

OL CONSERVATION DIVISION
RECEIVED
Post Office Box 1668 / Albuquerque, New Mexico 87103 / (505) 843-6762

Reference _____

CERTIFIED RETURN RECEIPT REQUESTED

July 14, 1992

RELEASE 7-29-92

Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501

Reference: Water Disposal Application C-108

Duncan Federal #4Y
Section 18: Lot 2
Township 9 South, Range 28 East
Chaves County, New Mexico

Gentlemen:

Enclosed please find an original and one copy of our application to convert the captioned well to a water disposal well.

Copies of our application and all supporting pages were sent Certified Return Receipt Requested to all parties shown on the attachment to my transmittal letter. As soon as all proof of mailing cards have been received by this office, we will provide copies of same to you.

Yours truly,

Tom Kimball

Tom Kimball
Landman

Enclosures

xc with one complete copy to: OCD
P.O. Drawer DD
Artesia, New Mexico 88210

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage
Application qualifies for administrative approval? ☐ yes ☐ no
- II. Operator: CIBOLA ENERGY CORPORATION
Address: P. O. Box 1668 Albuquerque, NM 87103
Contact party: Harvey E. Yates, Jr. Phone: (505) 843-6762
- 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 ☒ 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 geological data on the injection zone including appropriate lithologic detail, geological 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 source 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 source 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: Harvey E. Yates, Jr. Title President
Signature: [Signature] Date: July 14, 1992
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal.

III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; location by Section, Township, and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;
- (3) the formation name and depth with expected maximum injection rates and pressures; and
- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

Post Office Box 1668 / Albuquerque, New Mexico 87103 / (505) 843-6762

Reference _____

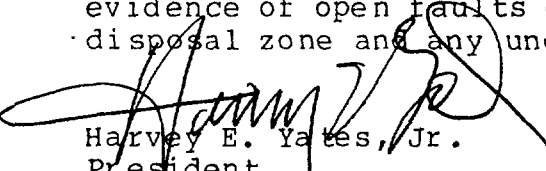
July 13, 1992

Oil Conservation Division
State of New Mexico

Reference: Water Disposal Application for the Duncan Federal #4Y

Gentlemen:

I 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 source of drinking water.


Harvey E. Yates, Jr.
President
Cibola Energy Corporation

OIL CONSERVATION DIVISION

Post Office Box 1668 / Albuquerque, New Mexico 87103 / (505) 843-6762

Reference _____

CERTIFIED RETURN RECEIPT REQUESTED:

July 13, 1992

To: Surface Owner
Parties with Leasehold Interest
(See Attached List)

Re: Application for Water Disposal Well

Duncan Federal #4Y
Section 18: Lot 2
Township 9 South, Range 28 East
Chaves County, New Mexico

Gentlemen:

Cibola Energy Corporation has submitted to the Oil Conservation Division of the State of New Mexico an application to convert the existing Duncan Federal #4Y at the captioned location to a salt water disposal well.

Pursuant to Paragraph XIV of the attached Form C-108, a copy of our application is enclosed.

Any party desiring to file an objection or a request for hearing should address same to:

Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501

If we can assist you in your evaluation of this proposal, please call Mr. Harvey E. Yates, Jr. at (505)-843-6762.

Yours truly,



Tom Kimball
Landman

Paragraph XIV: Parties Within Area of Review
Duncan Federal #4Y
Section 18: Lot 2
Township 9 South, Range 28 East
Chaves County, New Mexico

USA
Bureau of Land Management
P. O. Drawer 1857
Roswell, New Mexico 88201

Yates Petroleum Corporation
Yates Drilling Company
Abo Petroleum Corporation
Myco Industries, Inc.
105 South Fourth Street
Artesia, New Mexico 88210

Yates Energy Corporation
P. O. Box 2323
Roswell, New Mexico 88202

Read & Stevens
P. O. Box 1518
Roswell, New Mexico 88201

PetroYates, Inc.
P. O. Box 0
Albuquerque, NM 87103

Rio Petrol, Inc.
300 Harbor Building
100 2nd Avenue, South
Edmonds, WA 98020

Stevens Operating Co.
P. O. Box 2203
Roswell, New Mexico 88201

Milagro Minerals
P. O. Box 2067
Santa Fe, NM 87504

Louise D. Yates
P. O. Box 2607
Roswell, New Mexico 88202

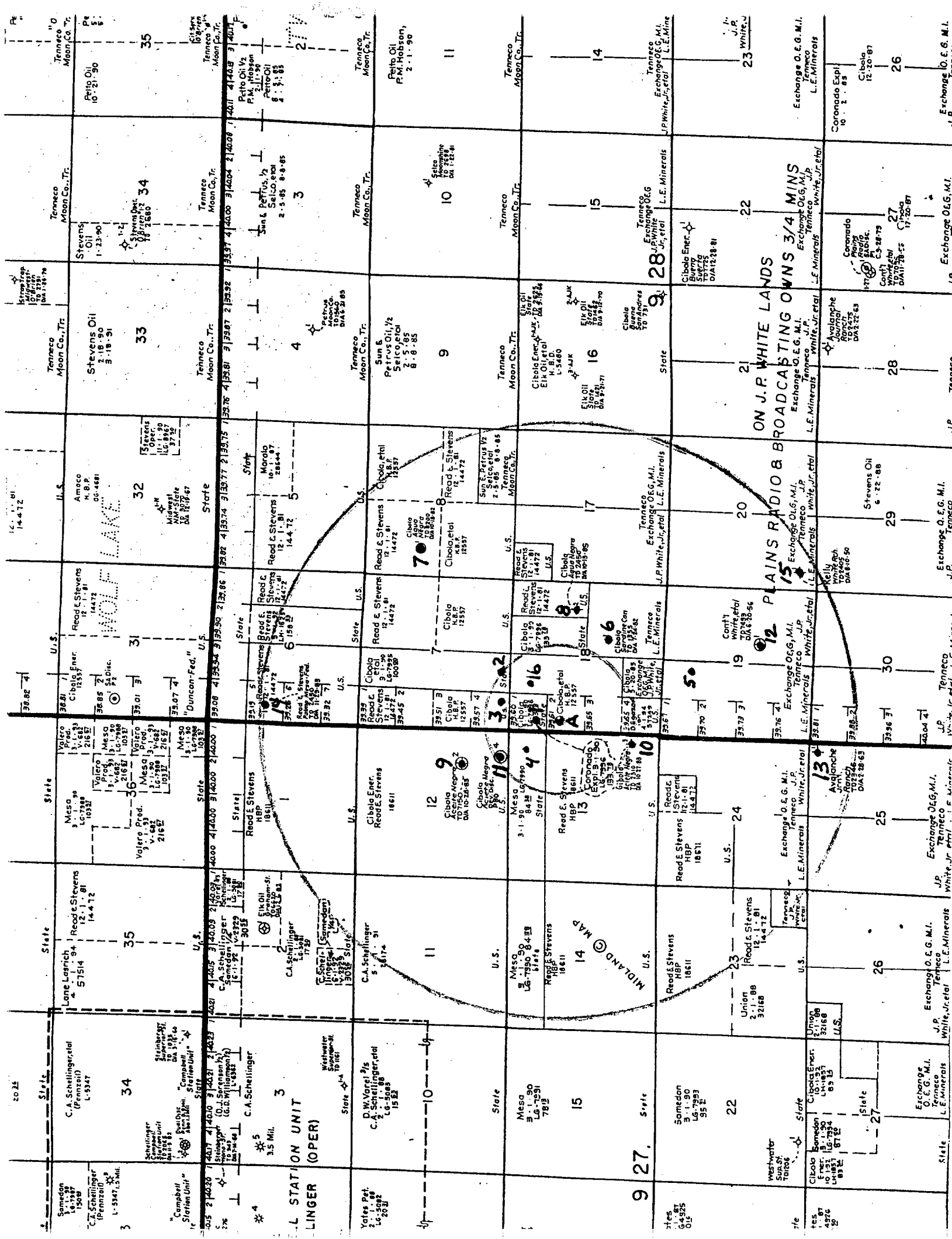
Victor Dominguez
1200 West McGaffey #3
Roswell, NM 88201

Harvey E. Yates, Jr.,
dba Tularosa Oil Company
P. O. Box 0
Albuquerque, NM 87103

Harvey E. Yates Irrevocable Trust
c/o Mr. Don Bell
P. O. Box 2067
Santa Fe, NM 87504

Richard Williams
1213 Jefferson, NE
Albuquerque, NM 87110

Westway Petro
Lock Box 70
500 N. Akard Street
Dallas, Texas 75201-3394



Oil Conservation Form C-108 for disposal wells:

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. (An ## identifies wells within one-half mile.)

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.

The following wells fall within the two miles of subject well "A"

A.	Duncan Federal #4Y	1650 FNL & 324 FWL	Sec. 18	9S-28E
## 1.	Emmons State #1	990 FNL & 330 FWL	Sec. 18	9S-28E
## 2.	Louise Yates	330 FSL & 1980 FWL	Sec. 7	9S-28E
## 3.	Duncan Fed. #2	330 FSL & 990 FWL	Sec. 7	9S-28E
## 4.	Wolf AHF State #1	660 FNL & 660 FEL	Sec. 13	9S-27E
	5. Sardine #1	990 FNL & 2298 FWL	Sec. 19	9S-28E
	6. Sardine Can	1980 FSL & 1980 FEL	Sec. 18	9S-28E
	7. Agua Negra #1	1980 FNL & 990 FWL	Sec. 8	9S-28E
	8. Agua Negra #2	2310 FNL & 990 FEL	Sec. 18	9S-28E
	9. Aceite Negra #2	1650 FSL & 1200 FEL	Sec. 12	9S-27E
*	10. Aceite Negra #3	990 FSL & 330 FEL	Sec. 13	9S-27E
## 11.	Aceite Negra #4	330 FSL & 940 FEL	Sec. 12	9S-27E
	12. Continental White 19#1	1980 FSL & 1980 FEL	Sec. 19	9S-28E
	13. Avalanche Journal	330 FNL & 330 FEL	Sec. 25	9S-27E
	14. Palma Mesa Fed.#1	1980 FNL & 660 FWL	Sec. 6	9S-28E
	15. Kelly White Ranch	660 FSL & 660 FWL	Sec. 20	9S-28E

and the following Proposed Well whose Application to Drill has already been submitted to the BLM:

## 16.	Duncan Federal #5	660 FNL & 1650 FWL	Sec. 18	9S-28E
--------	-------------------	--------------------	---------	--------

* The Aceite Negra #3 is 2720' (.515 mile) from the subject well and is not included in the Part VI review.

C108 Part VI: Proposed Disposal Well: Duncan Federal #4Y

Wells Within Area of Review

Well Name: Emmons State #1
Operator: Yates Exploration Co., Inc. (PetroYates, Inc.)
Location: Lot 1 - Section 18, T-9S, R-28E
Status: Producing
Dates: 2-28-90 Spud; 3-31-90 TD; 4-7-90 Completed
Total Depth: 2354
Completion Interval: 2221-2257; San Andres

Well Name: Louise Yates #1
Operator: Yates Exploration Co., Inc. (PetroYates, Inc.)
Location: SE/4 SW/4 - Section 7, T-9S, R-28E
Status: Waiting on OCD's authorization to deepen
Dates: 5-2-92 Spud;
Total Depth: Total anticipated depth 2840
Completion Interval: Anticipated: 2250-2270; perhaps San Angelo at 2650-2750

Well Name: Duncan Federal #2
Operator: Cibola Energy Corporation
Location: Lot 4 - Section 7, T-9S, R-28E
Status: Producing
Dates: 5-10-88 Spud; 6-8-88 TD; 8-15-88 Completed
Total Depth: 2317
Completion Interval: 2262-2265; 2235-2252; San Andres

Well Name: Wolf AHF State #1
Operator: Yates Petroleum Corporation
Location: NE/4 NE/4 - Section 13, T-9S, R-27E
Status: Producing
Dates: 2-28-90 Spud; 3-15-90 TD; 6-12-90 Completed
Total Depth: 6660; Plugged Back To 2585
Completion Interval: 2242-2252 San Andres

Well Name: Aceite Negra #4
Operator: Cibola Energy Corporation
Location: SE/4 SE/4 - Section 12, T-9S, R-27E
Status: Shut in
Dates: 3-7-85 Spud; 3-25-85 TD; 4-27-85 Completed
Total Depth: 6996
Completion Interval: 6491-6501 Devonian

Well Name: Duncan Federal #5 (Proposed)
Operator: Cibola Energy Corporation
Location: NE/4 NW/4 - Section 18, T-9S, R-28E
Status: Not yet drilled
Date Drilled:
Total Depth: Proposed San Andres Test
Completion Interval:

WELL DATA SHEET

Operator: Cibola Energy Corp. P.O.Box 1668 Albuquerque, NM 87103
Well Name: Duncan Federal #4Y
Unit Letter "E" 1650'FNL & 324'FWL
Section: 18 Township: 9S Range: 28E County: Chaves
Well Status: Completed as a producer but not economic

CASING & TUBING DATA

Surface Wellbore:
12-1/4 in

Cement: 250 sx

Surface Casing:
8-5/8 in
23 lb/ft
400 ft

Long String Wellbore:
7-7/8 in

Cement: 205 sx
Circulated: Yes

Long String:
4-1/2 in
10.5 lb/ft
2306 ft

Original Tubing:
2-3/8 in
2230 ft

Original Packer:
None

PBTD: 2308 ft

TD: 2308 ft

Proposed Tubing:
2-3/8 in
2200 ft

Notes: Surface cement circulated to surface.
Cement top on long string is estimated at 1700 feet and was
calculated from cement volume.
Original tubing has been removed. 2 3/8" plastic lined tubing will
be run with a Haliburton R4 packer set at about 2150 feet.

Duncan Federal #4Y

VII.

1. Proposed average and maximum daily rate and volume of fluids to be injected:

Initially, the injection volume should be approximately 10 barrels a day. This rate will increase as more of the Wolf Lake San Andres field is developed. Maximum volume will be approximately 150 barrels per day.

2. System will be closed; holding tank on location for water storage.

3. Maximum Injection Pressure Expected: 900 psi
Average Injection Pressure Expected: 50 psi

4. Source of Injection Water:

The source is the San Andres from the Wolf Lake San Andres Field area. The disposal formation is the San Andres in the Wolf Lake San Andres Field area. Hence, no water analysis is required.

5. No chemical analysis is required because the disposal zone produces oil within a one mile area.

VIII.:

We propose to inject water into the P1 and P2 zones of the San Andres. The porosity zones into which water would be injected are shown on the attached electric log. Water would primarily go into the zone from 2208 to 2224 and from 2234 to 2260. Perforations cover a more limited area within these zones.

The zones are dolomite with anhydrite stringers. The top of the P1 is approximately 2198. The combined P1 and P2 is approximately 60 feet thick. The top of the San Andres itself is at approximately 1600 feet and the bottom of the San Andres is approximately 3000 feet.

The source of livestock and drinking water in the area lies above 400 feet and is known in the area as the Santa Rosa Sand. This zone is covered by surface casing.

IX:

We think the well will take the necessary fluid without further stimulation. However, if further stimulation is necessary, we propose to acidize it with approximately 7,000 gallons of 20% HCL. Additional similar stimulation would be performed as needed.

REPEAT SECTION

CP 35.082

FILE 3

12-AUG-1991 17:25

(UP)

REPEAT SECTION

5"/100'

2100

GR

SFQF

IMQF

IDQF

IMPH

IDPH

TENS

P1 2200

GR

IMPH

IDPH

SFLU

TENS

SFQF

IMQF

IDQF

FR GR

FR DITE

T.D.

2300

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE

(See other instructions on reverse side)

1a. TYPE OF WELL: OIL WELL ☒ GAS WELL ☐ DRY ☐ Other _____

b. TYPE OF COMPLETION: NEW WELL ☒ WORK OVER ☐ DEEP-EN ☐ PLUG BACK ☐ DIFF. RESVR. ☐ Other _____

2. NAME OF OPERATOR
Cibola Energy Corporation

3. ADDRESS OF OPERATOR
P. O. Box 1668 Albuquerque, NM- 87103

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*
At surface 1650' FNL & 324' FWL (Lot 2)

At top prod. interval reported below

At total depth

14. PERMIT NO.	DATE ISSUED
----------------	-------------

15. DATE SPUDDED 3-13-91	16. DATE T.D. REACHED 8-9-91	17. DATE COMPL. (Ready to prod.) 1-17-92	18. ELEVATIONS (DF, RKB, RT, GE, ETC.)* 3874.7 GR	19. ELEV. CASINGHEAD
-----------------------------	---------------------------------	---	--	----------------------

20. TOTAL DEPTH, MD & TVD 2308'	21. PLUG, BACK T.D., MD & TVD 2308'	22. IF MULTIPLE COMPL., HOW MANY? N/A	23. INTERVALS DRILLED BY →	ROTARY TOOLS 0 - 2308'	CABLE TOOLS
------------------------------------	--	---	----------------------------------	---------------------------	-------------

24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* 2216-2258 Slaughter zone of San Andres	25. WAS DIRECTIONAL SURVEY MADE No
---	---------------------------------------

26. TYPE ELECTRIC AND OTHER LOGS RUN CNL Density & Dual Induction	27. WAS WELL CORED No
--	--------------------------

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

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
8 5/8	23#	400	12 1/4	250sx circ	
4 1/2	10.5#	2306	7 7/8	90sx lite & 115sx premium	None

29. LINER RECORD					30. TUBING RECORD		
SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
	NO LINER				2 3/8	2230	None

31. PERFORATION RECORD (Interval, size and number)	32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.	
2216-21; 2234-2237; 2239-2241; 2250-2253; 2255-2258	DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
	2255-2258	8000 gal 20% HCL Halliburton

33.*			PRODUCTION		
DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)		WELL STATUS (Producing or shut-in)	
1-8-92		Pumping		Shut In for Conversion to disposal	

DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
1/8-92-1/17-92	240	2 3/8	→	7	0	111	0

FLOW, TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)
unknown	unknown	→	7/10ths	0	11 Bbls	22

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

None

ACCEPTED FOR RECORD
PETER W. ...

TEST WITNESSED BY
Tony Beilman

35. LIST OF ATTACHMENTS

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

SIGNED [Signature] TITLE President DATE June 17, 1992

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

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

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

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	GEOLOGIC MARKERS		
				NAME	MEAS. DEPTH	TRUE VERT. DEPTH
Red Beds	400	1170	Redbeds, Red Shale, Red Sands	San Andres	1604	Sea Level
Queen	1170	1600	Salt, Sand & Shale	Pi Marker	2072	+2270.7
San Andres	1604	??	Limestone, Shale, Anhydrite & Dolomite	Pi Top	2204	+1802.7
						+1670.7

Post Office Box 1668 / Albuquerque, New Mexico 87103 / (505) 843-6762

Reference _____

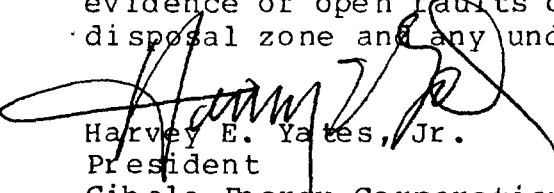
July 13, 1992

Oil Conservation Division
State of New Mexico

Reference: Water Disposal Application for the Duncan Federal #4Y

Gentlemen:

I 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 source of drinking water.


Harvey E. Yates, Jr.
President
Cibola Energy Corporation

OIL CONSERVATION DIVISION -
RECEIVED

Post Office Box 1668 / Albuquerque, New Mexico 87103 / (505) 843-6762

Reference _____

CERTIFIED RETURN RECEIPT REQUESTED: P 805 788 950

August 3, 1992

Oil Conservation Division
P. O. Box 2088
Santa Fe, New Mexico 87501

Reference: Water Disposal Application
Duncan Federal #4Y
Section 18: Lot 2
Township 9 South, Range 28 East
Chaves County, New Mexico

Gentlemen:

By letter dated July 14, 1992 we advised you that copies of our application to convert the captioned well to a disposal well had been sent Certified Return Receipt Requested to all parties shown on the attachment to this letter.

Enclosed please find copies of proof of mailing to each of those parties.

Yours truly,



Tom Kimball
Landman

Attachment
Enclosures

OIL CONSERVATION DIVISION
RECEIVED
AUG 3 1992
AUG 8 47

Paragraph XIV: Parties Within Area of Review
Duncan Federal #4Y
Section 18: Lot 2
Township 9 South, Range 28 East,
Chaves County, New Mexico

USA
Bureau of Land Management
P. O. Drawer 1857
Roswell, New Mexico 88201

Yates Petroleum Corporation
Yates Drilling Company
Abo Petroleum Corporation
Myco Industries, Inc.
105 South Fourth Street
Artesia, New Mexico 88210

Yates Energy Corporation
P. O. Box 2323
Roswell, New Mexico 88202

Read & Stevens
P. O. Box 1518
Roswell, New Mexico 88201

PetroYates, Inc.
P. O. Box 0
Albuquerque, NM 87103

Rio Petrol, Inc.
300 Harbor Building
100 2nd Avenue, South
Edmonds, WA 98020

Stevens Operating Co.
P. O. Box 2203
Roswell, New Mexico 88201

Milagro Minerals
P. O. Box 2067
Santa Fe, NM 87504

Louise D. Yates
P. O. Box 2607
Roswell, New Mexico 88202

Victor Dominguez
1200 West McGaffey #3
Roswell, NM 88201

Harvey E. Yates, Jr.,
dba Tularosa Oil Company
P. O. Box 0
Albuquerque, NM 87103

Harvey E. Yates Irrevocable Trust
c/o Mr. Don Bell
P. O. Box 2067
Santa Fe, NM 87504

Richard Williams
1213 Jefferson, NE
Albuquerque, NM 87110

Westway Petro
Lock Box 70
500 N. Akard Street
Dallas, Texas 75201-3394

P 805 788 930

**Certified Mail Receipt**

No Insurance Coverage Provided

Do not use for International Mail

(See Reverse)

Sent to	
BLM	
Street & No.	
P. O. Drawer 1857	
P.O., State & ZIP Code	
Roswell, NM 88201	
Postage	\$.98
Certified Fee	1.-
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.-
Return Receipt Showing to Whom, Date, & Address of Delivery	
Postage & Fees	\$ 2.98
Postmark or Date	JUL 14 1992

0661 surr 0666 Form PS

P 805 788 931

**Certified Mail Receipt**

No Insurance Coverage Provided

Do not use for International Mail

(See Reverse)

Sent to	
Yates Petroleum etal	
Street & No.	
105 South Fourth Street	
P.O., State & ZIP Code	
Artesia, NM 88210	
Postage	\$.98
Certified Fee	1.-
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.-
Return Receipt Showing to Whom, Date, & Address of Delivery	
Postage & Fees	\$ 2.98
Postmark or Date	JUL 14 1992

0661 surr 0086 Form PS

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

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

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

3. Article Addressed to:

USA/BLM
P. O. Drawer 1857
Roswell, N.M. 88201

4. Article Number

P 805 788 930

Type of Service:

☐ Registered☐ Insured☒ Certified☐ COD☐ Express Mail☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

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

6. Signature - Agent

JUL 17 1992

7. Date of Delivery

JUL 17 1992

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

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

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

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

3. Article Addressed to:

Yates Petroleum
Abo Petroleum Corp.
Mycro Industries, Inc.
Yates Drilling Co.
105 S. 4th St. Artesia, NM 88210

4. Article Number

P 805 788 931

Type of Service:

☐ Registered☐ Insured☒ Certified☐ COD☐ Express Mail☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

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

6. Signature - Agent

JUL 17 1992

7. Date of Delivery

JUL 17 1992

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

PS Form 3811, Apr. 1989

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

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

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

3. Article Addressed to: PetroYates, Inc.
P. O. Box 0
Albuquerque, NM 871031 1992

4. Article Number: P 805 788 932

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

5. Signature — Addressee: [Signature]

6. Signature Agent: [Signature]

7. Date of Delivery: [Blank]

8. Addressee's Address (ONLY if requested and fee paid): [Blank]

Always obtain signature of addressee or agent and DATE DELIVERED.

ALBUQUERQUE, NM JUL 14 1992

DOMESTIC RETURN RECEIPT

P 805 788 932

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to: PetroYates

Street & No.: P. O. Box 0

P.O., State & ZIP Code: Albuquerque, NM 87103

Postage: \$.98

Certified Fee: 1.-

Special Delivery Fee:

Restricted Delivery Fee:

Return Receipt Showing to Whom & Date Delivered: 1.-

Return Receipt Showing to Whom, Date, & Address of Delivery:

TOTAL Postage & Fees: \$ 2.98

Postmark or Date: JUL 14 1992

0661 aumr 0083 PS Form 3811, Apr. 1989

PS Form 3811, Apr. 1989

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

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

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

3. Article Addressed to: Stevens Operating Co.
P. O. Box 2203
Roswell, NM 88201

4. Article Number: P 805 788 933

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

5. Signature — Addressee: [Signature]

6. Signature Agent: [Signature]

7. Date of Delivery: 7-17-92

8. Addressee's Address (ONLY if requested and fee paid): [Blank]

Always obtain signature of addressee or agent and DATE DELIVERED.

ALBUQUERQUE, NM JUL 21 1992

DOMESTIC RETURN RECEIPT

P 805 788 933

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to: Stevens Operating Co.

Street & No.: P. O. Box 2203

P.O., State & ZIP Code: Roswell, NM 88201

Postage: \$.98

Certified Fee: 1.-

Special Delivery Fee:

Restricted Delivery Fee:

Return Receipt Showing to Whom & Date Delivered: 1.-

Return Receipt Showing to Whom, Date, & Address of Delivery:

TOTAL Postage & Fees: \$ 2.98

Postmark or Date: JUL 14 1992

0661 aumr 0083 PS Form 3811, Apr. 1989

P 805 788 934



Certified Mail Receipt

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to	
Louise D. Yates	
Street & No.	
P. O. Box 2607	
P.O., State & ZIP Code	
Roswell, NM 88202	
Postage	\$.98
Certified Fee	1. -
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1. -
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$ 2.98
Postmark or Date	JUL 14 1992

0961 surt 0083 Form PS

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

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

3. Article Addressed to:

Louise D. Yates
P. O. Box 2607
Roswell, NM 88202

4. Article Number
P 805 788 934

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

5. Signature - Addressee
☒

6. Signature - Agent
☒ [Signature]

7. Date of Delivery
JUL 21 1992

8. Addressee's Address (ONLY if required and fee paid)
[Stamp: ROSWELL NM 88202 JUL 21 1992]

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

P 805 788 935



Certified Mail Receipt

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to	
Harvey E. Yates, dbaTulok1	
Street & No.	
P. O. Box 0	
P.O., State & ZIP Code	
Albuquerque, NM 87103	
Postage	\$.98
Certified Fee	1. -
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1. -
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$ 2.98
Postmark or Date	JUL 14 1992

0961 surt 0083 Form PS

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

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

3. Article Addressed to:

Harvey E. Yates, Jr., dba
Tularosa Oil Co.
P. O. Box 0
Albuquerque, NM 87103

4. Article Number
P 805 788 935

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

5. Signature - Addressee
☒

6. Signature - Agent
☒ [Signature]

7. Date of Delivery
JUL 1 1992

8. Addressee's Address (ONLY if required and fee paid)
[Stamp: ALBUQUERQUE NM 87103 JUL 1 1992]

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

P 805 788 936



Certified Mail Receipt

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to Richard Williams	
Street & No. 1213 Jefferson, NE	
P.O., State & ZIP Code Albuquerque, NM 87110	
Postage	\$.98
Certified Fee	1.-
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.-
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$ 2.98
Postmark or Date JUL 14 1992	

PS Form 3811, Apr. 1989

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

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

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

3. Article Addressed to:

Richard Williams
1213 Jefferson, NE
Albuquerque, NM 87110

4. Article Number
P 805 788 936

Type of Service:

☐ Registered
☒ Certified
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature - Addressee
Richard Williams

6. Signature - Agent
X

7. Date of Delivery
7-15-92

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

P 805 788 937



Certified Mail Receipt

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to Yates Energy Corp.	
Street & No. P. O. Box 2323	
P.O., State & ZIP Code Roswell, NM 88202	
Postage	\$.98
Certified Fee	1.-
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.-
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$ 2.98
Postmark or Date JUL 14 1992	

PS Form 3811, Apr. 1989

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

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

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

3. Article Addressed to:

Yates Energy Corp.
P. O. Box 2323
Roswell, NM 88202

4. Article Number
P 805 788 937

Type of Service:

☐ Registered
☒ Certified
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature - Addressee
Yates Energy Corp.

6. Signature - Agent
X

7. Date of Delivery
7-17-92

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

P 805 788 939



Certified Mail Receipt

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to	
Rio Petrol, Inc.	
Street & No.	
100 2nd Ave. South	
P.O., State & ZIP Code	
Edmonds, WA 98020	
Postage	\$.98
Certified Fee	1.-
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.-
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$ 2.98
Postmark or Date	
JUL 14 1992	

PS Form 3800, June 1990

P 805 788 938



Certified Mail Receipt

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to	
Read & Stevens	
Street & No.	
P. O. Box 1518	
P.O., State & ZIP Code	
Roswell, NM 88201	
Postage	\$.98
Certified Fee	1.-
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.-
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$ 2.98
Postmark or Date	
JUL 14 1992	

PS Form 3800, June 1990

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

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

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

3. Article Addressed to:

Rio Petrol, Inc.
100 2nd Avenue, South
Edmonds, WA 98020

4. Article Number

P 805 788 939

Type of Service:

☐ Registered
☒ Certified
☐ Express Mail
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

6. Signature — Agent

7. Date of Delivery

PS Form 3811, Apr. 1989

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

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

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

3. Article Addressed to:

Read & Stevens
P. O. Box 1518
Roswell, NM 88201

4. Article Number

P 805 788 938

Type of Service:

☐ Registered
☒ Certified
☐ Express Mail
☐ Insured
☐ COD
☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

6. Signature — Agent

7. Date of Delivery

PS Form 3811, Apr. 1989

DOMESTIC RETURN RECEIPT

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

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

3. Article Addressed to: Milagro Minerals
P. O. Box 2067
Santa Fe, NM 87504

4. Article Number: P 805 788 940

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: [Signature] 8. Addressee's Address (ONLY if requested and fee paid): [Address]

6. Signature - Agent: [Signature]

7. Date of Delivery: JUL 2 1992

PS Form 3811, Apr. 1989 DOMESTIC RETURN RECEIPT

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

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

3. Article Addressed to: Victor Dominguez
1200 W. McGaffey #3
Roswell, NM 88201

4. Article Number: P 805 788 941

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: [Signature] 8. Addressee's Address (ONLY if requested and fee paid): [Address]

6. Signature - Agent: [Signature]

7. Date of Delivery: JUL 29 1992

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

P 805 788 940

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to: Milagro Minerals

Street & No.: P. O. Box 2067

P.O., State & ZIP Code: Santa Fe, NM 87504

Postage: \$.98

Certified Fee: 1.-

Special Delivery Fee:

Restricted Delivery Fee:

Return Receipt Showing to Whom & Date Delivered: 1.-

Return Receipt Showing to Whom, Date, & Address of Delivery:

TOTAL Postage & Fees: \$ 2.98

Postmark or Date: [Stamp]

PS Form 3800, June 1990

P 805 788 941

Certified Mail Receipt
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to: Victor Dominguez

Street & No.: 1200 W. McGaffey #3

P.O., State & ZIP Code: Roswell, NM 88201

Postage: \$.98

Certified Fee: 1.-

Special Delivery Fee:

Restricted Delivery Fee:

Return Receipt Showing to Whom & Date Delivered: 1.-

Return Receipt Showing to Whom, Date, & Address of Delivery:

TOTAL Postage & Fees: \$ 2.98

Postmark or Date: [Stamp]

PS Form 3800, June 1990

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

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

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

3. Article Addressed to: Harvey Yates Irrev. Trust
Attn: Mr. Don Bell
P. O. Box 2067
Santa Fe, NM 87504

4. Article Number: P 805 788 942

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

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature - Agent: [Signature]

6. Signature - Agent: [Signature]

7. Date of Delivery: [Date]

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

PS Form 3800, June 1990

Certified Mail Receipt
P 805 788 943

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to: Westway Petro
Street & No: 500 N. Akard Street
P.O., State & ZIP Code: Dallas, TX 75201-3394

Postage: \$.98
Certified Fee: \$.98
Special Delivery Fee: \$.98
Restricted Delivery Fee: \$.98

Return Receipt Showing: 1. -
To Whom & Date Delivered: 1. -
Date & Address of Delivery: 1. -
Postmark & Date: 1. -
Postage & Fees: \$ 2.98

PS Form 3800, June 1990

PS Form 3800, June 1990

Certified Mail Receipt
P 805 788 943

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to: Westway Petro
LockBox 70
500 N. Akard Street
Dallas, TX 75201-3394

Postage: \$.98
Certified Fee: \$.98
Special Delivery Fee: \$.98
Restricted Delivery Fee: \$.98

Return Receipt Showing: 1. -
To Whom & Date Delivered: 1. -
Date & Address of Delivery: 1. -
Postmark & Date: 1. -
Postage & Fees: \$ 2.98

PS Form 3800, June 1990

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT