

DATE IN 2-12-10	SUSPENSE	ENGINEER Jones	LOGGED IN 2-12-10	TYPE SWD	APP NO. 1004329631
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ABOVE THIS LINE FOR DIVISION USE ONLY

NEW MEXICO OIL CONSERVATION DIVISION

- Engineering Bureau -

1220 South St. Francis Drive, Santa Fe, NM 87505



Chesapeake Water Disposal System
Goodwin State #1

ADMINISTRATIVE APPLICATION CHECKLIST 30-085-34593

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

[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.

Debbie McKelvey
Print or Type Name

Debbie McKelvey
Signature

Agent
Title

1/28/10
Date

debmeKelvey@earthlink.net
e-mail Address

SWD-827-A

Goodwin Abo
Goodwin Drinkard
28390

Took well over
9-30-09

CHEYENNE WATER DISPOSAL SYSTEMS, LLC
P.O. BOX 132
HOBBS, NM 88241

RECEIVED
2010 FEB 11 PM 1 43

February 9, 2010

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

Re: Proposed Amendment to Administrative Order SWD-827-A
Convert to Injection (SWD) Well
Goodwin State No. 1, API 30-025-34593
330' FNL & 330' FWL of Section 6, T-19S, R37E
Lea County, New Mexico

Dear Sir or Madam:

Attached is a C108 to amend the referenced order. The amendment proposes to add additional perforations in the ~~San Andres~~ formation in the interval of 4350-4900', and to amend the maximum injection pressure to 870 psi. The additional San Andres zone perforations will be commingled with the previously approved injection interval of 5110-6040'.

Also attached are the Administrative Application Checklist and the Cement Bond Logs. The Legal Notice and Proof of Notifications will be forwarded to you at a later date. If you have any questions, please do not hesitate to call me at 575-392-3575.

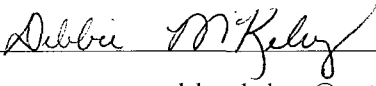
Sincerely,

Debbie McKelvey

Debbie McKelvey, Agent for
Cheyenne Water Disposal Systems LLC

c- Oil Conservation Division
1625 N. French Dr.
Hobbs, NM 88240

APPLICATION FOR AUTHORIZATION TO INJECT

- I. PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage
Application qualifies for administrative approval? Yes No
- II. OPERATOR: CHEYENNE WATER DISPOSAL SYSTEMS LLC OGRID 269152 ✓
ADDRESS: P.O. BOX 132, HOBBS, NM 88241
CONTACT PARTY: BILL HICKS PHONE: 575-392-3270
- III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.
Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? Yes X No
If yes, give the Division order number authorizing the project: _____
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- *X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).
- *XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- NAME: Debbie McKelvey TITLE: Agent
SIGNATURE:  DATE: 1/11/10
E-MAIL ADDRESS: debmcKelvey@earthlink.net
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: 6-4-2009 Original Application

INJECTION WELL DATA SHEET

OPERATOR: Cheyenne Water Disposal Systems LLCWELL NAME & NUMBER: Goodwin State No. 1WELL LOCATION: 330' FNL & 330' FWL D UNIT LETTER SECTION 6 TOWNSHIP 19-S RANGE 37-EWELLBORE SCHEMATICWELL CONSTRUCTION DATA
Surface Casing

See Attached

Hole Size: 12 1/4" Casing Size: 8 5/8"
Cemented with: 790 sx. or ft³
Top of Cement: 0' Method Determined: Circ 213 sx

Intermediate Casing

Hole Size: _____ Casing Size: _____
Cemented with: _____ sx. or _____ ft³
Top of Cement: _____ Method Determined: _____

Production Casing

Hole Size: 7 7/8" Casing Size: 5 1/2"
Cemented with: 400 sx. or _____ ft³
Top of Cement: 5350' Method Determined: CBL
Total Depth: 7510'

Injection Interval

4350'
5110 feet to 6040'

(Perforated or Open Hole; indicate which)

INJECTION WELL DATA SHEETTubing Size: 2 7/8" Lining Material: IPCType of Packer: Baker Model R or equivalentPacker Setting Depth: 5000'

Other Type of Tubing/Casing Seal (if applicable): _____

Additional Data

1. Is this a new well drilled for injection? _____ Yes x No

If no, for what purpose was the well originally drilled? Goodwin Drinkard/Abo

producer

2. Name of the Injection Formation: GRAYBORG San Andres, Delaware, Bone Springs

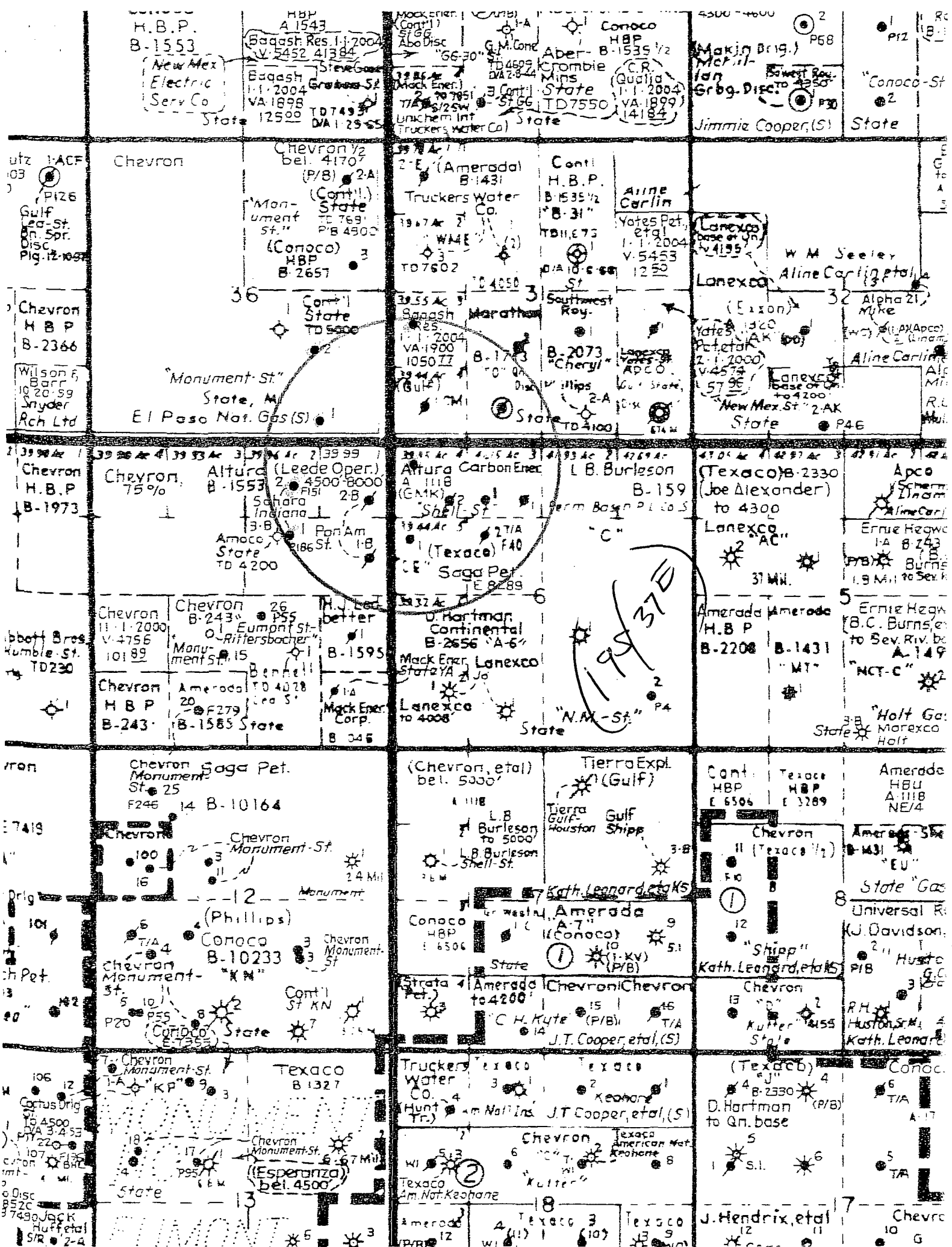
3. Name of Field or Pool (if applicable): _____

4. Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail, i.e. sacks of cement or plug(s) used. _____

See Attached Schematic

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: Eumont Yates/Seven Rivers/Queen

3700-4000' Goodwin Drinkard/Abo 66676-7510'



DIVISION Generated

Cheyenne Water Disposal Systems, LLC

Re-instate SWD-827-B and raise disposal interval: 4350 - 6040 (Queen, GBG, SA, Glor, Paddock)

3002534593	GOODWIN STATE 001	HRC INC	330 N	330 W	D	6 19S	37E	30-025-34593	I	T	7510			
API	WELL_NAME	OPERATOR	FTG NS	NS	FTG EW	EW	OCD	I Sec	Tsp	Rge	Dist	SDIV	WI Status	TYD DEPTH
3002534760	GOODWIN STATE 001	XTO ENERGY, INC	2160 S	S	330 W	330 W	L	31	18S	37E	2,490	3	SWD -- 114	7792
3002534560	MONUMENT 36 STATE 001	XTO ENERGY, INC	384 S	S	1216 E	E	P	36	18S	36E	1,703	P	T	7512
3002534561	MONUMENT 36 STATE 002	XTO ENERGY, INC	1632 S	S	1298 E	E	I	36	18S	36E	2,549	I	A	7509
3002534476	INDIANA I 002	SAHARA OPERATING CO	744 N	N	1653 E	E	B	1	19S	36E	2,026	2	A	7480
Shallow Wells in AOR														
3002503984	STATE B 001	PAN AMERICAN PETROL	1980 N	N	330 E	E	H	1	19S	36E	1,777	H	P	4054
3002503985	STATE B 002	PAN AMERICAN PETROL	990 N	N	330 E	E	A	1	19S	36E	933	I	P	4050
3002526637	SHELL STATE 001	CARBON ENERGY INC	990 N	N	1650 W	W	C	6	19S	37E	1,476	3	P	4030
3002505518	LEA CM STATE 001	GULF OIL CORP	660 S	S	660 W	W	M	31	18S	37E	1,044	4	P	4028
3002505565	NEW MEXICO CE STATE 001	LATIGO PETROLEUM, INC.	1655 N	N	330 W	W	E	6	19S	37E	1,325	5	T	4007
3002505563	SHELL STATE 001	GROVER MACCOURDY & K	990 N	N	2310 W	W	C	6	19S	37E	2,087	3	P	3992
3002505564	SHELL STATE 002	GROVER MACCOURDY & K	995 N	N	976 W	W	D	6	19S	37E	927	4	P	3990
3002505567	NEW MEXICO CE STATE 002	LATIGO PETROLEUM, INC.	1685 N	N	1652 W	W	F	6	19S	37E	1,893	F	T	3989
3002505516	STATE O 001	MORRIS R ANTWEIL	660 S	S	1980 W	W	N	31	18S	37E	1,924	N	P	3961
Outside AOR														
3002526064	STATE B 003	BP AMERICA PRODUCTI	1650 N	N	1980 E	E	G	1	19S	36E	2,661	G	P	4200
3002534364	INDIANA I 001	SAHARA OPERATING CO	1682 N	N	1975 E	E	G	1	19S	36E	2,672	G	A	7480
3002505517	STATE O 002	MORRIS R ANTWEIL	1650 S	S	2310 W	W	K	31	18S	37E	2,800	K	P	3976

**GOODWIN STATE NO. 1
FORM C-108 PROPOSED AMENDMENT TO SWD-827-A
AUTHORIZATION TO INJECT**

VI. DATA ON WELLS IN THE AREA OF REVIEW

1. XTO ENERGY, INC.

Monument '36' State No. 1

384' FSL & 1216' FEL of Section 36, T-18S, R-36E

Spud: 1/27/1999 Elevation: 3752' KB TD: 7512'

14-3/4" Hole; 11-3/4" Csg. @ 425' w/300 sx. circulated

11" Hole; 8-5/8" Csg. @ 2852' w/900 sx. circulated

7-7/8" Hole; 5-1/2" Csg. @ 7283' w/710 sx.; TOC @ 2250' ✓

Open Hole Completion: 7283'-7512'

Active Producer

2. XTO ENERGY, INC.

Monument '36' State No. 2

1632' FSL & 1298' FEL of Section 36, T-18S, R-36E

Spud: 4/07/1999 Elevation: 3742' GL TD: 7509'

11" Hole; 8-5/8" Csg. @ 1515' w/465 sx. circulated

7-7/8" Hole; 5-1/2" Csg. @ 7251' w/1470 sx.; TOC @ 820' ✓

Open Hole Completion: 7260'-7509'

Active Producer

3. SAHARA OPERATING COMPANY

Indiana '1' No. 1

1682' FNL & 1975' FEL of Section 1, T-19S, R-36E

Spud: 6/08/1998 Elevation: 3738' GL TD: 7480'

12-1/4" Hole; 8-5/8" Csg. @ 1550' w/800 sx. circulated

7-7/8" Hole; 5-1/2" Csg. @ 7480' w/1530 sx. circulated ✓

Perforations: 7459'-7468', 7472'-7476', 7276'-82', 7284'-88', 7292'-95', 7297'-7302', 7307'-12', 7315'-22', 7326'-30', 7336'-42', 7353'-60', 7369'-73', 7378'-90', 7404'-12', 7429'-41', & 7446'-47'

Active Producer

OUT OF
APR

4. SAHARA OPERATING COMPANY

Indiana '1' No. 2

744' FNL & 1653' FEL of Section 1, T-19S, R-36E

Spud: 8/21/1998 Elevation: 3745' KB TD: 7480'

12-1/4" Hole; 8-5/8" Csg. @ 1593' w/790 sx. circulated

7-7/8" Hole; 5-1/2" Csg. @ 7205' w/1288 sx.; TOC @ 1330' ✓

Open Hole Completion: 7205'-7480'

Perforations: 6566'-86', 6592'-97' and 6602'-17' Squeezed w/25 sx. Class 'C' cmt.

Active Producer

5. XTO ENERGY, INC.

Goodwin '10' State SWD No. 1

2160' FSL & 330' FWL of Section 31, T-18S, R-36E

Spud: 11/24/1999 Elevation: 3746' KB TD: 7794'

12-1/4" Hole; 8-5/8" Csg. @ 1298' w/605 sx. circulated

8-3/4" Hole, 5-1/2" Csg. @ 7792' w/2010 sx. circulated

Perforations: Abo from 7634'-59' and 7679'-99' Squeezed

Abo from 7383'-96' and 7575'-95'

CIBP @ 7350' w/35' cmt. cap.

PBTD: 7315'

Perforations: 5380'-84', 5420'-60', 5546'-64', 5864'-83', 6890'-6920', 6820'-32', 6842'-55', 6976'-96', and 7003'-47' ✓

Active Salt (Produced) Water Disposal Well

VII. PROPOSED OPERATIONS

1. Average Daily Rate: 700 BWPD
Maximum Daily Rate: 1400 BWPD
2. Closed System
3. Average Injection Pressure: 600 psig
Maximum Injection Pressure: 870 psig
4. Source of water will be produced water from various formations in the immediate area which may include Abo, Drinkard, Bone Springs, Delaware, San Andres, Penrose/Queen, and Yates-Seven Rivers.
5. Water sample analysis from two offset producing wells are attached.

VIII. GEOLOGIC DATA

The proposed injection zones include the San Andres, Delaware, and Bone Springs formations in the intervals 4350-4900' and 5110-6040'. The zones consist of limestones, dolomites, and sands. Regionally the area is considered to be on the western edge of the Central Basin Platform transitioning to the Delaware Basin. The Ogallala aquifer overlies the proposed location. Maximum well depth within one mile is 180 feet with average depth to water of

Goodwin State No. 1

Form C-108

Page 3 of 3

52 feet. Attached is the Water Column Report from the New Mexico State Engineer's Office for a radius of one mile around the proposed location.

- IX.** Perforated intervals will be acidized as required with up to a total of 10,000 gallons of 15% HCL-NE-FE acid.
- X.** Well logs have been previously submitted.
- XI.** The six wells located in the vicinity of the wellbore are in service with the local electric utility company. No sample taps are installed and we were unable to obtain water samples for analysis.
- XII.** Examination of the available geologic and engineering data reveals no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
- XIII.** "Proof of Notice" advertisement and return receipts are attached.

XT02 Govt 5762#1 w/ll File
202-310760

XT05
Frgm. Gerdner 5126 #1
025-34760

XT05
Figueroa
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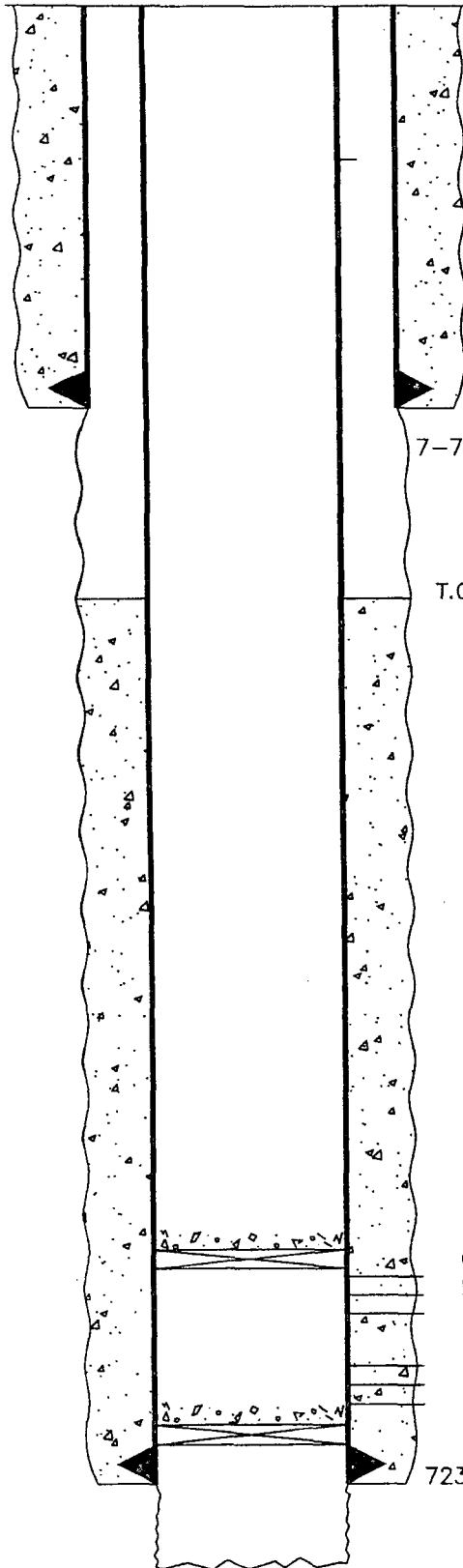
XT05
Figueroa
025-34760

XT05
Figueroa
025-34760

CURRENT WELLBORE

5/26/2009

Elev. = 3735' GL



12-1/4" Hole

1618' - 8 5/8" Casing. Cemented w/790 sxs. Circulated to Surface.

7-7/8" Hole

T.O.C. @ 5350' by CBL

CIBP @ 6675' capped w/35' cmt.
Perfs 6676'-94'

Perfs 6850'-54', 6864'-78', 6880'-83', & 6888'-92'

CIBP @ 7100' capped w/35' cmt.
7236' - 5 1/2", 17# CASING. CEMENTED W/400 SXS.

T.D. = 7510'

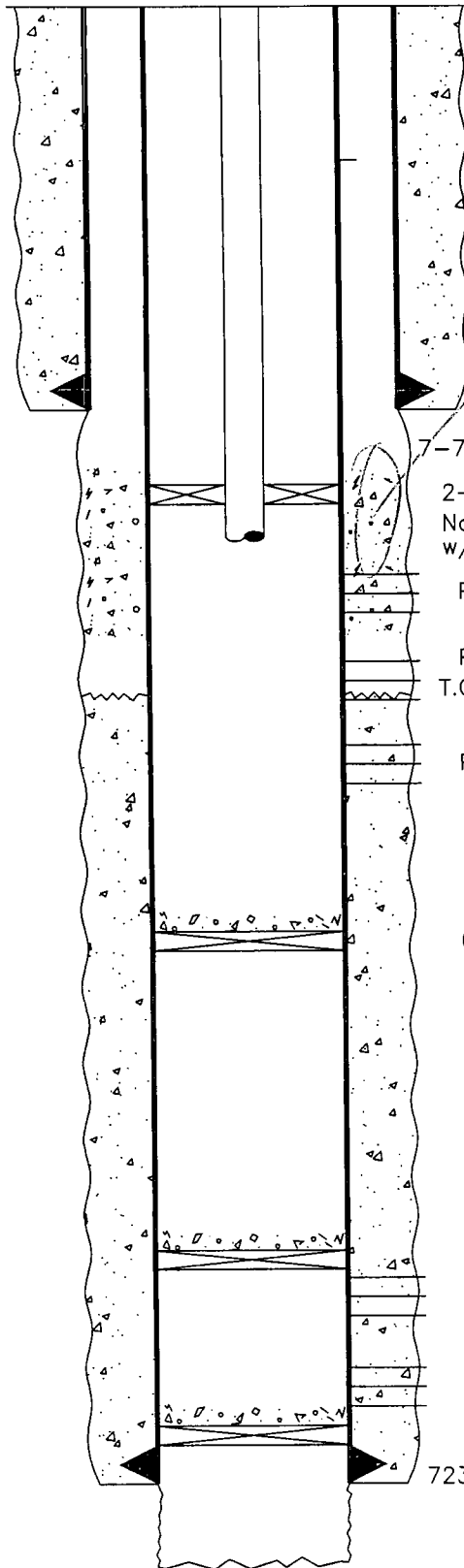
Cheyenne Water Disposal Systems LLC
Goodwin State No. 1
330' FNL & 330' FWL
Sec. 6, T-19S, R-37E
Lea County, New Mexico

PROPOSED SWD INJECTOR

1/7/2010

Elev. = 3735' GL

*already done
by 12/09*



12-1/4" Hole

5000' 2-7/8", 6.5#, J-55, IPC Tubing
w/Baker Modle 'R' nickel plated packer or equivalent

1618' - 8 5/8" Casing. Cemented w/790 sxs. Circulated to Surface.

7-7/8" Hole

2-7/8" x 5-1/2" packer set @ 4250'

Note: Annulus circulated from perfs @ 5100'
w/500sxs. TOC @ 2700' by CBL

Perfs 4350'-4900' Overall

Perfs 5110'-55', 5199'-5226', 5238'-50', & 5348'-76'

T.O.C. @ 5350' by CBL

Perfs 5658'-70', 5678'-86', 5746'-94', & 6004'-6040'

CIBP @ 6230' capped w/35' cmt.

CIBP @ 6675' capped w/35' cmt.

Perfs 6676'-94'

Perfs 6850'-54', 6864'-78', 6880'-83', & 6888'-92'

CIBP @ 7100' capped w/35' cmt.

7236' - 5 1/2", 17# CASING. CEMENTED W/400 SXS.

T.D. = 7510'

Cheyenne Water Disposal, LLC
Goodwin State No. 1
330' FNL & 330' FWL
Sec. 6, T-19S, R-37E
Lea County, New Mexico

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

OIL CONSERVATION DIVISION

2040 Pacheco St.
Santa Fe, NM 87505

WELL API NO. 30-025-34593
Indicate Type of Lease STATE ☒ FEE ☐
State Oil & Gas Lease No. A-1118
Lease Name or Unit Agreement Name Goodwin State
Well No. 1
Pool name or Wildcat Wildcat, Abo

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" (FORM C-101) FOR SUCH PROPOSALS.)	
Type of Well OIL WELL ☒ GAS WELL ☐ OTHER ☐	
Name of Operator Xeric Oil & Gas Corporation	
Address of Operator P. O. Box 352, Midland, Texas 79702	
Well Location Unit Letter <u>D</u> <u>330</u> Feet From The <u>North</u> Line and <u>330</u> Feet From The <u>West</u> Line Section <u>6</u> Township <u>19S</u> Range <u>37E</u> NMPM <u>Lea</u> County	
Elevation (Show whether DF, RKB, RT, GR, etc.) 3735 GR	

11

Check Appropriate Box to Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐
OTHER: ☐

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ANBANDONMENT ☐
CASING TEST AND CEMENT JOB ☐
OTHER: Set production casing ☒

Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work) SEE RULE 1103.

5/29/99 - TD 7 7/8" hole @ 7270' - No Oil or Gas shows above 7270' therefore elect not to run open hole logs

5/30/99 - RIH w/ 164 jts - 5 1/2" - 17# - N80 & J55 casing to a setting depth of 7236' - Cement pipe w/ 400 sx
Class "c" + 5/10% FL-25 + 1/10% SMS + 2/10% CD-32 - flush w/ 4% KCL
Attempt an open hole completion in Abo Formation - drill out w/ pulling unit

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

SIGNATURE Michael G. Mooney TITLE Consulting Engineer DATE 05-31-99

TYPE OR PRINT NAME Michael G. Mooney TELEPHONE NO. 915/683-3171

(This space for State Use)

APPROVED BY Michael G. Mooney TITLE Consulting Engineer DATE 05-31-99

CONDITIONS OF APPROVAL, IF ANY:

Office

Energy, Minerals and Natural Resources

May 27, 2004

District I

1625 N. French Dr., Hobbs, NM 88241

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

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

RECEIVED

OIL CONSERVATION DIVISION

OCT 27 2009 1220 South St. Francis Dr.

HOBBSOCD

Santa Fe, NM 87505

WELL API NO.

30-025-34593 ✓

5. Indicate Type of Lease

STATE ☒ FEE ☐

6. State Oil & Gas Lease No.

7. Lease Name or Unit Agreement Name

GOODWIN STATE /

8. Well Number 1 /

9. OGRID Number

269152 ✓

10. Pool name or Wildcat

GOODWIN; DRINKARD

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" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well ☐ Gas Well ☐ Other ☒

2. Name of Operator

CHEYENNE WATER DISPOSAL SYSTEMS, LLC ✓

3. Address of Operator

P. O. BOX 132, HOBBS, NM 88241

4. Well Location

Unit Letter D : 330 feet from the NORTH line and 330 feet from the WEST lineSection 6 Township 19S Range 37E NMPM LEA County ✓

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

Pit or Below-grade Tank Application ☐ or Closure ☐

Pit type _____ Depth to Groundwater _____ Distance from nearest fresh water well _____ Distance from nearest surface water _____

Pit Liner Thickness: _____ mil Below-Grade Tank: Volume _____ bbls; Construction Material _____

12. Check Appropriate Box to Indicate Nature of Notice Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐TEMPORARILY ABANDON ☐ CHANGE PLANS ☐PULL OR ALTER CASING ☐ MULTIPLE COMPL ☐OTHER: CONVERT TO SWD ☒ REVISED

REMEDIAL CONDITION OF APPROVAL: NOTIFY OCD HOBBS

COMMENCE 24 hours prior to running MIT Test & Chart

CASING/CEMENT AND A ☐

OTHER:

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent information of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram or recompletion.
1. MIRU. NU BOP.
 2. PU 4-3/4" bit, 5-1/2" casing scraper, and 2-7/8" workstring.
 3. TIH to PBTD at 6675'. Load hole and circulate w/140 bbls. fresh water. Pressure test casing to 1000 psi for 30 minutes. TOOH.
 4. RU wireline truck and run GR-N-CBL from PBTD to 5000' and submit to OCD.
 5. Adjust lower set of proposed perfs as required w/GR-N-CBL log. Perforate adjusted LOWER perfs only. Set CIBP within 200' of injection interval and spot 35 sxs of cement on top.
 6. RD wireline truck. PU 5-1/2" treating packer and TIH. Set packer at +/- 5550'. Load annulus with fresh water and pressure up to 500 psi.
 7. Acidize perfs 5658'-6040' w/4000 gals. 15% HCL-NE-FE acid + 200 ballsealers at 3-4 BPM.
 8. Release packer and TIH to 6050'. Pull up and reset packer at +/-5550'. Establish injection rate with PW. Release treating packer and TOOH. If acceptable rates and pressures and achieved with injection test proceed to step 18.
 9. TIH w/RBP and set at +/- 5500'. Test RBP to 1000 psi for 15 minutes. Spot 2 sx. sand on top of RBP.
 10. RU wireline truck and perforate 4 squeeze holes at +/- 5100'. NU on 5-1/2" casing and establish injection rate into squeeze holes.
 11. TIH w/5-1/2" cement retainer. Set at +/- 5025'. RU cementers and circulate/squeeze 200 sx. Class C cement through holes in 5-1/2" casing at 5100'.
 12. Sting out of cement retainer. TOOH. WOC at least 48 hours.
 13. PU 4-3/4" bit, 6 3-1/2" DCs and TIH. Drill cement retainer and cement. TOOH.
 14. RU wireline truck. Run GR-CBL to establish new TOC. Adjust proposed UPPER perfs as necessary and perforate same.
 15. RD wireline truck. PU 5-1/2" treating packer and TIH. Set packer @ +/- 5000'. Load annulus with fresh water and pressure up to 500 psi.
 16. Acidize perfs 5110'-5376' w/4000 gals. 15% HCL-NE-FE acid + 200 ballsealers at 3-4 BPM. Release treating packer. TOOH.
 17. PU RBP retrieving head and TIH. Circulate ballsealers and sand off of RBP. Latch RBP. TOOH.
 18. PU nickel or plastic coated injection pkr. and 2-7/8" plastic coated tbg. TIH to 5075'. Circulate hole down annulus w/100 bbls. 2% KCL based pkr fluid.
 19. Set packer. ND BOP. NU wellhead. Load and test annulus to 1000 psi for 30 minutes.
 20. Place well on injection.

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☐ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE Debbie McKelvey TITLE AGENT DATE 10/27/07

Type or print name Debbie McKelvey E-mail address: _____ Telephone No. 505-392-3575

For State Use Only

APPROVED BY: [Signature] TITLE PETROLEUM ENGINEER DATE OCT 28 2009

Donna/Paul,

At the request of Will Jones, we have revised the Sundry for the Goodwin State #1 to include a statement in #5 "Set CIBP within 200' of injection interval and spot 35 sxs of cement on top".

Your prompt review of this revised Sundry would be appreciated. If you have questions, please don't hesitate to call me at 392-3575.

Thanks for your help.
Debbie McKelvey, Agent
For Cheyenne Water Disposal Systems, LLC

RECEIVED

OCT 27 2009

HOBBSOCD

<u>POOL</u>	<u>LOCATION</u>	<u>CHLORIDES</u>
Dean Permo Pennsylvanian	↘ 5-16-37	44,730
Dean Devonian	↘ 35-15-36	19,525
Denton Wolfcamp	↘ 2-15-37	37,275
Denton Devonian	↘ 26-14-37	37,062
South Denton Wolfcamp	↘ 26-15-37	54,315
South Denton Devonian	↘ 36-15-37	34,080
Medicine Rock Devonian	↘ 15-15-38	39,760
Little Lucky Lake Devonian	↘ 29-15-30	23,288
Wantz Abo	↘ 26-21-37	132,770
Crosby Devonian	↘ 18-25-37	58,220
Scarborough Yates Seven Rivers	↘ 7-26-37	3,443 (Reef)
Teague Simpson	↘ 34-23-37	114,665
Teague Ellenburger	↘ 34-23-37	120,345
Rhodes Yates Seven Rivers	↘ 27-26-37	144,485
House San Andres	↘ 11-20-38	93,365
House Drinkard	↘ 12-20-38	49,700
South Leonard Queen	↘ 24-26-37	115,375
Elliott Abo	↘ 8-21-38	55,380
Scharb Bone Springs	↘ 5-19-35	30,601
EK Queen	↘ 13-18-34	41,890
East EK Queen	↘ 22-18-34	179,630
Maljamar Grayburg San Andres	↘ 22-17-32	46,079
Maljamar Paddock	↘ 27-17-32	115,375
Maljamar Devonian	↘ 22-17-32	25,418
Salt Lake Yates	↘ 7-20-33	6,781 (Reef)
Teas Yates Seven Rivers	↘ 11-20-33	22,152 (Reef?)

**CAPITAN CHEMICAL
WATER ANALYSIS REPORT**

Lease Name : Well Number : Location :	North Well Date Sampled : 06/03/08 Capitan Rep. : Company Rep. : Lea County, N.M.
---	---

ANALYSIS

1. pH	7.9	
2. Specific Gravity @ 60/60 F.	1.048	
3. CaCO ₃ Saturation Index @ 80 F.	+1.510	'Calcium Carbonate Scale Possible'
@ 140 F.	+2.440	'Calcium Carbonate Scale Possible'

Dissolved Gasses

4. Hydrogen Sulfide	300	PPM
5. Carbon Dioxide	10	PPM
6. Dissolved Oxygen	Not Determined	

Cations

	mg/L		Eq. Wt.		MEQ/L
7. Calcium (Ca++)	2,600	/	20.1	=	129.35
8. Magnesium (Mg++)	911	/	12.2	=	74.69
9. Sodium (Na+) Calculated	19,873	/	23.0	=	864.06
10. Barium (Ba++)	Not Determined	/	68.7	=	0.00

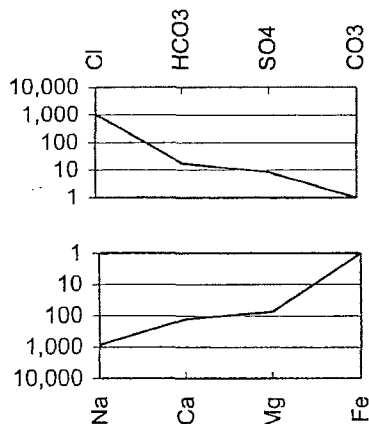
Anions

11. Hydroxyl (OH-)	0		17.0		0.00
12. Carbonate (CO ₃ =)	0		30.0		0.00
13. Bicarbonate (HCO ₃ -)	1,078		61.1		17.65
14. Sulfate (SO ₄ =)	400		48.8		8.20
15. Chloride (Cl-)	37,000		35.5		1,042.25

Other

16. Soluble Iron (Fe)	8		18.2		0.44
17. Total Dissolved Solids	61,863				
18. Total Hardness As CaCO ₃	10,250				
Calcium Sulfate Solubility @ 90 F.	3,241				
20. Resistivity (Measured)	0.140	Ohm/Meters	@ 76	Degrees (F)	

Logarithmic Water Pattern



PROBABLE MINERAL COMPOSITION

COMPOUND	Eq. Wt.	X	MEQ/L	=	mg/L
Ca(HCO ₃) ₂	81.04	X	17.65	=	1,430
CaSO ₄	68.07	X	8.20	=	558
CaCl ₂	55.50	X	103.51	=	5,745
Mg(HCO ₃) ₂	73.17	X	0.00	=	0
MgSO ₄	60.19	X	0.00	=	0
MgCl ₂	47.62	X	74.69	=	3,557
NaHCO ₃	84.00	X	0.00	=	0
NaSO ₄	71.03	X	0.00	=	0
NaCl	58.46	X	864.06	=	50,513

**CAPITAN CHEMICAL
WATER ANALYSIS REPORT**

Lease Name : Well Number : Location :	South Well Lea County, N.M. Date Sampled : 06/03/08 Capitan Rep. : Company Rep. :
---	---

ANALYSIS

1. pH	8	
2. Specific Gravity @ 60/60 F.	1.038	
3. CaCO ₃ Saturation Index @ 80 F.	+1.370	'Calcium Carbonate Scale Possible'
@ 140 F.	+2.300	'Calcium Carbonate Scale Possible'

Dissolved Gasses

4. Hydrogen Sulfide	240	PPM
5. Carbon Dioxide	90	PPM
6. Dissolved Oxygen	Not Determined	

Cations

	mg/L	/	Eq. Wt.	=	MEQ/L
7. Calcium (Ca++)	1,900	/	20.1	=	94.53
8. Magnesium (Mg++)	1,033	/	12.2	=	84.65
9. Sodium (Na+) Calculated	24,542	/	23.0	=	1,067.04
10. Barium (Ba++)	Not Determined	/	68.7	=	0.00

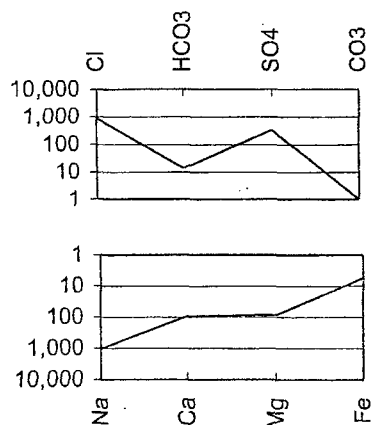
Anions

11. Hydroxyl (OH-)	0	/	17.0	=	0.00
12. Carbonate (CO ₃ =)	0	/	30.0	=	0.00
13. Bicarbonate (HCO ₃ -)	830	/	61.1	=	13.58
14. Sulfate (SO ₄ =)	16,164	/	48.8	=	331.23
15. Chloride (Cl-)	32,000	/	35.5	=	901.41

Other

16. Soluble Iron (Fe)	100	/	18.2	=	5.49
17. Total Dissolved Solids	76,468				
18. Total Hardness As CaCO ₃	9,000				
Calcium Sulfate Solubility @ 90 F.	2,364				'Calcium Sulfate Scale Possible'
20. Resistivity (Measured)	0.200		Ohm/Meters	@ 77	Degrees (F)

Logarithmic Water Pattern



PROBABLE MINERAL COMPOSITION

COMPOUND	Eq. Wt.	X	MEQ/L	=	mg/L
Ca(HCO ₃) ₂	81.04	X	13.58	=	1,100
CaSO ₄	68.07	X	80.95	=	5,510
CaCl ₂	55.50	X	0.00	=	0
Mg(HCO ₃) ₂	73.17	X	0.00	=	0
MgSO ₄	60.19	X	84.65	=	5,095
MgCl ₂	47.62	X	0.00	=	0
NaHCO ₃	84.00	X	0.00	=	0
NaSO ₄	71.03	X	165.63	=	11,765
NaCl	58.46	X	901.41	=	52,696



New Mexico Office of the State Engineer

Water Column/Average Depth to Water

(quarters are 1=NW 2=NE 3=SW 4=SE)

(quarters are smallest to largest)

(NAD83 UTM in meters)

(In feet)

POD Number	Sub basin	Use	County	Q 64	Q 16	Q 4	Sec	Tws	Rng	X	Y	Distance	Depth Well	Depth Water	Water Column
L 03792	PRO	LE		4	2	01	19S	36E		659238	3618348*	587	106	47	59
L 03792 APPRO	PRO	LE		4	2	01	19S	36E		659238	3618348*	587	106	47	59
L 03079	PRO	LE		1	4	36	18S	36E		658813	3619550*	998	122	65	57
L 03079 APPRO	PRO	LE		1	4	36	18S	36E		658813	3619550*	998	122	65	57
L 11573	DOM	LE		2	2	3	31	18S	37E	660123	3619669*	1004	150		
L 03153	PRO	LE					31	18S	37E	660229	3619765*	1144	140	70	70
L 03153 APPRO	PRO	LE					31	18S	37E	660229	3619765*	1144	140	70	70
L 04324	PRO	LE		1	4	01	19S	36E		658843	3617938*	1148	110	40	70
L 04324 APPRO	PRO	LE		1	4	01	19S	36E		658843	3617938*	1148	110	40	70
L 03166	PRO	LE		4	1	31	18S	37E		660016	3619973*	1216	108	35	73
L 03166 APPRO	PRO	LE		4	1	31	18S	37E		660016	3619973*	1216	108	35	73
L 07843	SAN	LE		3	3	2	36	18S	36E	658705	3619852*	1293	181	55	126
L 02601	PRO	LE		3	3	06	19S	37E		659655	3617548*	1314	115		
L 02695	PRO	LE		3	4	3	06	19S	37E	659946	3617446*	1470	100	50	50
L 02695 APPRO	PRO	LE		3	4	3	06	19S	37E	659946	3617446*	1470	100	50	50
L 05189	PRO	LE		1	1	31	18S	37E		659606	3620371*	1515	120	65	55

Average Depth to Water: **52 feet**

Minimum Depth: **35 feet**

Maximum Depth: **70 feet**

Record Count: 16

Basin/County Search:

Basin: Lea County

County: Lea

UTMNAD83 Radius Search (in meters):

Easting (X): 659532

Northing (Y): 3618857

Radius: 1700

*UTM location was derived from PLSS - see Help

The data is furnished by the NMOSE/ISC and is accepted by the recipient with the expressed understanding that the OSE/ISC make no warranties, expressed or implied, concerning the accuracy, completeness, reliability, usability, or suitability for any particular purpose of the data.

Offset Leasehold Ownership
Offsetting Cheyenne Water Disposal Systems
Goodwin State #1 Well located
330' FNL & 330' FWL of Section 6,
Township 19 South, Range 37 East, NMPM
Lea County, New Mexico

Note: This report includes an examination of those instruments as indexed in the tract books of Elliott & Waldron Title and Abstract Company and Caprock Title Midland LLC up to December 22, 2009 at 7:00 a.m. pertaining to records filed in Lea County, New Mexico.

Working Interest Owner
and Address

Township 18 South, Range 36 East, NMPM
Section 36: SE/4
Lea County, New Mexico

XTO Energy, Inc.
810 Houston Street, Suite 2000
Fort Worth, Texas 76102

Township 18 South, Range 37 East, NMPM
Section 31: Lots 3, 4 (W/2SW/4), E/2SW/4 and SW/4SE/4
Lea County, New Mexico

Marathon Oil Company
P.O. Box 3487
Houston, Texas 77253

Damian G. Barrett, dba
Baqash Resources
4816 Rangewood
Midland, Texas 79707

XTO Energy, Inc.
810 Houston Street, Suite 2000
Fort Worth, Texas 76102

Chesapeake Permian L.P.
(successor by merger to Concho
Resources, Inc.-4-2004)
6100 North Western Avenue
Oklahoma City, Oklahoma 73118

Clayton Williams Energy, Inc.
(successor to Southwest Royalties, Inc.)
6 Desta Drive, Suite 3000
Midland, Texas 79705

ConocoPhillips Company
P.O. Box 2197, WI. 3-5050
Houston, Texas 77252
Or
P.O. Box 7500
Bartlesville, Oklahoma 74005

Township 19 South, Range 36 East, NMPM
Section 1: Lots 1, 2, S/2NE/4 (NE/4) and NE/4SE/4
Lea County, New Mexico

Lecede Operating Company, LLC
Colt Development, L.L.C.
Both C/O 2100 Plaza Tower One
6400 South Fiddlers Green Circle
Englewood, Colorado 80111

Peak 9 Production Company
Sahara Operating Company
Both C/O P.O. Box 4130
Midland, Texas 79704

RAMB Ventures, LLC
7999 South Jasmine Circle
Englewood, Colorado 80112

BP America Production Company
P.O. Box 3092
Houston, Texas 77253
or
501 Westlake Park Blvd.
Houston, Texas 77253

Occidental Permian, Ltd.
580 Westlake Park Blvd.
Houston, Texas 77210

OGA 1992-1
P.O. Box 162807
Austin, Texas 78716

Penroc Oil Corporation
P.O. Box 2769
Hobbs, New Mexico 88241

Mack Energy Corporation
P.O. Box 960
Artesia, New Mexico 88211

ChevronTexaco Exploration &
Production Co. (successor in
interest to Chevron U.S.A., Inc.)
P.O. Box 36366
Houston, Texas 77232

Township 19 South, Range 37 East, NMPM
Section 6: NW/4, N/2SW/4 and NW/4NE/4
Lea County, New Mexico

Xeric Oil & Gas Corporation
XOG Operating, LLC
1801 W. Texas Avenue
Midland, Texas 79701

Geronimo Holdings Corp.
P.O. Box 804
Midland, Texas 79702

Rio Grande Energy, Inc.
P.O. Box 7408
Midland, Texas 79708

Pogar Petroleum, Ltd.
P.O. Box 10095
Midland, Texas 79702

R.C. Barnett
2410 Auburn Place
Midland, Texas 79702

Rock Products, Inc.
1012 Stuart Road NW
Albuquerque, New Mexico 87114

Jerry Weant, dba Bevoil
P.O. Box 7201
Midland, Texas 79708

Barron Oil and Gas
Richard Barron
Kevin D. Barron
3226 Foster
San Angelo, Texas 76903

Doralex Energy, Inc.
3619 Jackson Street
San Angelo, Texas 76903

Lewis Oil & Gas, Inc.
P.O. Box 50982
Midland, Texas 79710

Shannon Goble
P.O. Box 51023
Midland, Texas 79702

Gary A. Flinn, MD
Staff House-Wards Island
New York, York 10035

Don & Sonia Flinn
18455 Bernardo Trails Court
San Diego, California 92128

Rob Flinn
P.O. Box 88855
Steilacoom, Washington 98388

Stephen Lemansky
58 Cohassett Court
Holmdel, New Jersey 07733

Dennis Avitabile
24-18 80th Street
Jackson Heights
New York, York 11370

Wesley K. Noe
3323 Maxwell
Midland, Texas 79707

Harry Teague
7722 West Alabama
Hobbs, New Mexico 88241

Tommy Phipps and Werta Jean Phipps,
Trustees of the Phipps Living Trust
UTA dated 10-13-2009
3013 Sycamore Court
Moore, Oklahoma 73160

Lanexco, Inc.
P.O. Box 2730
Midland, Texas 79702

Leaco New Mexico Exploration & Production LLC
2000 Post Oak Boulevard, Suite 100
Houston, Texas 77056

Robert H. Hannifin and Maxine
Hannifin, Trustees of the Robert
H. Hannifin and Maxine Hannifin
Trust UTA dated 3-1-2005
P.O. Box 218
Midland, Texas 79702

Lewis B. Burleson
New Mexico Co., Inc.
P.O. Box 2479
Midland, Texas 79702

The P.J. Hannifin Family Trust
UTA dated 7-18-1991
765 Santa Camelia Drive
Solano Beach, California 92075

Mac Vaughn
3600 Coors Road, NW
42 Calle Loma Parda NW
Albuquerque, New Mexico 87105

Steve Strain
P.O. Box 2106
Roswell, New Mexico 88201

C.M Martin, Jr.
P.O. Box 1675
Roswell, New Mexico 88201

OXY USA, Inc.
5 Greenway Plaza, Suite 2400
Houston, Texas 77046

ConocoPhillips Company
P.O. Box 2197, WL 3-5050
Houston, Texas 77252

General Operating Company
P.O. Box 877
Wichita Falls, Texas 76307

Carbon Energy, Inc.
P.O. Box 1737
Hobbs, New Mexico 88241

Donald L. Bratton
P.O. Box 603
Hobbs, New Mexico 88241

John Bryant
911 Silver
Hobbs, New Mexico 88240

Joseph Meredyth, III
P.O. Box 1584
Hobbs, New Mexico 88241

Forest Oil Corporation
707 17th Street, Suite 3600
Denver, Colorado 80202

Chase Oil Corporation
P.O. Box 1767
Artesia, New Mexico 88211

George H. Nelson, Trustee
3804 64th
Lubbock, Texas 79413

Henry G. Lawson, etux Lela
4502 13th Street
Lubbock, Texas 79416

Homer H. Lawson
Jack H. Lawson
Ruth A. Lawson
All C/O 2404 Topeka Avenue
Lubbock, Texas 79416

A.C. Lawson
Route 7, Box 220
Lubbock, Texas 79401

Shell Western E&P
200 North Dairy Ashford
Houston, Texas 77001

Clifford E. Morton
Stanley S. Studer
900 NE Loop 410, #D-206
San Antonio, Texas

Robert E. Olson
9014 Callaghan Road
San Antonio, Texas 78230

Harry S. Olson, etux Paula
2707 Marlborough
San Antonio, Texas

Robert Bowers
L.H.R. Enterprises
6423 I.H. 10
San Antonio, Texas

Wade E. Spilman
4101 North Hill Drive
Austin, Texas 78731

Marion Bowers Trust
Route 4, Box 353
Seminole, Texas 76360

David C. Bowers
Route 4, Box 352
Seminole, Texas 76360

Carol W. Burnett
2030 American Bank Tower
Austin, Texas 78701

Roland R. Nabors
8922 Wexford Drive
San Antonio, Texas 78217

Bill W. Nelson
239 Aspen
Hereford, Texas 79045

Kenneth K. Batson, et ux Charlotte
518 Alto
Hobbs, New Mexico 88240

Jane R. Bowers
#15 Parman Place
San Antonio, Texas

Don B. Scott
P.O. Box 1178
Hobbs, New Mexico 88241

A.O. Stephens, Jr.
1246 W. Copper
Hobbs, New Mexico 88240

A. Earl Jones
421 West Main
Brownfield, Texas 79316

J.C. Heinrich, et ux Jean
Route 1, Box 62
Idalou, Texas 79329

Darrell W. Marker
P.O. Box 400
Hobbs, New Mexico 88241

Silverridge Corporation
302 Pointer Trail West
Van Buren, Arkansas 72956

M.Y. Merchant Trading Company
P.O. Box 5970
Hobbs, New Mexico 88241

Kaylee Partners
Curtis L. Neeley Management Trust
200 West Illinois, Suite 200
Midland, Texas 79701

FAX TRANSMITTAL

February 25, 2010

TO: Attention Engineering Bureau
Oil Conservation Division
Santa Fe, NM

FAX 505-476-3462

Number of Pages Included in FAX 26

FROM: Debbie McKelvey, Agent for
Cheyenne Water Disposal Systems LLC
575-392-3575

The attached Affidavit of Publication and Proof of Notices should be attached to and made a part of Form C-108, Application for Authorization to Inject into the Goodwin State #1 well, previously mailed to you.

If you have any questions, please do not hesitate to call.

Affidavit of Publication

State of New Mexico,
County of Lea.

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

of 3 issue(s).
Beginning with the issue dated
February 02, 2010
and ending with the issue dated
February 16, 2010

Kenneth Norris
GENERAL MANAGER
Sworn and subscribed to before me
this 22nd day of
February, 2010

Linda M. Jones
Notary Public

My commission expires
June 16, 2013
(Seal)



This newspaper is duly qualified to
publish legal notices or
advertisements within the meaning of
Section 3, Chapter 167, Laws of
1937 and payment of fees for said
publication has been made.

LEGAL

Legal Notice
February 2, 9, 16, 2010

Cheyenne Water Disposal
Systems LLC, P.O. Box 132
Hobbs, NM 88241. Contact
Bill Hanks, proposes to
amend New Mexico Oil
Conservation Division Order
SWD-827-A, which author-
izes the conversion of the
Goodwin State No. 1 well
from a producer into a com-
mercial salt-water disposal
well. The well is located 330'
FNL & 330' FWL of Section
6, T-18S, R37E, Lea
County, New Mexico. The
amendment proposes to
add additional perforations
in the San Andres formation
in the interval of 4850-4900'
and amend the maximum in-
jection pressure to 670 psi.
The additional San Andres
zone perforations will be
commingled with the previ-
ously approved injection in-
terval of 5110-5040'. Inter-
ested parties must file ob-
jections or a request for a
hearing with the NMOCD,
1220 South St. Francis Dr.,
Santa Fe, New Mexico
87505, within 15 days of this
notice.

#25631

b0107698 00046076
DEBBIE MCKELVEY
32 REGENCY SQUARE
HOBBS, NM 88242

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:
**OCCIDENTAL PERMIAN LTD
580 WESTLAKE PARK BLVD
HOUSTON TX 77210**

2. Article Number
(Transfer from service label) **7009 2250 0000 1775 8373**

PS Form 3811, February 2004 Domestic Return Receipt 102585

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐
B. Received by (Printed Name) **[Signature]** ☐
C. Date of Delivery **2-1** ☐
D. Is delivery address different from item 1? ☐
If YES, enter delivery address below: ☐

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

4. Restricted Delivery? (Extra Fee) ☐

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:
**BP AMERICA PROD CO
P O BOX 3092
HOUSTON TX 77253**

2. Article Number
(Transfer from service label) **7009 2250 0000 1775 8434**

PS Form 3811, February 2004 Domestic Return Receipt 102585

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐
B. Received by (Printed Name) **[Signature]** ☐
C. Date of Delivery **2-1** ☐
D. Is delivery address different from item 1? ☐
If YES, enter delivery address below: ☐

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

4. Restricted Delivery? (Extra Fee) ☐

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:
**BP AMERICA PROD CO
501 WESTLAKE PARK BLVD
HOUSTON TX 77253**

2. Article Number
(Transfer from service label) **7009 2250 0000 1776 0093**

PS Form 3811, February 2004 Domestic Return Receipt 102585

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐
B. Received by (Printed Name) **[Signature]** ☐
C. Date of Delivery **2-1** ☐
D. Is delivery address different from item 1? ☐
If YES, enter delivery address below: ☐

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

4. Restricted Delivery? (Extra Fee) ☐

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:
**CONOCO PHILLIPS CO
P O BOX 2197
WL 3-3050
HOUSTON TX 77252**

2. Article Number
(Transfer from service label) **7009 2250 0000 1776 0093**

PS Form 3811, February 2004 Domestic Return Receipt 102585

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐
B. Received by (Printed Name) **[Signature]** ☐
C. Date of Delivery **2-1** ☐
D. Is delivery address different from item 1? ☐
If YES, enter delivery address below: ☐

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

4. Restricted Delivery? (Extra Fee) ☐

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:
**CONOCO PHILLIPS CO
P O BOX 2197 WL 3-5050
HOUSTON TX 77252**

2. Article Number
(Transfer from service label) **7009 2250 0000 1776 0093**

PS Form 3811, February 2004 Domestic Return Receipt 102585

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐
B. Received by (Printed Name) **[Signature]** ☐
C. Date of Delivery **2-1** ☐
D. Is delivery address different from item 1? ☐
If YES, enter delivery address below: ☐

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

4. Restricted Delivery? (Extra Fee) ☐

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:
**CONOCO PHILLIPS CO
P O BOX 2197 WL 3-5050
HOUSTON TX 77252**

2. Article Number
(Transfer from service label) **7009 2250 0000 1776 0093**

PS Form 3811, February 2004 Domestic Return Receipt 102585

COMPLETE THIS SECTION ON DELIVERY

A. Signature **[Signature]** ☐
B. Received by (Printed Name) **[Signature]** ☐
C. Date of Delivery **2-1** ☐
D. Is delivery address different from item 1? ☐
If YES, enter delivery address below: ☐

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

4. Restricted Delivery? (Extra Fee) ☐

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:

MARATHON OIL CO
P O BOX 3487
HOUSTON TX 77253

2. Article Number:
(Transfer from service label)

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Jesse GEE*

☐ Age
☐ Add

B. Received by (Printed Name)

JESSE GEE

C. Date of D

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 Merchanc
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

7009 2250 0000 1775 8311

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Address ☐
 B. Received by (Printed Name) Charles M. Martin Jr
 C. Date of Delivery 7-6-11
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 PJ HANNIFIN FAMILY TR
 UTA DATED 7-18-91
 765 SANTA CAMELIA DR
 SOLANO BEACH CA 92075

2. Article Number (Transfer from service label) 7009 2250 0000 1776 0031

PS Form 3811, February 2004 Domestic Return Receipt 10258

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Address ☐
 B. Received by (Printed Name) B. H. Warr
 C. Date of Delivery 7-6-11
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 GENERAL OPERATING CO.
 P O BOX 877
 WICHITA FALLS TX 76307

2. Article Number (Transfer from service label) 7009 2250 0000 1776 0109

PS Form 3811, February 2004 Domestic Return Receipt 10258

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 CM MARTIN JR
 P O BOX 1675
 ROSWELL, NM 88201

2. Article Number (Transfer from service label) 7009 2250 0000 1776 0079

PS Form 3811, February 2004 Domestic Return Receipt 10258

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Address ☐
 B. Received by (Printed Name) Charles M. Martin Jr
 C. Date of Delivery 7-6-11
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 DONALD E BRATTON
 P O BOX 603
 HOBBS, NM 88241

2. Article Number (Transfer from service label) 7009 2250 0000 1776 0123

PS Form 3811, February 2004 Domestic Return Receipt 10258

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Address ☐
 B. Received by (Printed Name) Robby Snavedon
 C. Date of Delivery 7-6-11
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 GERONIMO HOLDINGS CORP
 P O BOX 804
 MIDLAND TX 79702

2. Article Number (Transfer from service label) 7009 2250 0000 1775 8502

PS Form 3811, February 2004 Domestic Return Receipt 10258

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Address ☐
 B. Received by (Printed Name) Christy Guadalupe
 C. Date of Delivery 7-6-11
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:

1. Article Addressed to:

2. Article Number (Transfer from service label)

3. Service Type

4. Restricted Delivery? (Extra Fee)

5. Article Addressed to:

6. Article Number (Transfer from service label)

7. Service Type

8. Restricted Delivery? (Extra Fee)

9. Article Addressed to:

10. Article Number (Transfer from service label)

11. Service Type

12. Restricted Delivery? (Extra Fee)

13. Article Addressed to:

14. Article Number (Transfer from service label)

15. Service Type

16. Restricted Delivery? (Extra Fee)

17. Article Addressed to:

18. Article Number (Transfer from service label)

19. Service Type

20. Restricted Delivery? (Extra Fee)

21. Article Addressed to:

22. Article Number (Transfer from service label)

23. Service Type

24. Restricted Delivery? (Extra Fee)

25. Article Addressed to:

26. Article Number (Transfer from service label)

27. Service Type

28. Restricted Delivery? (Extra Fee)

29. Article Addressed to:

30. Article Number (Transfer from service label)

31. Service Type

32. Restricted Delivery? (Extra Fee)

33. Article Addressed to:

34. Article Number (Transfer from service label)

35. Service Type

36. Restricted Delivery? (Extra Fee)

37. Article Addressed to:

38. Article Number (Transfer from service label)

39. Service Type

40. Restricted Delivery? (Extra Fee)

41. Article Addressed to:

42. Article Number (Transfer from service label)

43. Service Type

44. Restricted Delivery? (Extra Fee)

45. Article Addressed to:

46. Article Number (Transfer from service label)

47. Service Type

48. Restricted Delivery? (Extra Fee)

49. Article Addressed to:

50. Article Number (Transfer from service label)

51. Service Type

52. Restricted Delivery? (Extra Fee)

53. Article Addressed to:

54. Article Number (Transfer from service label)

55. Service Type

56. Restricted Delivery? (Extra Fee)

57. Article Addressed to:

58. Article Number (Transfer from service label)

59. Service Type

60. Restricted Delivery? (Extra Fee)

61. Article Addressed to:

62. Article Number (Transfer from service label)

63. Service Type

64. Restricted Delivery? (Extra Fee)

65. Article Addressed to:

66. Article Number (Transfer from service label)

67. Service Type

68. Restricted Delivery? (Extra Fee)

69. Article Addressed to:

70. Article Number (Transfer from service label)

71. Service Type

72. Restricted Delivery? (Extra Fee)

73. Article Addressed to:

74. Article Number (Transfer from service label)

75. Service Type

76. Restricted Delivery? (Extra Fee)

77. Article Addressed to:

78. Article Number (Transfer from service label)

79. Service Type

80. Restricted Delivery? (Extra Fee)

81. Article Addressed to:

82. Article Number (Transfer from service label)

83. Service Type

84. Restricted Delivery? (Extra Fee)

85. Article Addressed to:

86. Article Number (Transfer from service label)

87. Service Type

88. Restricted Delivery? (Extra Fee)

89. Article Addressed to:

90. Article Number (Transfer from service label)

91. Service Type

92. Restricted Delivery? (Extra Fee)

93. Article Addressed to:

94. Article Number (Transfer from service label)

95. Service Type

96. Restricted Delivery? (Extra Fee)

97. Article Addressed to:

98. Article Number (Transfer from service label)

99. Service Type

100. Restricted Delivery? (Extra Fee)

Commissioner of Public Lands
P.O. Box 1148
Santa Fe, NM 87504-1148

7009 2250 0000 1775 8496

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:

XERIC OIL & GAS CORP
XOG OPERATING LLC
1801 W TEXAS AVE
MIDLAND TX 79701

2. Article Number

(Transfer from service label)

7009 2250 0000 1775 8496

PS Form 3811, February 2004

Domestic Return Receipt

102595-

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:

ROBERT H HANNIFIN &
MAXINE HANNIFIN
TREE OF ROBER & MAXINE
HANNIFIN TRUST
P O BOX 218

Midland TX 79702

2. Article Number

(Transfer from service label)

7009 2250 0000 1775 871

PS Form 3811, February 2004

Domestic Return Receipt

102595-

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:

RAMB VENTURES LLC
7999 SOUTH JASMINE CIR
ENGLEWOOD CO 80112

2. Article Number

(Transfer from service label)

7009 2250 0000 1775 8410

PS Form 3811, February 2004

Domestic Return Receipt

10:

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Chris M. Guadalupe*

B. Received by (Printed Name)

Chris M. Guadalupe

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

If YES, enter delivery address below:

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Tammy Bernal*

B. Received by (Printed Name)

Tammy Bernal

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

If YES, enter delivery address below:

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Joseph A. Sutherland*

B. Received by (Printed Name)

Joseph A. Sutherland

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

If YES, enter delivery address below:

3. Service Type

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

4. Restricted Delivery? (Extra Fee)

☐ Yes

COMPLETE THIS SECTION ON DELIVERY

1. Article Addressed to:

1. Article Addressed to:

2. Article Number (Transfer from service label)

3. Service Type

4. Restricted Delivery? (Extra Fee)

5. Article Addressed to:

6. Article Number (Transfer from service label)

7. Service Type

8. Restricted Delivery? (Extra Fee)

9. Article Addressed to:

10. Article Number (Transfer from service label)

11. Service Type

12. Restricted Delivery? (Extra Fee)

13. Article Addressed to:

14. Article Number (Transfer from service label)

15. Service Type

16. Restricted Delivery? (Extra Fee)

17. Article Addressed to:

18. Article Number (Transfer from service label)

19. Service Type

20. Restricted Delivery? (Extra Fee)

21. Article Addressed to:

22. Article Number (Transfer from service label)

23. Service Type

24. Restricted Delivery? (Extra Fee)

25. Article Addressed to:

26. Article Number (Transfer from service label)

27. Service Type

28. Restricted Delivery? (Extra Fee)

29. Article Addressed to:

30. Article Number (Transfer from service label)

31. Service Type

32. Restricted Delivery? (Extra Fee)

33. Article Addressed to:

34. Article Number (Transfer from service label)

35. Service Type

36. Restricted Delivery? (Extra Fee)

37. Article Addressed to:

38. Article Number (Transfer from service label)

39. Service Type

40. Restricted Delivery? (Extra Fee)

41. Article Addressed to:

42. Article Number (Transfer from service label)

43. Service Type

44. Restricted Delivery? (Extra Fee)

45. Article Addressed to:

46. Article Number (Transfer from service label)

47. Service Type

48. Restricted Delivery? (Extra Fee)

49. Article Addressed to:

50. Article Number (Transfer from service label)

51. Service Type

52. Restricted Delivery? (Extra Fee)

53. Article Addressed to:

54. Article Number (Transfer from service label)

55. Service Type

56. Restricted Delivery? (Extra Fee)

57. Article Addressed to:

58. Article Number (Transfer from service label)

59. Service Type

60. Restricted Delivery? (Extra Fee)

61. Article Addressed to:

62. Article Number (Transfer from service label)

63. Service Type

64. Restricted Delivery? (Extra Fee)

65. Article Addressed to:

66. Article Number (Transfer from service label)

67. Service Type

68. Restricted Delivery? (Extra Fee)

69. Article Addressed to:

70. Article Number (Transfer from service label)

71. Service Type

72. Restricted Delivery? (Extra Fee)

73. Article Addressed to:

74. Article Number (Transfer from service label)

75. Service Type

76. Restricted Delivery? (Extra Fee)

77. Article Addressed to:

78. Article Number (Transfer from service label)

79. Service Type

80. Restricted Delivery? (Extra Fee)

81. Article Addressed to:

82. Article Number (Transfer from service label)

83. Service Type

84. Restricted Delivery? (Extra Fee)

85. Article Addressed to:

86. Article Number (Transfer from service label)

87. Service Type

88. Restricted Delivery? (Extra Fee)

89. Article Addressed to:

90. Article Number (Transfer from service label)

91. Service Type

92. Restricted Delivery? (Extra Fee)

93. Article Addressed to:

94. Article Number (Transfer from service label)

95. Service Type

96. Restricted Delivery? (Extra Fee)

97. Article Addressed to:

98. Article Number (Transfer from service label)

99. Service Type

100. Restricted Delivery? (Extra Fee)

LANEXCO INC
P O BOX 2730
MIDLAND TX 79702

7009 2250 0000 1775 8487

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:

RAMB VENTURES LLC
7999 SOUTH JASMINE CIR
ENGLEWOOD CO 80112

2. Article Number

(Transfer from service label)

7009 2250 0000 1775 8410

PS Form 3811, February 2004

Domestic Return Receipt

10:

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:

LANEXCO INC
P O BOX 2730
MIDLAND TX 79702

SENDER: COMPLETE THIS SECTION

COMPLETE THIS SECTION ON DELIVERY

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

COLT DEVELOPMENT
% 2100 PLAZA TOWER ONE
6400 SOUTH FIDDLERS GREEN
CIRCLE
ENGLEWOOD, CO 80111

1. Article Addressed to:

2. Article Number
(Transfer from service label)

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

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

Article Addressed to:

XTO Energy Inc.
810 HOUSTON ST, SUITE 2000
FT WORTH, TX 76102

Article Number
(Transfer from service label)Article Number
(Transfer from service label)Article Number
(Transfer from service label)

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

BARRON OIL & GAS RICHARD
BARRON & KEVIN BARRON
3226 FOSTER
SAN ANGELO TX 76903

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102585-0

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

LEEDE OPERATING CO LLC
% 2100 PLAZA TOWER ONE
6400 SOUTH FIDDLERS GREEN
CIRCLE
ENGLEWOOD, CO 80111

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

1

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

PENROC OIL CORPORATION
P O BOX 2769
HOBBS NM 88241

2. Article Number
(Transfer from service label)

PS Form 3811, February 2004

Domestic Return Receipt

102585-0

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Age ☐ Add

X *[Signature]*

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

Aztec Alex *2/25/10*

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

If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Age ☐ Add

X *[Signature]*

B. Received by (Printed Name) ☐ Date of D

Heather Nalepka *2/25/10*

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

If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Age ☐ Add

X *[Signature]*

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

Cindy Brown *2/25/10*

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

If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
 B. Received by (Printed Name) Sarah Barrett C. Date of Delivery 2-2-10
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise
☐ Registered ☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 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.

2. Article Number: 7009 2250 0000 1775 8526

PS Form 3811, February 2004 Domestic Return Receipt 10253

POGOR PETROLEUM LTD
 P O BOX 10095
 MIDLAND TX 79702

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 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.

2. Article Number: 7009 2250 0000 1775 8328

PS Form 3811, February 2004 Domestic Return Receipt 10253

DAMIAN G BARRETT DBA
 BAQASH RESOURCES
 4816 RANGEWOOD
 MIDLAND TX 79707

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
 B. Received by (Printed Name) Sarah Barrett C. Date of Delivery 2-2-10
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise
☐ Registered ☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
 B. Received by (Printed Name) Joe Salkin C. Date of Delivery 2-2-10
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise
☐ Registered ☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 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.

2. Article Number: 7004 1350 0004 0255 8929

PS Form 3811, February 2004 Domestic Return Receipt 10253

Bureau of Land Management
 620 E. Green St.
 Carlsbad, NM 88220

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 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.

2. Article Number: 7009 2250 0000 1775 8342

PS Form 3811, February 2004 Domestic Return Receipt 10253

CHESAPEAKE PERMIAN LP
 6100 NORTH WESTERN AVE
 OKLAHOMA CITY OK 73118

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
 B. Received by (Printed Name) Joe Salkin C. Date of Delivery 2-2-10
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise
☐ Registered ☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 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.

2. Article Number: 7004 1350 0004 0255 8929

PS Form 3811, February 2004 Domestic Return Receipt 10253

KENNETH K BATSON ETUX
 CHARLOTTE
 518 ALTO
 HOBBS NM 88240

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
 B. Received by (Printed Name) Joe Salkin C. Date of Delivery 2-2-10
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Return Receipt for Merchandise
☐ Registered ☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
X Conocophillips

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

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 CONOCO PHILLIPS CO
 P.O. BOX 7500
 BARTLESVILLE, OK 74005

2. Article Number (Transfer from service label)
 7009 2250 0000 1778 8427

PS Form 3811, February 2004

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
X Becky Miller

B. Received by (Printed Name) ☐ Date of Delivery ☐
Becky Miller 2-2-10

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 DORALEX ENERGY INC
 3619 JACKSON STREET
 SAN ANGELO TX 76903

2. Article Number (Transfer from service label)
 7009 2250 0000 1775 8571

PS Form 3811, February 2004

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 JC HEINRICH ETUX JEAN
 RT 1 BOX 62
 IDALOU TX 79329

2. Article Number (Transfer from service label)
 7004 1350 0004 0255 8974

PS Form 3811, February 2004 Domestic Return Receipt 10259

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
X J C Heinrich

B. Received by (Printed Name) ☐ Date of Delivery ☐
J C Heinrich 2-2-10

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 GARY A FLINN MD
 STAFF HOUSE-WARDS ISLAND
 NEW YORK, NY 10035

2. Article Number (Transfer from service label)
 7009 2250 0000 1775 8601

PS Form 3811, February 2004 Domestic Return Receipt 10259

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
X Gary Flinn

B. Received by (Printed Name) ☐ Date of Delivery ☐
Gary Flinn 2/2/10

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 CHASE OIL CORP
 P O BOX 1767
 ARTESIA NM 88211

2. Article Number (Transfer from service label)
 7009 2250 0000 1776 0178

PS Form 3811, February 2004 Domestic Return Receipt 10259

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee ☐
X Kathy Donaghy

B. Received by (Printed Name) ☐ Date of Delivery ☐
KATHY DONAGHY

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

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

Signature X. Morillo

☐ Agent
☐ Addressee

B. Received by James Morillo C. Date of delivery 1-2

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



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

4. Restricted Delivery? (Extra Fee) ☐ Yes

000 1775 8489

102695-02-M-1541
Recent

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
☒ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ☒ Print your name and address on the reverse so that we can return the card to you. ☒ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☒ <i>Debbie Meredyth</i>	
1. Article Addressed to: JOSEPH MEREDYTH, III P O BOX 1584 HOBBS, NM 88241		B. Received by (Printed Name) <i>Debbie Meredyth</i>	
		C. Date FEB 4 1982	
		D. Is delivery address different from item 1? ☐ If YES, enter delivery address below:	
		3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for M ☐ Insured Mail ☐ C.O.D.	
		4. Restricted Delivery? (Extra Fee) ☐	

■ 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:
CHEVRONTEXACO EXPLOR
P O BOX 36366
HOUSTON, TX 77232

2. Article Number : **7009 2250**
 (Transfer from service lab.)

PS Form 3811, February 2004
 Domestic Mail

2. Article Number 7009 2250 0000 1776 0154
(Transfer from service to: _____)

PS Form 3811, February 2004 Domestic Return Receipt 1025

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☐ Aged ☐ Adult

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

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

If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2250 0000 1776 0024

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☐ * <i>Tommy Phipps</i> ☐ B. Received by (Printed Name) C. Date <i>Tommy Phipps</i> <i>2-9</i> D. Is delivery address different from item 1? ☐ If YES, enter delivery address below: ☐
1. Article Addressed to: TOMMY PHIPPS & WERTA JEAN PHIPPS TREE PHIPPS LIVING TR 3013 SYCAMORE COURT MOORE, OK 73160	3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for M ☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee)	

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:

LEWIS B BURLISON
NEW MEXICO CO INC
P O BOX 2479
MIDLAND TX 79702

2. Article Number
(Transfer from service label)

7009

2. Article Number: 7009 2250 0000 1775 8670
(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102

1997

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY						
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.	A. Signature ☐ <i>X [Signature]</i> ☐ <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%; padding: 5px;">B. Received by (Printed Name)</td> <td style="width: 30%; padding: 5px;">C. Date</td> </tr> <tr> <td style="padding: 5px;"><i>ALAN GILSON</i></td> <td style="padding: 5px;"><i>12-1</i></td> </tr> </table> D. Is delivery address different from item 1? ☐ If YES, enter delivery address below: ☐	B. Received by (Printed Name)	C. Date	<i>ALAN GILSON</i>	<i>12-1</i>		
B. Received by (Printed Name)	C. Date						
<i>ALAN GILSON</i>	<i>12-1</i>						
1. Article Addressed to: ROCK PRODUCTS INC 1012 STUART RD NW ALBUQUERQUE NM 87114	3. Service Type <table style="width: 100%;"> <tr> <td>☒ Certified Mail</td> <td>☐ Express Mail</td> </tr> <tr> <td>☐ Registered</td> <td>☐ Return Receipt for M</td> </tr> <tr> <td>☐ Insured Mail</td> <td>☐ C.O.D.</td> </tr> </table> 4. Restricted Delivery? (Extra Fee) ☐	☒ Certified Mail	☐ Express Mail	☐ Registered	☐ Return Receipt for M	☐ Insured Mail	☐ C.O.D.
☒ Certified Mail	☐ Express Mail						
☐ Registered	☐ Return Receipt for M						
☐ Insured Mail	☐ C.O.D.						

2. Article Number 7009 2250 0000 1775 8540
(Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 1025

SENDER: COMPLETE THIS SECTION		RECIPIENT: COMPLETE THIS SECTION	
1. Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.		2. Print your name and address on the reverse so that we can return the card to you.	
3. Attach this card to the back of the mailpiece, or on the front if space permits.		4. Addressed to:	
WESLEY K NOE 3323 MAXWELL MIDDLAND TX 79707		5. Is delivery address different from item 1? ☐	
6. If YES, enter delivery address below:		7. ☐	

COMPLETE IN THIS SECTION ON DELIVERY

☒ **Star Service**
☒ **Star Mail**

☐ **Star Agent**
☐ **Star Address**

Received by (Printed Name)
1402 Enright

Date of Delivery
2-24-71

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

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

009 2250 0000 1776 0086

Rate Return Receipt

154155-02 1-7-70

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.

Article Addressed to:

ROB FLINN
P O BOX 88855
STELLACOOM, WA 98388

Article Number
 (Transfer from service label)

PS Form 3811, February 2004

7009 2250 0000 1775 8625

Domestic Return Receipt

2. Article Number
 (Transfer from service label)
 7009 2250 0000 1775 8458

PS Form 3811, February 2004

Domestic Return Receipt

102594

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

4. Restricted Delivery? (Extra Fee)
☐

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

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

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.

Article Addressed to:

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

4. Restricted Delivery? (Extra Fee)
☐

2. Article Number
 (Transfer from service label)
 7009 2250 0000 1775 0261

PS Form 3811, February 2004

Domestic Return Receipt

102595-02

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

4. Restricted Delivery? (Extra Fee)
☐

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

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

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.

Article Addressed to:

JERRY WEANT DBA BEVOIL
P O BOX 7201
MIDLAND TX 79708

109 2250 0000 1775 8557

2. Article Number
 (Transfer from service label)
 7009 2250 0000 1775 8694

PS Form 3811, February 2004

Domestic Return Receipt

10259

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

4. Restricted Delivery? (Extra Fee)
☐

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

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

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

4. Restricted Delivery? (Extra Fee)
☐

LEACO NM EXPL & PROD
2000 POST OAK BLVD STE 100
HOUSTON, TX 77056

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

A. Signature
 B. Received by (Printed Name)
 C. Date of Delivery
 D. Is delivery address different from item 1? ☐ Yes ☒ No
 If YES, enter delivery address below:

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:

RC BARNETT ²⁵⁰⁴
 2440 AUBURN PLACE
 MIDLAND, TX 79702
 44705

COMPLETE THIS SECTION ON DELIVERY

A. Signature ☒ Agent ☐ Addressee
 B. Received by (Printed Name) C. Date of Delivery
 ROS BARNETT 1-30-2010
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ G.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number 7009 2250 0000 1775 6533
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102535-02-10-1540

Cheyenne Water Disposal Sys LLC

P.O. Box 132

Hobbs, NM 88241



U.S. POSTAGE
 PAID
 HOBBS, NM
 88240
 JAN 28, 10
 AMOUNT
\$6.66
 00613097-06

92128

1000

7009 2250 0000 1775 6533

DON & SONIA FLINN
 18455 BERNARDO TRAILS
 COURT
 SAN DIEGO CA 92128

2-8

NAME _____
 1st Notice _____
 2nd Notice _____
 Return _____

☐ Moved, Left No Address/Problems No Return
☐ Addressed - Not Home
☐ Undelivered
☐ No Such Street
☐ Incorrect
☐ No Such Number

REASON CHECKED

Cheyenne Water Disposal Sys LLC

P.O. Box 132

Hobbs, NM 88241

7004 2250 0000 1775 8595



U.S. POSTAGE
PAID
HOBBS, NM
88240
JAN 29, 10
AMOUNT

\$6.66
00013097-06



ATTEMPTED, NOT KNOWN

NAME

1st Notice

2nd Notice

Return



ATTEMPTED, NOT KNOWN



ATTEMPTED, NOT KNOWN

Cheyenne Water Disposal Sys LLC

P.O. Box 132

Hobbs, NM 88241

7004 1350 0004 0255 9001



U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01, 10
AMOUNT

\$3.58
00013097-01

- RETURNED TO SENDER
- REASON CHECKED
- ☐ Moved, Left No Address Liable to Return
- ☐ Attempted - Not Known
- ☐ Undelivered
- ☐ No Such Street
- ☐ No Such Number
- ☐ No Such Address

NAME

Notice

Notice

Return



1000



88241

MY MERCHANT TRADING CO
P O BOX 5970
HOBBS, NM 88241

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01 10
#00013097-01

\$5.88
00013097-01



79701

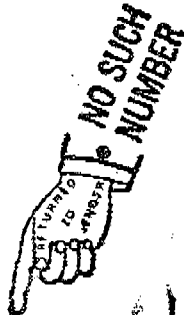


1000

7004 1350 0004 0255 9018

KAYLEE PARTNERS
CURTIS L NEELEY MGT TR
200 W ILLINOIS SUITE 200
MIDLAND, TX 79701

N32
123



Cheyenne Water Disposal Sys LLC
P.O. Box 132
Hobbs, NM 88241

2/5

NAME

1st Notice

2nd Notice

Return

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01 10
#00013097-01

\$5.88
00013097-01



88240



1000

7004 2250 0000 1776 0130

JOHN BRYANT
911 SILVER
HOBBS, NM 88240



Cheyenne Water Disposal Sys LLC
P.O. Box 132
Hobbs, NM 88241

2/5

NAME

1st Notice

2nd Notice

Return

Cheyenne Water Disposal Sys LLC
P.O. Box 132
Hobbs, NM 88241

7009 2250 0000 1776 0116

REASON CHECKED
☐ Marked, Left No Address/Unable To Forward
☐ Attempted - Not Known
☐ Unclaimed
☐ No Such Street
☐ Insufficient Address
☐ No Such Number

CARBON ENERGY
P O BOX 1737
HOBBS NM 88241

NTA

NAME 2/2
1st 001
2nd WJCS

NIXIE

071 SE 1 04 02/06/10
RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 88241013232 41855-03411-08-15

8824100132

Hobbs, NM 88241

Cheyenne Water Disposal Sys LLC
P.O. Box 132
Hobbs, NM 88241

2/6
1st Name
2nd Name
Return

7009 2250 0000 1776 0062

RETURNED TO SENDER
REASON CHECKED
☒ Marked, Left No Address/Unable To Forward
☐ Attempted - Not Known
☐ Unclaimed
☐ No Such Street
☐ Insufficient Address
☐ No Such Number
☐ No Such Office In State
Do not re-mail in this envelope

STEVE STRAIN
P O BOX 2106
ROSSELL, NM 88201



U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01, 10
AMOUNT
\$5.88
00013097-01

88241

1000

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01, 10
AMOUNT
\$5.88
00013097-01



88201

1000

Cheyenne Water Disposal Sys LLC

P.O. Box 132
Hobbs, NM 88241

7004 1350 0004 0255 8961

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01, 10
AMOUNT
\$5.88
00013097-01

1000 88241

DON B SCOTT
P O BOX 1178
HOBBS NM 88241

2/2

NIXIE

871 SE 1

84 02/06/10

RETURN TO SENDER
NO SUCH NUMBER
UNABLE TO FORWARD

BC: 88241013232 *1855-07989-06-18

8824100132

Hobbs NM 88241

Cheyenne Water Disposal Sys LLC

P.O. Box 132
Hobbs, NM 88241

7004 1350 0004 0255 8961

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01, 10
AMOUNT
\$5.88
00013097-01

1000

88241

2-8

REASON CHECKED

☐ Moved, Left No Address/Unable To Forward

☐ Attempted - Not Known

☐ Unclaimed

☐ No Such Street

☐ Insufficient Address

☐ Refused

☐ No Such Number

Not

DARRELL W MARKER
P O BOX 406
HOBBS NM 88241

NIXIE

871 SE 1

84 02/06/10

RETURN TO SENDER
ATTEMPTED - NOT KNOWN
UNABLE TO FORWARD

BC: 88241013232

HOBBS NM 88241

Cheyenne Water Disposal Sys LLC

P.O. Box 132

Hobbs, NM 88241

RECEIVED
1st DEPT
2nd DEPT
3rd DEPT

7004 1350 0004 0255 0756



U.S. POSTAGE
PAID
HOBBBS, NH
88240
FEB 01, 1980
AMOUNT

BILL W NELSON
239 ASPEN
HIE

TEXT





07/50/20 22

ZKONZ
REDOZ
O - O
ZRTD
WSTG

EC: 58241013222 *2182-03735-09-25

ଅନୁପମା

Cheyenne Water Disposal Sys LLC

P.O. Box 132

Hobbs, NM 88241

Police File

0289 5520



U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01, 10
AMOUNT

CLIFFORD E MORTON
STANLEY S STRUDER
900 NE LOOP 410 #D-206
SAN ANTONIO, TX

**Cheyenne Water Disposal Sys LL
P.O. Box 132
Hobbs, NM 88241**

7004 1350 0004 0255 8996

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01, 1980
AMOUNT



1000 72956

~~NOT~~ ATTEMPTED,
NOT KNOWN

SILVER CORP
302 POINTER TRAIL WEST
VAN BUREN ARKANSAS 72956

11/10/68
11/10/68
11/10/68

Cheyenne Water Disposal Sys LLC
P.O. Box 132
Hobbs, NM 88241

7004 1350 0004 0255 0875

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01 '10
AMOUNT
\$5.88
88013097-01



1009

MARION BOWERS TRUST
RT 4 BOX 353
SEMINOLE TX 76360

W.H.X.S.Z.

760 7C 1 72 02/07/10

NOT BE RETURNED TO THE
OFFICE OF THE
DIRECTOR OF THE
BUREAU OF
INVESTIGATION
OF THE
DEPARTMENT OF
JUSTICE
UNLESS
SPECIFICALLY
REQUESTED
BY THE
BUREAU OF
INVESTIGATION
OF THE
DEPARTMENT OF
JUSTICE

[illegible]

Cheyenne Water Disposal Sys
P.O. Box 132
Hobbs, NM 88241

2-11

NAME _____
1st Notice _____
2nd Notice _____
Return _____

REASON CHECKED

☒ Moved - Left No Address
☐ Invalid Address
☐ Moved, Not Forwardable
☐ Forwarding Order Expired
☐ Address Not Forwarded
☐ Incorrect
☐ Invalid
☐ No Such Street
☐ Unreachable

Circle 1353



1000



77001

U.S. POSTAGE
PAID
HOBBS, NM
88241
FEB 01 10
AMOUNT

\$5.88
00013057-01

SHELL WELLS & P
200 NORTH
HOUSTON TX 77001

Cheyenne Water Disposal Sys LLC
P.O. Box 132
Hobbs, NM 88241

2-11

NAME _____
1st Notice _____
2nd Notice _____
Return _____

7004 1350 0004 0255 8868

U.S. POSTAGE
PAID
HOBBS, NM
88241
FEB 01 10
AMOUNT

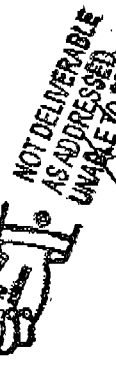
\$5.88
00013057-01



78731



1000



NOT DELIVERABLE
AS ADDRESSED
UNABLE TO FORWARD

WADE E SPILMAN
4101 NORTH HILL DR
AUSTIN TX 78731

UTP

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01 '10
AMOUNT
\$5.88
00013097-01



1900

87105

7004 2250 0000 1776 0048

Cheyenne Water Disposal Sys I
P.O. Box 132
Hobbs, NM 88241

2/12
NAME _____
1st Notice _____
2nd Notice _____
Return _____

NEW MEXICO
POSTAL SERVICE
NUMBER
87128

Cheyenne Water Disposal Sys LLC
P.O. Box 132
Hobbs, NM 88241

2/12
NAME _____
1st Notice _____
2nd Notice _____
Return _____

7004 1350 0004 0255 8882

DAVID C BOWERS
RT 4 BOX 352
SEMINOLE TX 76360

LTN

U.S. POSTAGE
PAID
HOBBS, NM
88240
FEB 01 '10
AMOUNT
\$5.88
00013097-04



1000

76360

760 SC 1 72 02/07/10
RETURN TO SENDER

NIXIE

Cheyenne Water Disposal Sys LLC

P.O. Box 132

Hobbs, NM 88241

NAME

1st Notice

2nd Notice

Return

UNCLAIMED

HARRY TEAGUE
7722 WEST ALABAMA
HOBBS, NM 88241

7009 2250 0000 1775 8663



1000



88242

U.S. POSTAGE
PAID
HOBBS, NM
88241
FEB 01 10
AMOUNT

\$5.88

00013097-01

unc

Cheyenne Water Disposal Sys LLC

P.O. Box 132

Hobbs, NM 88241

NAME

1st Notice

2nd Notice

Return

BOWE015 782302004 1N 02 02/06/10

JANE R BOWERS
#15 PARMAN PLACE
SAN ANTONIO, TX

7004 1350 0004 0255 8436



1000



78235

U.S. POSTAGE
PAID
HOBBS, NM
88241
FEB 01 10
AMOUNT

\$4.68

00013097-01

unc

Cheyenne Water Disposal Sys LLC

P.O. Box 132

Hobbs, NM 88241

NAME 2576

1st Notice

2nd Notice

Return

7009 2250 0000 1776 0208

U.S. POSTAGE
PAID
HOBBS, NM
88241
FEB 01 '10
AMOUNT



1000

79416

\$5.88

00013097-014

HOMER H LAWSON
JACK H LAWSON, RUTH
LAWSON

% 2404

LUBBO

NIXIE

760 SE 1

72 02/08/10

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

EC: 88241013232 *2182-06863-09-90

8824100132

882410013232

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits.		A. Signature ☐ <i>Dennis Avitabile</i> ☒	
1. Article Addressed to: DENNIS AVITABILE 24-18 80TH ST JACKSON HEIGHTS NEW YORK, NY 11370		B. Received by (Printed Name) ☐ C. Date ☐	
2. Article Number (Transfer from service) 7009 2250 0000 1775 8649		D. Is delivery address different from item 1? ☐ If YES, enter delivery address below: ☐	
3. Service Type ☒ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.		4. Restricted Delivery? (Extra Fee) ☐	
PS Form 3811, February 2004		Domestic Return Receipt 10259	

Wenne Water Disposal Sys LLC
Box 132
Hobbs, NM 88241

7009 2250 0000 1776 0123



1000

88241

U.
F
FE

DONALD E BRATTON
P O BOX 603
HOBBS, NM 88241

Not longer in
Box 603

2/2

eyenne Water Disposal Sys I
O. Box 132
obbs, NM 88241

7009 2250 0000 1776 0185



1000

79413

U.S. PC
PAID
HOBBBS
88241
FEB 01
AMOUN

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GEORGE H NELSON TRUSTEE
3804 64TH
LUBBOCK TX 79413

eyenne Water Disposal Sys LLC
O. Box 132
obbs, NM 88241

7009 2250 0000 1775 8588



1000

79710

U.S. PO
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HOBBBS
88241
JAN 28
AMOUN

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000130

LEWIS OIL & GAS INC
P O BOX 50982
MIDLAND TX 79705

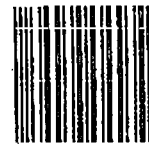
NAME _____
1st Notice _____
2nd Notice _____

UNCLAIMED

UNCLAIMED

enne Water Disposal Sys LLC
Box 132
is, NM 88241

7009 2250 0000 1776 0192



U.S. POST
PAID
HOBBS, NM
88240
FEB 01, 1
AMOUNT

\$5.8
0001309

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79416

2-18

2-4-10

NAME _____
1st Notice _____
2nd Notice _____
Return _____

UTF
16/14

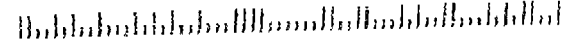
HENRY G LAWSON ETUX LELA
4502 13TH ST
LUBBOCK TX 79416

NIXIE 760 SE 1 72 02/16/10

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 88241013232 *2192-07690-16-2:

8824160132



A C LAWSON
RT 7 BOX 220
LUBBOCK TX 79401

NAME _____
1st Notice _____
2nd Notice _____
Return _____
2/22

U.S.
PS
HOBBS
FEB 0
RMD
\$1
000



1000

7009 2250 0000 1776 0215

eyenne Water Disposal Sys LLC
O. Box 132
Hobbs, NM 88241

9/30/09 → Transferred to Chylene

Injection Permit Checklist (11/30/09)

Case _____ R- _____ SWD 827-B WFX _____ PMX _____ IPI _____ Permit Date _____ UIC Qtr (J/F/M)

Wells 1 Well Name: Goodwin State #1

API Num: (30-) 025-34593 Spud Date: 5/15/99 New/Old: N (UIC primacy March 7, 1982)

Footages 330 FNL/330 FUL Unit (D) Sec 6 Tsp 19S Rge 3TE County Lea

Operator: Chylene Water Disposal Systems, LLC Contact: Dabbe McKay, Agent
Bill Hicks

OGRID: 269152 RULE 5.9 Compliance (Wells) 0/1 (Finan Assur) _____

Operator Address: P.O. Box 132, Hobbs, NM 88241

Location and Current Status: _____

Planned Work to Well:

Planned Tubing Size/Depth:

	Sizes Hole.....Pipe	Setting Depths	Cement Sx or Cf	Cement Top and Determination Method
Existing ☒ Surface	<u>12 1/4 8 5/8</u>	<u>1618</u>	<u>710</u>	<u>CIRC</u>
Existing ☐ Intermediate				
Existing ☐ Long String	<u>7 7/8 5 1/2</u>	<u>7236</u>	<u>400/535 SX</u>	<u>5350 CBL/2700 CBL</u>

DV Tool --- Liner --- Open Hole 7236-7510 Total Depth 7510

Well File Reviewed ☒

Diagrams: Before Conversion ☒ After Conversion ☒ Elogs in Imaging File: ☒ No Elog over interval
MUDLOG is there

Intervals:	Depths	Formation	Producing (Yes/No)
Above (Name and Top)	<u>4500</u>	<u>TOP SA</u>	
Above (Name and Top)	<u>6210</u>	<u>B Linn</u>	
Injection.....	<u>4350-4900</u>	<u>SA</u>	
Interval TOP:	<u>4350</u>	<u>SA</u>	
Injection.....	<u>6040</u>	<u>BS</u>	
Interval BOTTOM:	<u>6040</u>	<u>BS</u>	
Below (Name and Top)			

870 PSI Max. WHIP

Open Hole (Y/N) _____

Deviated Hole? _____

Sensitive Areas: Capitan Reef _____ Cliff House _____ Salt Depths 1532

..... Potash Area (R-111-P) _____ Potash Lessee _____ Noticed? _____

Fresh Water: Depths 320-180' Wells 6 wells Analysis? NO Affirmative Statement ☒

Disposal Fluid Sources: ABO/DR/BS/Del/SA/P.Q./YTB Analysis? _____

Disposal Interval Production Potential/Testing/Analysis Analysis: _____

Notice: Newspaper (Y/N) ☒ Surface Owner SLO Mineral Owner(s) _____

RULE 26.7(A) Affected Parties: many!

Area of Review: Adequate Map (Y/N) ☒ and Well List (Y/N) ☒

Active Wells 4 Num Repairs 0 Producing in Injection Interval in AOR NO

..P&A Wells 0 Num Repairs _____ All Wellbore Diagrams Included? _____

Questions to be Answered: _____

Required Work on This Well: Set CIBP @ 6230' Request Sent _____ Reply: _____

AOR Repairs Needed: _____ Request Sent _____ Reply: _____

Request Sent _____ Reply: _____