SR	2644	2938	Producing Interval	Tansill	2485		
				Yates	2644		
				Queen	3320		

Submit to Appropriate  
District Office  
State Lease - 4 copies  
Fee Lease - 3 copies

State of New Mexico  
Energy, Minerals and Natural Resources Department

Form C-102  
Revised 1-1-89

**OIL CONSERVATION DIVISION**

P.O. Box 2088

Santa Fe, New Mexico 87504-2088

**DISTRICT I**

P.O. Box 1980, Hobbs, NM 88240

**DISTRICT II**

P.O. Drawer DD, Artesia, NM 88210

**DISTRICT III**

1000 Rio Brazos Rd., Aztec, NM 87410

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

All Distances must be from the outer boundaries of the section

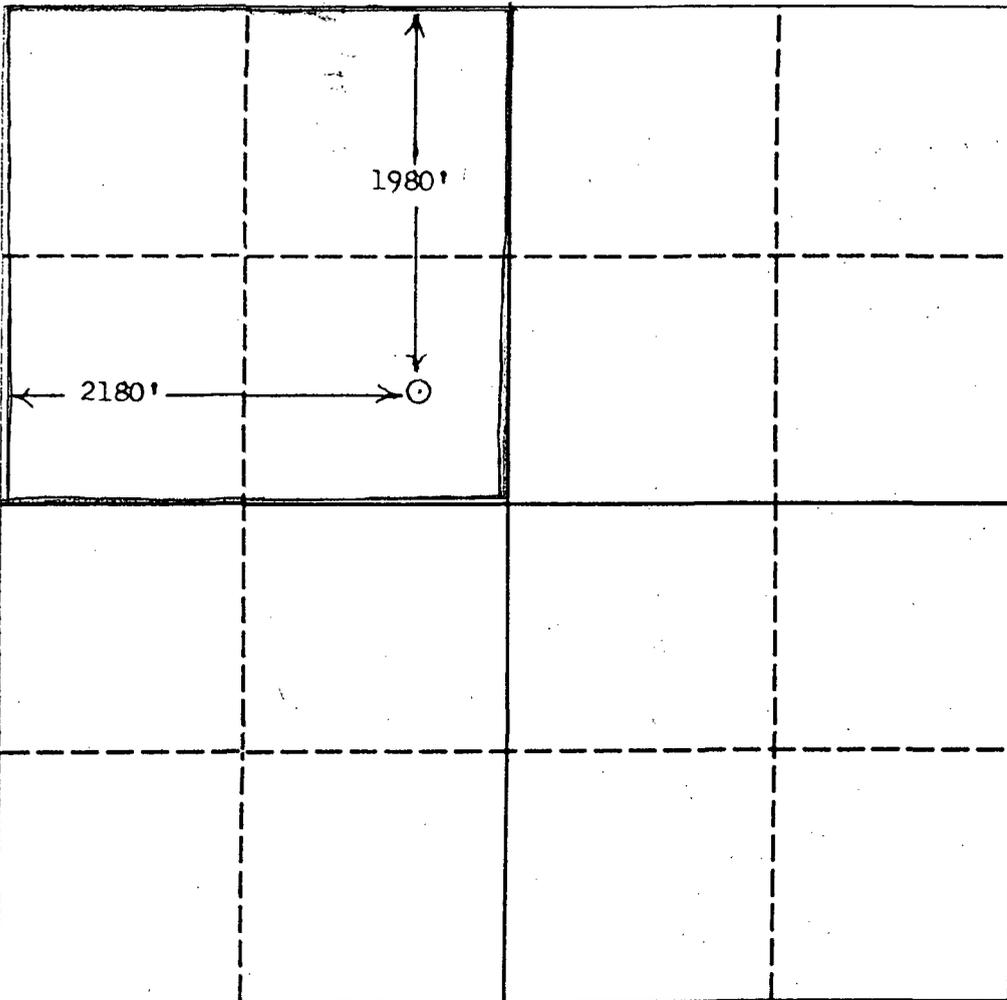
Operator United Gas Search, Inc.			Lease Leonard Brothers		Well No. 21
Unit Letter F	Section 14	Township 26 S	Range 37 E	County Lea NMPM	
Actual Footage Location of Well: 1980 feet from the North line and 2180 feet from the West line					
Ground level Elev. 2997	Producing Formation Yates Seven Rivers		Pool Rhodes	Dedicated Acreage: 160 Acres	

- Outline the acreage dedicated to the subject well by colored pencil or hatchure marks on the plat below.
- If more than one lease is dedicated to the well, outline each and identify the ownership thereof (both as to working interest and royalty).
- If more than one lease of different ownership is dedicated to the well, have the interest of all owners been consolidated by communitization, unitization, force-pooling, etc.?
 

Yes     No    If answer is "yes" type of consolidation \_\_\_\_\_

If answer is "no" list the owners and tract descriptions which have actually been consolidated. (Use reverse side of this form if necessary): \_\_\_\_\_

No allowable will be assigned to the well until all interests have been consolidated (by communitization, unitization, forced-pooling, or otherwise) or until a non-standard unit, eliminating such interest, has been approved by the Division.



**OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.

Signature  
*Donna Holler*

Printed Name  
Donna Holler

Position  
Agent

Company  
United Gas Search, Inc.

Date  
6/25/91

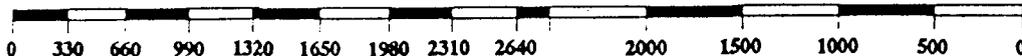
**SURVEYOR CERTIFICATION**

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my knowledge and belief.

Date Surveyed

Signature & Seal of Professional Surveyor

Certificate No.



Submit 5 Copies  
Appropriate District Office  
DISTRICT I  
P.O. Box 1980, Hobbs, NM 88240

DISTRICT II  
P.O. Drawer DD, Artesia, NM 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, NM 87410

State of New Mexico  
Energy, Minerals and Natural Resources Department

**OIL CONSERVATION DIVISION**

P.O. Box 2088  
Santa Fe, New Mexico 87504-2088

Form C-104  
Revised 1-1-89  
See Instructions  
at Bottom of Page

**REQUEST FOR ALLOWABLE AND AUTHORIZATION  
TO TRANSPORT OIL AND NATURAL GAS**

Operator United Gas Search, Inc.		Well API No. 30-025-25860
Address c/o Oil Reports & Gas Services, Inc., Box 755, Hobbs, NM 88241		
Reason(s) for Filing (Check proper box) <input type="checkbox"/> Other (Please explain)		
New Well <input type="checkbox"/>	Change in Transporter of:	
Recompletion <input checked="" type="checkbox"/>	Oil <input type="checkbox"/>	Dry Gas <input type="checkbox"/>
Change in Operator <input type="checkbox"/>	Casinghead Gas <input type="checkbox"/>	Condensate <input type="checkbox"/>

If change of operator give name and address of previous operator \_\_\_\_\_

**II. DESCRIPTION OF WELL AND LEASE**

Lease Name Leonard Brothers	Well No. 21	Pool Name, Including Formation Rhodes Yates Seven Rivers	Kind of Lease State, Federal or Private	Lease No. NM-7951
Location Unit Letter <u>F</u> : <u>1980</u> Feet From The <u>North</u> Line and <u>2180</u> Feet From The <u>West</u> Line Section <u>14</u> Township <u>26S</u> Range <u>37E</u> , <u>NMPM</u> , Lea County				

**III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS**

Name of Authorized Transporter of Oil <input type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
Name of Authorized Transporter of Casinghead Gas <input type="checkbox"/> or Dry Gas <input checked="" type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)					
El Paso Natural Gas Company	P. O. Box 1492, El Paso, TX 79978					
If well produces oil or liquids, give location of tanks.	Unit	Sec.	Twp.	Rge.	Is gas actually connected?	When?
					Yes	6/21/91

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

**IV. COMPLETION DATA**

Designate Type of Completion - (X)	Oil Well	Gas Well	New Well	Workover	Deepen	Plug Back	Same Res'v	Diff Res'v
		X		X		X		X
Date Spudded work began 10/4/90	Date Compl. Ready to Prod. 6/21/91		Total Depth 3640		P.B.T.D. 3065			
Elevations (DF, RKB, RT, GR, etc.) 3008 KB	Name of Producing Formation Yates Seven Rivers		Top Oil/Gas Pay 2644		Tubing Depth			
Perforations 2644-2938					Depth Casing Shoe 3640			

**TUBING, CASING AND CEMENTING RECORD**

HOLE SIZE	CASING & TUBING SIZE	DEPTH SET	SACKS CEMENT
12 1/4	8 5/8	502	500
7 7/8	5 1/2	3640	1025

**V. TEST DATA AND REQUEST FOR ALLOWABLE**

**OIL WELL** (Test must be after recovery of total volume of load oil and must be equal to or exceed top allowable for this depth or be for full 24 hours.)

Date First New Oil Run To Tank	Date of Test	Producing Method (Flow, pump, gas lift, etc.)	
Length of Test	Tubing Pressure	Casing Pressure	Choke Size
Actual Prod. During Test	Oil - Bbls.	Water - Bbls.	Gas- MCF

**GAS WELL**

Actual Prod. Test - MCF/D 3200	Length of Test 24 hours	Bbls. Condensate/MMCF None	Gravity of Condensate
Testing Method (pilot, back pr.) Orifice Meter	Tubing Pressure (Shut-in)	Casing Pressure (Shut-in) 1305	Choke Size

**VI. OPERATOR CERTIFICATE OF COMPLIANCE**

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Donna Holler  
Signature  
Donna Holler Agent  
Printed Name  
6-25-91 Date  
505-393-2727 Telephone No.

**OIL CONSERVATION DIVISION**

Date Approved \_\_\_\_\_  
By \_\_\_\_\_  
Title \_\_\_\_\_

**INSTRUCTIONS:** This form is to be filed in compliance with Rule 1104

- 1) Request for allowable for newly drilled or deepened well must be accompanied by tabulation of deviation tests taken in accordance with Rule 111.
- 2) All sections of this form must be filled out for allowable on new and recompleted wells.
- 3) Fill out only Sections I, II, III, and VI for changes of operator, well name or number, transporter, or other such changes.
- 4) Separate Form C-104 must be filed for each pool in multiply completed wells.

completed on the reverse side?

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

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

3. Article Addressed to: ORYX ENERGY COMPANY PO BOX 2880 DALLAS TX 75221-2880	4. Article Number P 582 415 165
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery	

Thank you for using Return Receipt Service.

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

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

3. Article Addressed to: UNION TEXAS PETROLEUM PO BOX 2120 HOUSTON TX 77252	4. Article Number P 582 415 166
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery	

Thank you for using Return Receipt Service.

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

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

3. Article Addressed to: DOYLE HARTMAN 500 NORTH MAIN MIDLAND TX 79701	4. Article Number P 582 415 167
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
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7. Date of Delivery	

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

3. Article Addressed to: MERIDIAN OIL 2919 ALLEN PARKWAY SUITE 1100 HOUSTON TX 77019	4. Article Number P 582 415 164
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery	

Thank you for using Return Receipt Service.

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

Exhibit F

UNITED STATES POSTAL SERVICE  
OFFICIAL BUSINESS



**SENDER INSTRUCTIONS**  
Print your name, address and ZIP Code in the space below.  
• Complete items 1, 2, 3, and 4 on the reverse.  
• Attach to front of article if space permits, otherwise affix to back of article.  
• Endorse article "Return Receipt Requested" adjacent to number.



PENALTY FOR PRIVATE USE, \$300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

United Gas Search, Inc.  
P.O. Box 151  
Tulsa, OK 74101-0151

UNITED STATES POSTAL SERVICE  
OFFICIAL BUSINESS



**SENDER INSTRUCTIONS**  
Print your name, address and ZIP Code in the space below.  
• Complete items 1, 2, 3, and 4 on the reverse.  
• Attach to front of article if space permits, otherwise affix to back of article.  
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UNITED STATES POSTAL SERVICE  
OFFICIAL BUSINESS



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• Endorse article "Return Receipt Requested" adjacent to number.



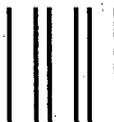
PENALTY FOR PRIVATE USE, \$300

RETURN TO

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United Gas Search, Inc.  
P.O. Box 151  
Tulsa, OK 74101-0151

UNITED STATES POSTAL SERVICE  
OFFICIAL BUSINESS



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PENALTY FOR PRIVATE USE, \$300

RETURN TO

Print Sender's name, address, and ZIP Code in the space below.

UNITED GAS SEARCH INC  
PO BOX 151  
TULSA OK 74101-0151



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

OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

RECEIVED

'91 AUG 12 AM 10 09

8-8-91

BRUCE KING  
GOVERNOR

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88241-1980  
(505) 393-6161

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

RE: Proposed:

- MC \_\_\_\_\_
- DHC \_\_\_\_\_
- NSL  \_\_\_\_\_
- NSP \_\_\_\_\_
- SWD \_\_\_\_\_
- WFX \_\_\_\_\_
- PMX \_\_\_\_\_

Gentlemen:

I have examined the application for the:

United Gas Search Inc. Leonard Brothers #21-F 14-26-37  
Operator Lease & Well No. Unit S-T-R

and my recommendations are as follows:

OK

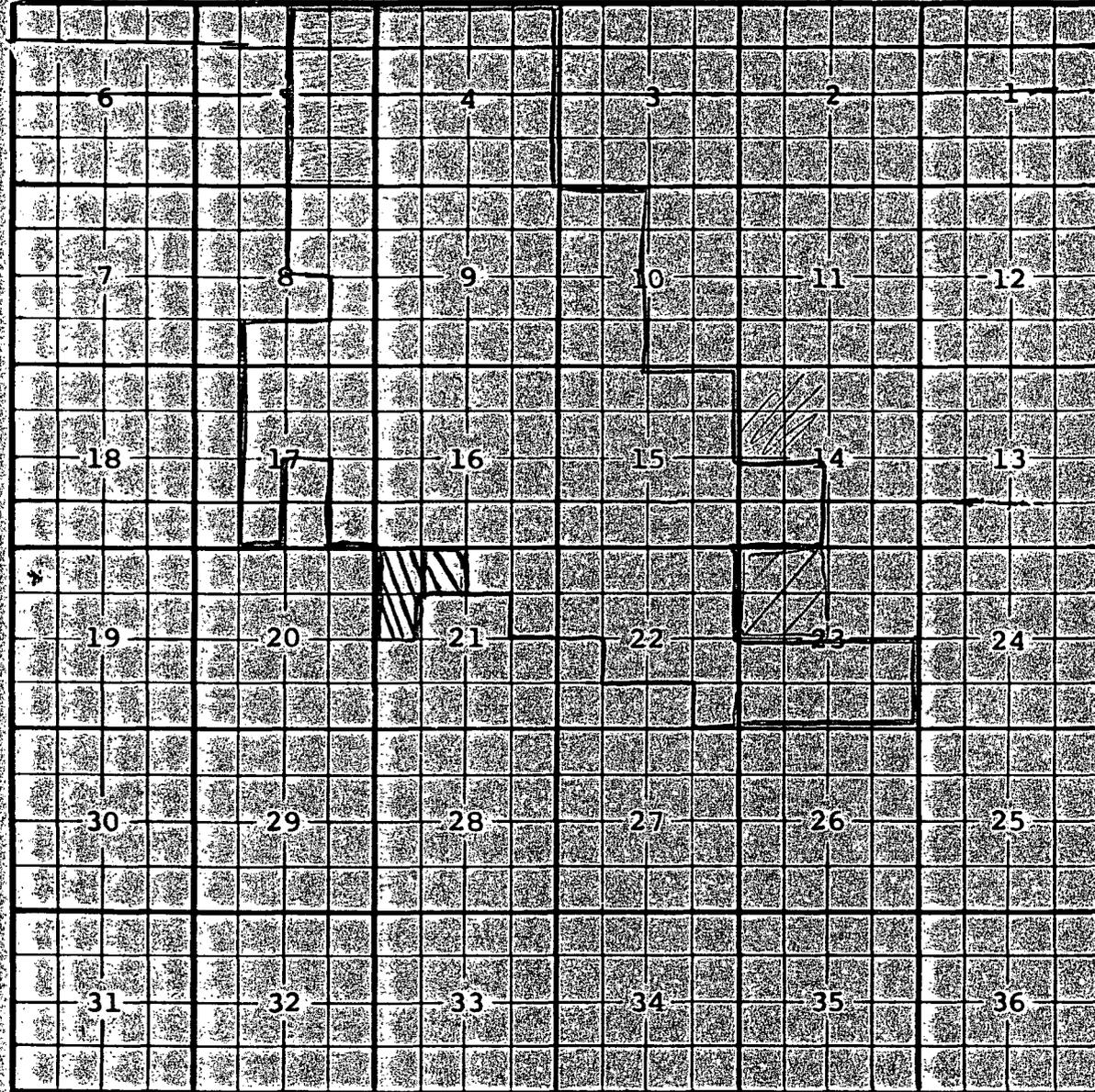
Yours very truly,

Jerry Sexton  
Supervisor, District 1

/ed

County Lea Pool Rhodes-Yates-Seven Rivers Gas

TOWNSHIP 26 South Range 37 East NMPM



Desc: All sec 4, E/2 sec 5, NE/4, E/2 SE/4, SW/4 SE/4, & SE/4 SW/4 sec 8,  
All sec 9, W/2 sec 10, SW/4 sec 14, All sec 15, 16, NE/4, E/2 W/2, &  
E/2 SE/4 sec 17, N/2 N/2, SE/4 NE/4, & SW/4 NW/4 sec 21, N/2,  
N/2 SE/4, SE/4 SE/4, & NE/4 SW/4 sec 22, 1/2 sec 23, (R-6891,  
2-1-82)

Contract vertical limits from top of Yates formation to a point  
in Seven Rivers formation which is 100 feet above the top of the  
Queen formation in E/2 sec 5 (R-7322, 10-20-83)

(Delete NE/4 NW/4 Sec. 21 (R-7554, 6-14-84) Delete 1/2 NW/4 Sec. 21 (R-7858, 3-28-85)

OIL CONSERVATION  
RECEIVED

# United Gas Search, Inc.

P.O. Box 151

Tulsa, OK 74101-0151

'91 AUG 5 AM 9 26  
(918) 245-2060

Fax (918) 241-4752

August 1, 1991

State of New Mexico  
Energy, Minerals and Natural Resources Department  
New Mexico Oil Conservation Division  
P. O. Box 2088  
Santa Fe, New Mexico 87501-2088

ATTN: William J. Lemay, Director

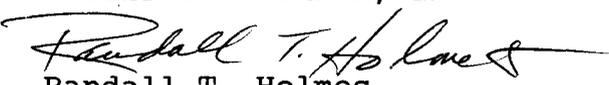
RE: Application for Unorthodox  
Well Location, 7/15/1991  
~~United Gas Search, Inc?~~  
Leonard Brothers #21  
NW4 Section 14, T26S-R37E  
Lea County, N. M.

Gentlemen:

In connection with the above referenced Application for Unorthodox Well Location, enclosed please find triplicate copies evidencing receipt of certified mailings of said application by the offsetting owners listed therein. Please place the same in consideration of the application.

Thank you,

UNITED GAS SEARCH, INC.

  
Randall T. Holmes  
General Counsel

RTH:rt  
Enclosures  
X1AUG91A

cc: J. T. Sexton  
Supervisor, District I Office  
New Mexico Oil Conservation Division  
P. O. Box 1980  
Hobbs, N. M. 88240

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

3. Article Addressed to:  
UNION TEXAS PETROLEUM  
PO BOX 2120  
HOUSTON TX 77252

4. Article Number  
P 582 415 166

Type of Service:  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature - Addressee

6. Signature - Agent  
*Chubert*

7. Date of Delivery  
**JUL 29 1991**

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

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

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

3. Article Addressed to:  
MERIDIAN OIL  
2919 ALLEN PARKWAY  
SUITE 1100  
HOUSTON TX 77019

4. Article Number  
P 582 415 164

Type of Service:  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature - Addressee  
*Bill Buggs*

6. Signature - Agent  
*X*

7. Date of Delivery  
**07-29-91**

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

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

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3. Article Addressed to:  
ORYX ENERGY COMPANY  
PO BOX 2880  
DALLAS TX 75221-2880

4. Article Number  
P 582 415 165

Type of Service:  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature - Addressee  
*Ronald Hest*

6. Signature - Agent

7. Date of Delivery  
**JUL 26 1991**

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

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

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

3. Article Addressed to:  
DOYLE HARTMAN  
500 NORTH MAIN  
MIDLAND TX 79701

4. Article Number  
P 582 415 167

Type of Service:  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED**.

5. Signature - Addressee  
*X*

6. Signature - Agent  
*L Rossler*

7. Date of Delivery  
**7/26**

8. Addressee's Address (ONLY if requested and fee paid)  
*500 N Main*

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

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Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery (Extra charge)

Article Addressed to: UNION TEXAS PETROLEUM PO BOX 2120 HOUSTON TX 77252	4. Article Number P 582 415 166
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
Signature - Addressee	8. Addressee's Address (ONLY if requested and fee paid)
Signature - Agent <i>Chickendon</i>	
Date of Delivery <b>JUL 29 1991</b>	

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

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Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery (Extra charge)

Article Addressed to: MERIDIAN OIL 2919 ALLEN PARKWAY SUITE 1100 HOUSTON TX 77019	4. Article Number P 582 415 164
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addressee <i>Bill Buggs</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent <i>X</i>	
7. Date of Delivery <b>07-29-91</b>	

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

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Article Addressed to: ORYX ENERGY COMPANY PO BOX 2880 DALLAS TX 75221-2880	4. Article Number P 582 415 165
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
Signature - Addressee <i>Ronald Hut</i>	8. Addressee's Address (ONLY if requested and fee paid)
Signature - Agent	
Date of Delivery <b>JUL 26 1991</b>	

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

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Show to whom delivered, date, and addressee's address. 2.  Restricted Delivery (Extra charge)

Article Addressed to: DOYLE HARTMAN 500 NORTH MAIN MIDLAND TX 79701	4. Article Number P 582 415 167
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addressee <i>X</i>	8. Addressee's Address (ONLY if requested and fee paid) <i>500 N Main</i>
6. Signature - Agent <i>L Rossler</i>	
7. Date of Delivery <b>7/26</b>	

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1-  Show to whom delivered, date, and addressee's address. 2-  Restricted Delivery (Extra charge)

3. Article Addressed to: UNION TEXAS PETROLEUM PO BOX 2120 HOUSTON TX 77252	4. Article Number P 582 415 166
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent <i>[Signature]</i>	
7. Date of Delivery <b>JUL 29 1991</b>	

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

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1-  Show to whom delivered, date, and addressee's address. 2-  Restricted Delivery (Extra charge)

3. Article Addressed to: MERIDIAN OIL 2919 ALLEN PARKWAY SUITE 1100 HOUSTON TX 77019	4. Article Number P 582 415 164
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee <input checked="" type="checkbox"/> <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent <input checked="" type="checkbox"/>	
7. Date of Delivery <i>07-29-91</i>	

S Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1-  Show to whom delivered, date, and addressee's address. 2-  Restricted Delivery (Extra charge)

3. Article Addressed to: ORYX ENERGY COMPANY PO BOX 2880 DALLAS TX 75221-2880	4. Article Number P 582 415 165
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent	
7. Date of Delivery <b>JUL 26 1991</b>	

Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**

**SENDER:** Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1-  Show to whom delivered, date, and addressee's address. 2-  Restricted Delivery (Extra charge)

3. Article Addressed to: DOYLE HARTMAN 500 NORTH MAIN MIDLAND TX 79701	4. Article Number P 582 415 167
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input checked="" type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee <input checked="" type="checkbox"/>	8. Addressee's Address (ONLY if requested and fee paid) <i>500 N Main</i>
6. Signature - Agent <i>[Signature]</i>	
7. Date of Delivery <i>7/26</i>	

S Form 3811, Apr. 1989 **DOMESTIC RETURN RECEIPT**