

MERIDIAN OIL

OIL CONSERVATION DIVISION
RECEIVED

'92 OCT 6 PM 9 10

September 25, 1992

Mr. Michael E. Stogner
State of New Mexico
Energy, Minerals and Natural
Resources Dept.
P.O. Box 2088
Santa Fe, NM 87504

**RE; OFFSET OPERATORS NOTIFICATION
REGISTERED MAIL SIGNED RETURN RECEIPTS
REQUEST FOR SIMULTANEOUS DEDICATION
LEGAL #3
JALMAT TANSILL-YATES-SEVEN RIVERS POOL
O,330' FSL & 1980' FEL
SEC. 31, T25S, R37E
LEA COUNTY, N.M.**

NSL-3169(SD)

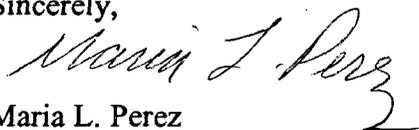
Dear Mr. Stogner:

The above application for simultaneous dedication was previously mailed to you on July 24, 1992. Enclosed are the original registered signed return receipts from the two offset operators.

Our production Engineering Dept. would like to start plug back operations on this well ASAP.

If you have any questions, please contact me at A/C 915-688-6906.

Sincerely,



Maria L. Perez
Prod. Asst.
A/C 915-688-6906

MLP/ww

xc: Well File
D. McBee
Prod. Engineer
Regulatory Files

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: Chevron U.S.A. Inc Attn: Al Bohling Proration Engineer P.O. Box 1150 Midland, TX 79702	4. Article Number P 989 355 671 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
5. Signature — Addressee X	Always obtain signature of addressee or agent and DATE DELIVERED.
6. Signature — Agent X <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
7. Date of Delivery JUL 27 1992	

PS Form 3811, Apr. 1989

★ U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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

3. Article Addressed to: Lewis Burleson P.O. Box 2479 Midland, TX 79702	4. Article Number P 989 355 672 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
5. Signature — Addressee X	Always obtain signature of addressee or agent and DATE DELIVERED.
6. Signature — Agent X <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
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: Chavron U.S.A. Inc Attn: Al Bohling Proration Engineer P.O. Box 1150 Midland, TX 79702	4. Article Number P 989 355 671 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"/>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent <input checked="" type="checkbox"/>	
7. Date of Delivery JUL 27 1992	

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