

ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION
 - Engineering Bureau -
 1220 South St. Francis Drive, Santa Fe, NM 87505



OXY USA INC
 Good Night 27 Feb #24
 5892

ADMINISTRATIVE APPLICATION CHECKLIST

THIS CHECKLIST IS MANDATORY FOR ALL ADMINISTRATIVE APPLICATIONS FOR EXCEPTIONS TO DIVISION RULES AND REGULATIONS WHICH REQUIRE PROCESSING AT THE DIVISION LEVEL IN SANTA FE

Application Acronyms:

- [NSL-Non-Standard Location] [NSP-Non-Standard Proration Unit] [SD-Simultaneous Dedication]**
- [DHC-Downhole Commingling] [CTB-Lease Commingling] [PLC-Pool/Lease Commingling]**
- [PC-Pool Commingling] [OLS - Off-Lease Storage] [OLM-Off-Lease Measurement]**
- [WFX-Waterflood Expansion] [PMX-Pressure Maintenance Expansion]**
- [SWD-Salt Water Disposal] [IPI-Injection Pressure Increase]**
- [EOR-Qualified Enhanced Oil Recovery Certification] [PPR-Positive Production Response]**

- [1] **TYPE OF APPLICATION** - Check Those Which Apply for [A]
- [A] Location - Spacing Unit - Simultaneous Dedication
 NSL NSP SD
- Check One Only for [B] or [C]
- [B] Commingling - Storage - Measurement
 DHC CTB PLC PC OLS OLM
- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery
 WFX PMX SWD IPI EOR PPR
- [D] Other: Specify _____
- [2] **NOTIFICATION REQUIRED TO:** - Check Those Which Apply, or Does Not Apply
- [A] Working, ~~Royalty~~ or ~~Overriding Royalty~~ Interest Owners
- [B] ~~Offset Operators, Leaseholders or Surface Owner~~
- [C] Application is One Which Requires Published Legal Notice
- [D] Notification and/or Concurrent Approval by BLM or SLO
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] For all of the above, Proof of Notification or Publication is Attached, and/or,
- [F] Waivers are Attached

RECEIVED
 2008 JUL 14 PM 3 39

[3] **SUBMIT ACCURATE AND COMPLETE INFORMATION REQUIRED TO PROCESS THE TYPE OF APPLICATION INDICATED ABOVE.**

[4] **CERTIFICATION:** I hereby certify that the information submitted with this application for administrative approval is **accurate** and **complete** to the best of my knowledge. I also understand that **no action** will be taken on this application until the required information and notifications are submitted to the Division.

~~Note: Statement must be completed by an individual with managerial and/or supervisory capacity.~~

David Stewart
 Print or Type Name

[Signature]
 Signature

SR. Regulatory Analyst
 Title

7/10/08
 Date

david_stewart@oxy.com
 e-mail Address



OXY USA Inc.

PO Box 50250
Midland, TX 79710-0250

July 10, 2008

New Mexico Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Attention: Richard Ezeanyim

Re: *Application for Administrative Approval of Non-Standard Location –
South Laguna Salado Bone Spring
Goodnight 27 Federal #2H
Surface/Penetration Point – 2460 FSL 1330 FWL Ut K
Bottom Hole – 1980 FSL 330 FEL Ut I
Section 27 T23S R29E
Eddy County, New Mexico*

Dear Mr. Ezeanyim:

OXY USA Inc. respectfully requests administrative approval under Rule 104 (F) of this application for the subject non-standard well location on the Goodnight 27 Federal #2H. The #2H well is proposed as a 1st Bone Spring sandstone horizontal target at a TVD of 7800'. The kickoff point for the well is at approximately 7323' and the top of the Bone Spring formation is expected at 6900' which is above the kickoff point. The wellbore will be at an orthodox location when it penetrates the 1st Bone Spring sandstone reservoir, but will not be orthodox at the top of the Bone Spring.

The #2H encroaches on the north (F), west (L), and northwest (E) 40-acre spacing units. The only other well in the section is the Goodnight 27 #1H, a horizontal 1st Bone Spring well to the south. All of section 27 is common ownership and all of the owners have both joined in the drilling of the #2H and have executed waivers of objection.

To support this request, the following information has been submitted for your review:

1. Approved Application for Permit to Drill and Change of Operator Sundry Notice.
2. NMOCD C-102 Plat for the proposed well with offsetting well and affected spacing units.
3. List of affected offset parties that adjoin the non-standard spacing unit and being encroached upon, along with a copy of the certified returned receipts and signed waivers. Copies of the signed certified receipts will be furnished upon request.
4. Proposed Directional Survey

If you need any additional information, please call me at 432-685-5717.

Sincerely,

David Stewart
Sr. Regulatory Analyst
OXY USA Inc.

Attachments

CC: NMOCD-Artesia, BLM-Carlsbad, Service List

OK

7036

187

ATS-08-185

OCD-ARTESIA

\$

FORM APPROVED
OMB No. 1004-0137
Expires March 31, 2007

HIGH CAVEKARST UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

R-111-POTASH

APPLICATION FOR PERMIT TO DRILL OR REENTER

5. Lease Serial No.
NM-105557

6. If Indian, Allottee or Tribe Name

1a. Type of work: DRILL REENTER

FEB 21 2008

1b. Type of Well: Oil Well Gas Well Other

Single Zone Multiple Zone

OCD-ARTESIA

8. Lease Name and Well No. **303865**
GOODNIGHT"27" FEDERAL # 2H

2. Name of Operator
LATIGO PETROLEUM, INC. (MARK FAIRCHILD 432-685-8188)

9. API Well No.
30-015-36137

3a. Address P. O. BOX 10340
MIDLAND, TEXAS 79702-7340

3b. Phone No. (include area code)
432-685-8100

10. Field and Section
Silagona Subado 96857
~~CEDAR CANYON~~ BONE SPRING

4. Location of Well (Report location clearly and in accordance with any State requirements.)
At surface 2460' FSL & 1330' FWL SECTION 27 T23S-R29E EDDY CO. NM
At proposed prod. zone 1980' FSL & 330' FEL SECTION 27 T23S-R29E

11. Sec., T. R. M. or Blk. and Survey or Area
SECTION 27 T23S-R29E

14. Distance in miles and direction from nearest town or post office* **Carlsbad Controlled Water Basin**
Approximately 10 miles Southeast of Loving New Mexico

12. County or Parish
EDDY CO. 13. State
NM

15. Distance from proposed* location to nearest property or lease line, ft. (Also to nearest drig. unit line, if any) **1330'**

16. No. of acres in lease
640

17. Spacing Unit dedicated to this well-
120 ACRES

18. Distance from proposed location* to nearest well, drilling, completed, applied for, on this lease, ft. **840'**

19. Proposed Depth
IVD-7800'
MD-11, 213'

20. BLM/BIA Bond No. on file
NATION WIDE WYB-000238

21. Elevations (Show whether DF, KDB, RT, GL, etc.)
3003' GL

22. Approximate date work will start*
WHEN APPROVED

23. Estimated duration
47 Days

24. Attachments

The following, completed in accordance with the requirements of Onshore Oil and Gas Order No.1, shall be attached to this form:

- 1. Well plat certified by a registered surveyor.
- 2. A Drilling Plan.
- 3. A Surface Use Plan (if the location is on National Forest System Lands, the SUPO shall be filed with the appropriate Forest Service Office).
- 4. Bond to cover the operations unless covered by an existing bond on file (see Item 20 above).
- 5. Operator certification
- 6. Such other site specific information and/or plans as may be required by the authorized officer.

25. Signature *Joe T. Janica* Name (Printed/Typed) **Joe T. Janica** Date **11/16/07**

Title **Permit Engineer**

Approved by (Signature) *Linda S. C. Rundell* Name (Printed/Typed) **/s/ Linda S. C. Rundell** Date **FEB 15 2008**

Title **STATE DIRECTOR** Office **NM STATE OFFICE**

Application approval does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.
Conditions of approval, if any, are attached. **APPROVAL FOR TWO YEARS**

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212. make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

SEE ATTACHED FOR
(Instructions on page 2)
CONDITIONS OF APPROVAL

APPROVAL SUBJECT TO
GENERAL REQUIREMENTS
AND SPECIAL STIPULATIONS
ATTACHED

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OPERATOR'S COPY

FORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

OXY USA Inc.

16696

3a. Address

P.O. Box 50250, Midland, TX 79710-0250

3b. Phone No. (include area code)

432-685-5717

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

S - 2460 FSL 1330 FWL NESW(K) Sec 27 T23S R29E

BH - 1980 FSL 330 FEL NESE(I) Sec 27 T23S R27E

5. Lease Serial No.

NM105557

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

Goodnight 27 #2H

Federal

9. API Well No.

30-015-36137

10. Field and Pool, or Exploratory Area

Laguna Bone Spring, South

11. County or Parish, State

Eddy NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

Notice of Intent

Subsequent Report

Final Abandonment Notice

Acidize

Alter Casing

Casing Repair

Change Plans

Convert to Injection

Deepen

Fracture Treat

New Construction

Plug and Abandon

Plug Back

Production (Start/Resume)

Reclamation

Recomplete

Temporarily Abandon

Water Disposal

Water Shut-Off

Well Integrity

Other Change of

Operator

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

AS REQUIRED BY 43 CFR 3100.0-5(a) AND 43 CFR 3162.3, WE ARE NOTIFYING YOU OF A CHANGE OF OPERATOR ON THE ABOVE REFERENCED LEASE EFFECTIVE 3/1/05. OXY USA INC. AS THE NEW OPERATOR ACCEPTS ALL APPLICABLE TERMS, CONDITIONS, STIPULATIONS AND RESTRICTIONS CONCERNING OPERATIONS CONDUCTED ON THE LEASE OR PORTION OF LEASE DESCRIBED. OXY USA INC. MEETS FEDERAL BONDING REQUIREMENTS AS FOLLOWS (43 CFR 3104):
NATIONWIDE OIL & GAS BOND NO. ES0136.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

David Stewart

Title

Sr. Regulatory Analyst

Date

5/13/08

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240

DISTRICT II
1301 W. Grand Avenue, Artesia, NM 88210

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

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised October 12, 2005

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

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number	Pool Code 1863 96857	Pool Name S. Laguna Salado CEDAR CANYON -BONE SPRING
Property Code	Property Name GOODNIGHT "27" FEDERAL	Well Number 2H
OGRID No. 27001	Operator Name LATIGO PETROLEUM INC.	Elevation 3003'

Surface Location

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	27	23 S	29 E		2460	SOUTH	1330	WEST	EDDY

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
1	27	23 S	29 E		1980	SOUTH	330	EAST	EDDY

Dedicated Acres 120	Joint or Infill	Consolidation Code	Order No.
------------------------	-----------------	--------------------	-----------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

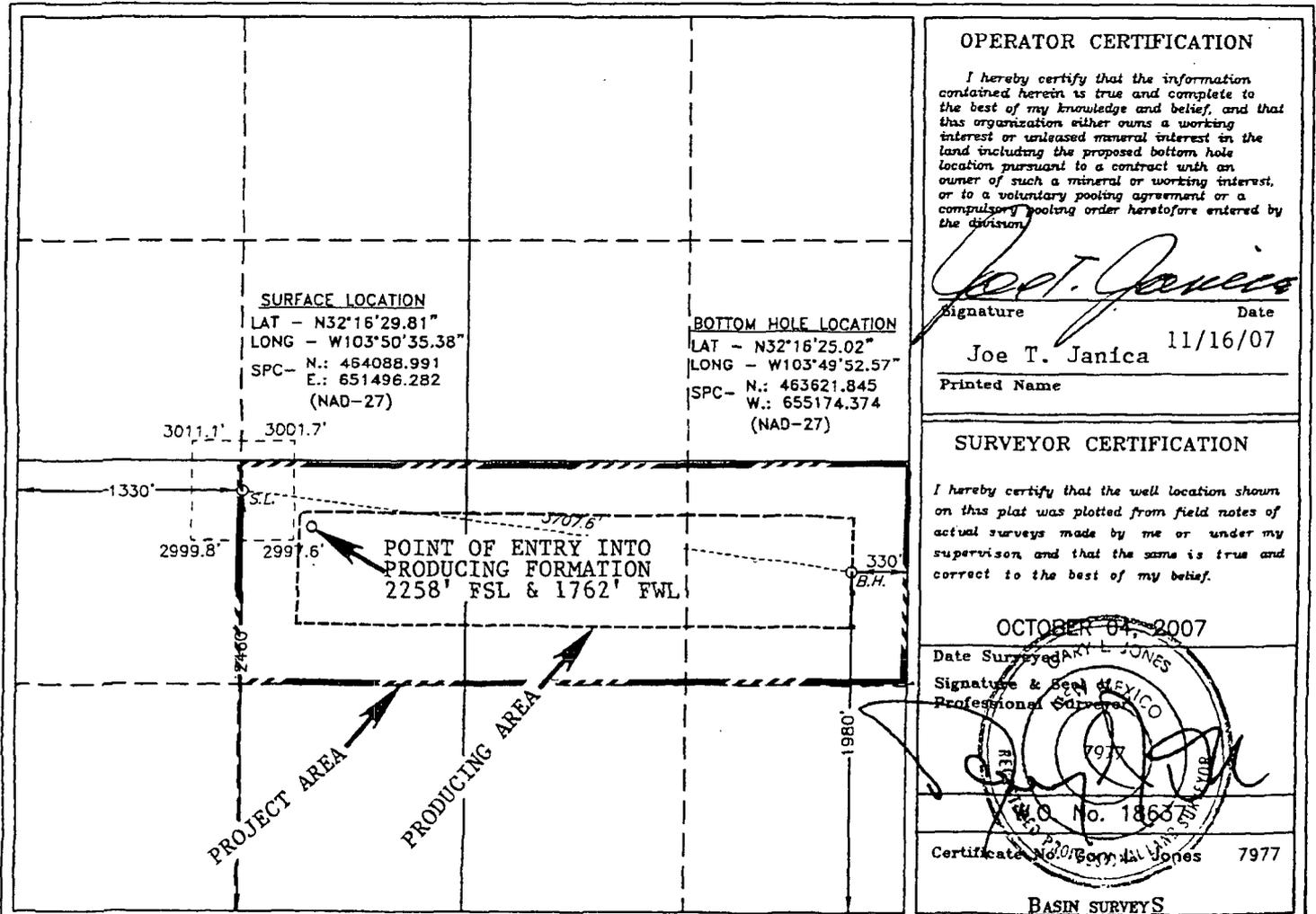


EXHIBIT "A"

DISTRICT I
1025 N. French Dr., Hobbs, NM 88240

DISTRICT II
1301 V. Grand Avenue, Artesia, NM 88210

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

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals and Natural Resources Department

Form C-102
Revised October 12, 2005
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

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Property Code	Property Name GOODNIGHT "27" FEDERAL	Well Number 2H
OCRID No. 27001	Operator Name Oxy USA Inc.	Elevation 3003'

Surface Location

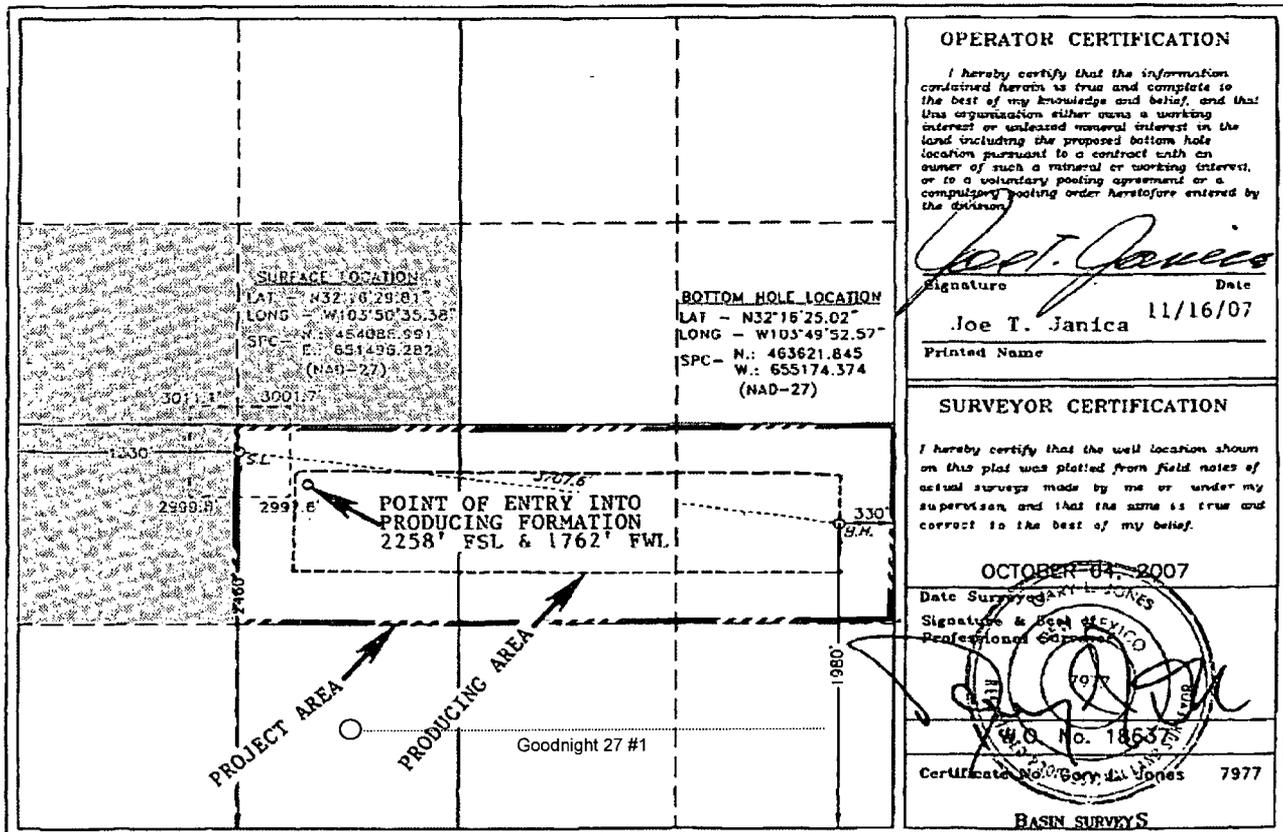
UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
L	27	23 S	29 E		2460	SOUTH	1330	WEST	EDDY

Bottom Hole Location If Different From Surface

UL or lot No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
I	27	23 S	29 E		1980	SOUTH	330	EAST	EDDY

Dedicated Acres 120	Joint or Infill	Consolidation Code	Order No.
------------------------	-----------------	--------------------	-----------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT 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, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

Joe T. Janica
Signature Date
Joe T. Janica 11/16/07
Printed Name

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 belief.

OCTOBER 04, 2007
Date Surveyed
Signature & Seal of Surveyor
Professional Geologist
W.O. No. 18637
Certificate No. 7977
BASIN SURVEYS

The #2H well is proposed as a 1st Bone Spring sandstone horizontal target at a TVD of 7800 ft. The kickoff point for the well is at 7323 ft. The top of the Bone Spring formation is expected at 6900 ft, above the kickoff point. The wellbore will be at an orthodox location when it penetrates the 1st Bone Spring sandstone reservoir within the Bone Spring, but it will not be orthodox at the top of the Bone Spring.

The #2H encroaches on the north, west, and northwest 40-acre spacing units. The only other well in the section is the Goodnight 27 #1H, a horizontal 1st Bone Spring well to the south. All of section 27 is common ownership. All of the owners have both joined in the drilling of the #2H and have executed waivers of objection.

Service List – NSL
OXY USA Inc.
Goodnight 27 Federal #2H
Sec 27 T23S R29E

United States Dept of Interior
Bureau of Land Management
620 E. Greene Street
Carlsbad, NM 88220-6292

New Mexico Oil Conservation Division
1301 W. Grand Ave.
Artesia, NM 88210

New Mexico Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Affected Offset Parties:

The Allar Company
P.O. Box 1567
Graham, TX 76450

John L. Thoma
P.O. Box 863418
Plano, TX 75086-3418

Chesapeake Exploration LP.
P.O. Box 18496
Oklahoma City, OK 73154

Chevron USA Inc.
P.O. Box 36366
Houston, TX 77236

Latigo Petroleum, Inc.
700 Milam, Ste. 3100
Houston, TX 77002

Talus, Inc.
P.O. Box 1210
Graham, TX 76450

Twin Montana Inc.
P.O. Box 1210
Graham, TX 76450



OXY USA Inc.

PO Box 50250
Midland, TX 79710-0250

July 10, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

(Offset Parties Address)

Re: *Application for Administrative Approval of Non-Standard Location –
South Laguna Salado Bone Spring
Goodnight 27 Federal #2H
Surface/Penetration Point – 2460 FSL 1330 FWL Ut K
Bottom Hole – 1980 FSL 330 FEL Ut I
Section 27 T23S R29E
Eddy County, New Mexico*

Ladies and Gentlemen:

Enclosed is a copy of an application, filed with the New Mexico Oil Conservation Division by OXY USA Inc., requesting administrative approval under Rule 104 (F) of an unorthodox well location. As an affected party, notice is being provided to you pursuant to Rule 104 (F). The well is located in the NESW/4 of Section 27 T23S R29E, Eddy County, NM. If you object to the well's location, you must notify the Division in writing no later than 20 days from the date the application is received by the NMOCD (1220 South St. Francis Drive, Santa Fe, NM 87505; Attention: Richard Ezeanyim).

If you need any additional information, please call me at 432-685-5717.

Sincerely,

David Stewart
Sr. Regulatory Analyst
OXY USA WTP LP

Attachments



Patrick S. Sparks
Landman Advisor

OXY USA Inc.
Box 4294, Houston, TX 77210-4294

Telephone: (713) 350-4784
FAX: (713) 366-5200

June 4, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

WORKING INTEREST OWNERS

RE: AFE
Goodnight 27 Federal # 2H
SL 2460' FSL & 1330' FWL
BHL 1980' FSL & 330' FEL
Section 27-23S-29E
Eddy County, New Mexico

Gentlemen:

Enclosed for your review and execution is an AFE covering the above captioned well. Please let us know at your earliest convenience of your election to participate in the drilling of this well.

The Goodnight 27 Federal #2H well is an unorthodox location for the Bone Spring reservoir. Oxy will file an application for administrative NSL (nonstandard location) approval. The owners under the Goodnight 27 Federal lease are the only affected parties entitled to notice. Execution of waivers of protest will facilitate approval of our application. We therefore request that you waive protest to our NSL application below.

Please return one approved copy of the AFE along with this waiver letter to my attention.

Very truly yours,

OXY USA WTP LP

Patrick S. Sparks

I waive protest to Oxy's NSL application for the drilling of the Goodnight 27 Federal #2H well

Approval

Company

Date



Patrick S. Sparks
Landman Advisor

OXY USA Inc.
Box 4294, Houston, TX 77210-4294

Telephone: (713) 350-4784
FAX: (713) 366-5200

June 4, 2008

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Goodnight 27 Federal # 2H
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OXY USA WTP LP

Patrick S. Sparks

I waive protest to Oxy's NSL application for the drilling of the Goodnight 27 Federal #2H well.

Approval

Company

6-16-08
Date



Patrick S. Sparks
Landman Advisor

OXY USA Inc.
Box 4294, Houston, TX 77210-4294

Telephone: (713) 350-4784
FAX: (713) 366-5200

June 4, 2008

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Very truly yours,

OXY USA WTP LP

Patrick S. Sparks

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Craig Bannell
Approval

Chesapeake
Company

6/26/08
Date



OXY USA Inc.
Box 4294, Houston, TX 77210-4294

Patrick S. Sparks
Landman Advisor

Telephone: (713) 350-4784
FAX: (713) 366-5200

June 4, 2008

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

WORKING INTEREST OWNERS

RE: AFE
Goodnight 27 Federal # 2H
SL 2460' FSL & 1330' FWL
BHL 1980' FSL & 330' FEL
Section 27-23S-29E
Eddy County, New Mexico

JUN 05 2008
N.O.J.V.

Gentlemen:

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OXY USA WTP LP

Patrick S. Sparks

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Shelby Wollver for JMW

7/1/08

Approval

Company

Date

Chevron U.S.A. Inc
J. M. Wollver
NOJV Manager



Patrick S. Sparks
Landman Advisor

OXY USA Inc.
Box 4294, Houston, TX 77210-4294

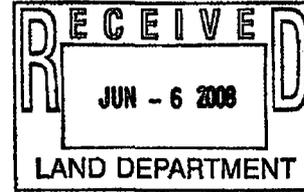
Telephone: (713) 350-4784
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June 4, 2008

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WORKING INTEREST OWNERS

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Very truly yours,

OXY USA WTP LP

Patrick S. Sparks

I waive protest to Oxy's NSL application for the drilling of the Goodnight 27 Federal #2H well.

J. Rumsey
Approval
RSW
14c

Latigo Petroleum, Inc. 6/25/08
Company Date



Patrick S. Sparks
Landman Advisor

OXY USA Inc.
Box 4294, Houston, TX 77210-4294

Telephone: (713) 350-4784
FAX: (713) 366-5200

June 4, 2008

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WORKING INTEREST OWNERS

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Section 27-23S-29E
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Very truly yours,

OXY USA WTP LP

Patrick S. Sparks

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Kc Naggart - VP
Approval

Talus
Company

6/5/08
Date



Patrick S. Sparks
Landman Advisor

OXY USA Inc.
Box 4294, Houston, TX 77210-4294

Telephone: (713) 350-4784
FAX: (713) 366-5200

June 4, 2008

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

WORKING INTEREST OWNERS

RE: AFE
Goodnight 27 Federal # 2H
SL 2460' FSL & 1330' FWL
BHL 1980' FSL & 330' FEL
Section 27-23S-29E
Eddy County, New Mexico

Gentlemen:

Enclosed for your review and execution is an AFE covering the above captioned well. Please let us know at your earliest convenience of your election to participate in the drilling of this well.

The Goodnight 27 Federal #2H well is an unorthodox location for the Bone Spring reservoir. Oxy will file an application for administrative NSL (nonstandard location) approval. The owners under the Goodnight 27 Federal lease are the only affected parties entitled to notice. Execution of waivers of protest will facilitate approval of our application. We therefore request that you waive protest to our NSL application below.

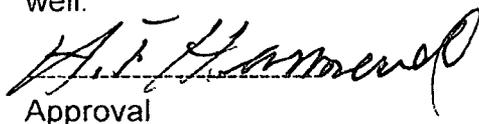
Please return one approved copy of the AFE along with this waiver letter to my attention.

Very truly yours,

OXY USA WTP LP

Patrick S. Sparks

I waive protest to Oxy's NSL application for the drilling of the Goodnight 27 Federal #2H well.


Approval

Twin Montaña, Inc.
Company

6-9-08
Date

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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 <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
United States Dept of Interior Bureau of Land Management 620 E. Greene Street Carlsbad, NM 88220-6292	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	7005 0390 0002 9920 7511	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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 <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
New Mexico Oil Conservation Division 1301 W. Grand Ave. Artesia, NM 88210	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	7005 0390 0002 9920 7528	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> 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 <input type="checkbox"/> Agent <input type="checkbox"/> Addressee	
1. Article Addressed to:	B. Received by (Printed Name)	C. Date of Delivery
New Mexico Oil Conservation Division 1220 South St. Francis Dr. Santa Fe, NM 87505	D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No	
2. Article Number (Transfer from service label)	3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.	
	4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
	7005 0390 0002 9920 7535	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540		

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

The Allar Company
P.O. Box 1567
Graham, TX 76450

2. Article Number
(Transfer from service label)

7005 0390 0002 9920 7542

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (Extra Fee) Yes**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

John L. Thoma
P.O. Box 863418
Plano, TX 75086

2. Article Number
(Transfer from service label)

7005 0390 0002 9920 7559

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (Extra Fee) Yes**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Chesapeake Exploration LP.
P.O. Box 118496
Oklahoma City, OK 73154

2. Article Number
(Transfer from service label)

7005 0390 0002 9920 7566

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

 Certified Mail Express Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.4. Restricted Delivery? (Extra Fee) Yes**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Chevron USA Inc.
P.O. Box 36366
Houston, TX 77236

2. Article Number
(Transfer from service label)

7005 0390 0002 9920 7573

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Latigo Petroleum Inc.
700 Milam, Ste. 3100
Houston, TX 77002

2. Article Number
(Transfer from service label)

7005 0390 0002 9920 7580

PS Form 3811, February 2004

Domestic Return Receipt

102598-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

-
- Agent
-
-
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

 Yes**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Talus, Inc.
P.O. Box 1210
Graham, TX 76450

2. Article Number
(Transfer from service label)

7005 0390 0002 9920 7597

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

-
- Agent
-
-
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

 Yes**SENDER: COMPLETE THIS SECTION**

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

1. Article Addressed to:

Twin Montana Inc.
P.O. Box 1210
Graham, TX 76450

2. Article Number
(Transfer from service label)

7005 0390 0002 9920 7603

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

-
- Agent
-
-
- Addressee

B. Received by (Printed Name)

C. Date of Delivery

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

 Yes

GOODNIGHT 27 FED # 2H

TVD	N/S	E/W		
1343	0.00	0.00	0	10
2343	0.00	0.00	0	10
3343	0.00	0.00	0	10
4343	0.00	0.00	0	10
5343	0.00	0.00	0	10
6343	0.00	0.00	0	10
7323.00	0.00	0.00	0	0
7372.91	-1.11	2.37	6.841375	2.615602
7422.27	-4.43	9.45	108.8632	10.43375
7470.54	-9.92	21.16	546.1004	23.36879
7517.20	-17.52	37.38	1703.956	41.279
7561.73	-27.15	57.92	4091.925	63.96816
7603.65	-38.70	82.57	8315.191	91.18767
7642.49	-52.05	111.04	15040.4	122.6393
7677.83	-67.05	143.04	24957.21	157.9785
7709.28	-83.54	178.21	38737.34	196.818
7736.50	-101.33	216.16	56993.17	238.7324
7759.19	-120.23	256.48	80237.58	283.2624
7777.10	-140.03	298.73	108847.3	329.9201
7790.03	-160.52	342.44	143030.9	378.1943
7797.85	-181.47	387.13	182804.3	427.5562
7800.46	-202.65	432.32	227972.7	477.4648
7800.46	-236.90	526.14	332944.4	577.0134
7800.46	-254.25	624.49	454633.7	674.2653
7800.46	-258.61	724.37	591584.9	769.1456
7800.46	-258.61	824.37	746458.3	863.9782
7800.46	-258.61	924.37	921331.6	959.8602
7800.46	-258.61	1024.37	1116205	1056.506
7800.46	-258.61	1124.37	1331078	1153.724
7800.46	-258.61	1224.37	1565952	1251.38
7800.46	-258.61	1324.37	1820825	1349.379
7800.46	-258.61	1424.37	2095698	1447.653
7800.46	-258.61	1524.37	2390572	1546.147
7800.46	-258.61	1624.37	2705445	1644.824
7800.46	-258.61	1724.37	3040318	1743.651
7800.46	-258.61	1824.37	3395192	1842.605
7800.46	-258.61	1924.37	3770065	1941.666
7800.46	-258.61	2024.37	4164938	2040.818
7800.46	-258.61	2124.37	4579812	2140.049
7800.46	-258.61	2224.37	5014685	2239.349
7800.46	-258.61	2324.37	5469559	2338.709
7800.46	-258.61	2424.37	5944432	2438.121
7800.46	-258.61	2524.37	6439305	2537.579
7800.46	-258.61	2624.37	6954179	2637.078
7800.46	-258.61	2724.37	7489052	2736.613

7800.46	-258.61	2824.37	8043925	2836.181
7800.46	-258.61	2924.37	8618799	2935.779
7800.46	-258.61	3024.37	9213672	3035.403
7800.46	-258.61	3124.37	9828545	3135.051
7800.46	-258.61	3614.37	13130525	3623.607

