Midland Division
Exploration and Production

DIVISION
Conoco Inc.
10 Desta Drive West
Midland, TX 79705-4514
(915) 686-5400

'90 OCT 4 AM 9 22

October 1, 1990

Mr. William LeMay
New Mexico Oil Conservation Division
P.O. Box 2088
Santa Fe, NM 87504-2088

Dear Mr. LeMay:

Proof of Notice to Jenny COM Well No. 1
Interest Owners of Intent to Commingle
and Store Production Off-Lease at the
Lodewick Well No. 1 Battery, Unit C,
Section 19, T-19S, R-25E, Eddy County,
New Mexico

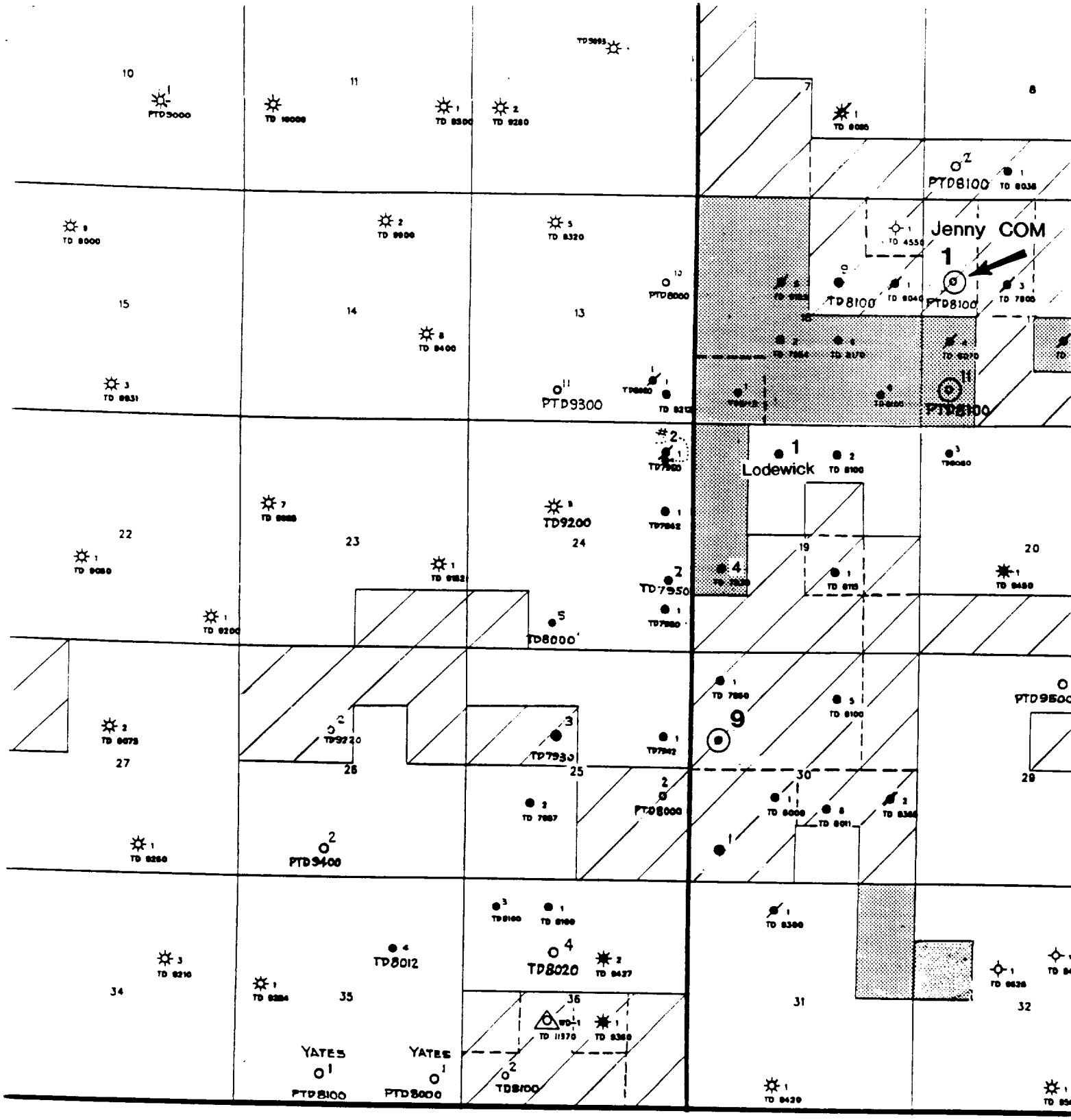
Conoco's September 11, 1990 application for surface commingling and off-lease storage of the North Dagger Draw Upper Pennsylvanian production from the Jenny COM No. 1 well stated that all interest owners in the Jenny COM No. 1 had been notified by certified mail of this application. Attached is (a) a copy of the letter they received, (b) a list of the interest owners, and (c) a copy of the certified mail receipts.

Your timely consideration and approval of this application will be appreciated so that there will be no delay in establishing production when the drilling of this well is completed. Should you have any further questions concerning this matter, contact Jerry Hoover at (915) 686-6548.

Yours very truly,

Brent D. Meyers
Division Operations Manager

JWH/tm



conoco

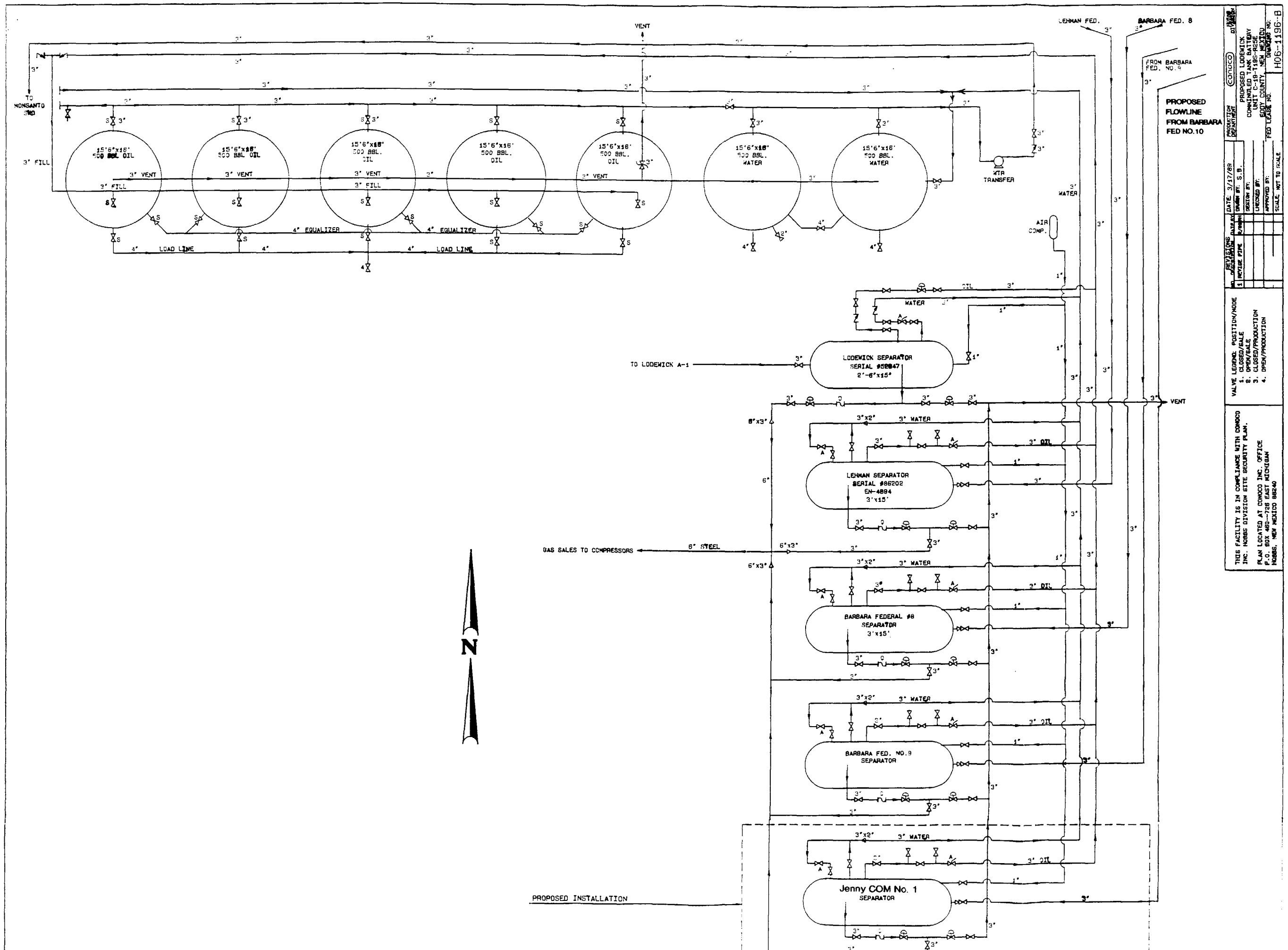
NORTH AMERICAN EXPLORATION AND PRODUCTION

HOBBS DIVISION

EDDY CO., NEW MEXICO

NORTH DAGGER DRAW CISCO COMPLETIONS

SCALE: 1"=4000'


VENT
LENNAN FED.
BARBARA FED. 8
FROM BARBARA FED. NO. 5
PROPOSED FLOWLINE FROM BARBARA FED NO.10
TO MONSANTO END
3" FILL
15'6"x16' 500 BBL OIL
15'6"x16' 500 BBL. OIL
15'6"x16' 500 BBL. WATER
3" VENT
3" FILL
4" EQUALIZER
4" LOAD LINE
WTR TRANSFER
AIR COMP.
WATER
OIL
TO LODEWICK A-1
LODEWICK SEPARATOR SERIAL #SB847 2'-6"x15'
LENNAN SEPARATOR SERIAL #86202 EN-4894 3'x15'
BARBARA FEDERAL #8 SEPARATOR 3'x15'
BARBARA FED. NO.9 SEPARATOR
Jenny COM No. 1 SEPARATOR
GAS SALES TO COMPRESSORS
6" STEEL
PROPOSED INSTALLATION
N
VALVE LEGEND: POSITION/MODE
1. CLOSED/SALE
2. OPEN/SALE
3. CLOSED/PRODUCTION
4. OPEN/PRODUCTION
THIS FACILITY IS IN COMPLIANCE WITH CONOCO INC. HOBBS DIVISION SITE SECURITY PLAN.
PLAN LOCATED AT CONOCO INC. OFFICE P.O. BOX 460-726 EAST MICHIGAN HOBBS, NEW MEXICO 88240
CONOCO
PROPOSED LODEWICK COMMINGLE BATTERY
UNIT C-19-19S-38E
EDDY COUNTY, NEW MEXICO
FED LEASE 956
H06-1196-B
DATE: 3/17/89
SCALE: NOT TO SCALE
REVISIONS
1 MOTOR VPPE

September 10, 1990

Dear Interest Owner:

Conoco is requesting your approval for off-lease storage and surface commingling of production from our proposed Jenny COM Well No. 1 to be located at 1750' FNL and 660' FWL in Section 17, T-19S, R-25E, Eddy County, New Mexico.

The purpose of this off-lease storage and surface commingling is to reduce operating costs for storage and treating and thereby extend the economic life of this well. Without approval for utilizing the already existing battery facilities on an adjacent lease, separate facilities would have to be constructed just for this one well. This would increase operating costs and shorten the economic life of the well.

Because interests for the proposed well are different from those for the lease where the proposed storage facilities are located, oil from the Jenny COM No. 1 will be measured by positive displacement, temperature compensated metering equipment prior to surface commingling. Gas from the well will also be metered separately. This metering will ensure that all production from the Jenny COM No. 1 is equitably accounted for with no significant effect on your revenue.

We would appreciate your returning an approved copy of this letter to us by October 1, 1990 in the enclosed postage paid envelope. If we do not hear from you by that date, we will assume that you have no objections to our proposal and will request approval from the New Mexico Oil Conservation Division for this proposed off- lease storage and surface commingling.

Yours very truly,

Brent D. Meyers
Divisions Operations Manager

JWH/tm

APPROVED BY: _____ DATE: _____

Ray Hall Beck
1804 Booker
Artesia, NM 88210

Michael Carter
1021 Plaza Drive
Granbury, TX 76048

Sterling Mark Carter
P.O. Box 97
Winston, NM 87943

Madlyn Cauhape
Star Rt.
Hope, NM 88250

R. E. Chambers
2413 Clayton Lane
Wichita Falls, TX 76308

Lillie M. Yates
207 S 4th St.
Artesia, NM 88210

Robert B. Payne
3700 Renaissance TWR
1201 Elm Street
Dallas, TX 75270

Richard H. Landcheft Jr.
2313 Jim Dent
El Paso, TX 79936

Dr. Donald L. Zink
903 Naamans Creek Rd.
Chadds Ford, PA 19317

Scarlet Nunes
C/O Conoco
600 N. Dairy Ashford Rd.
Houston, TX 77252

Minerals Management Service
P.O. Box 5810
Denver, CO 80217

Yates Drilling Co.
207 S. 4th Street
Artesia, NM 88210

Yates Petroleum Corp.
105 S. 4th St.
Artesia, NM 88210

John A. Yates
207 S. 4th Street
Artesia, NM 88210

Northern Trust Company
11 Greenway Plaza
Suite 3025
Houston, TX 77046

Floyd Childress II
712 N. Lea St.
Roswell, NM 88201

James W. Childress
P.O. Box 209
Roswell, NM 88201

Florence M. Essman Curry
No. 1 Deerfield
Midland, TX 79701

James H. Essman
P.O. Box 302
Midland, TX

Ann F. Freeman
P.O. Box 4143
Wichita Falls, TX 76308

Claydesta National Bank
A/C Mike Roberts
P.O. Box 3090
Midland, TX 79702

Dr. Roy E. Glass
2303 Douglas Drive
San Angelo, TX 76904

Clarence F. Hinkle
P.O. Box 2002
Roswell, NM 88201

R. R. Hinkle Co. Inc.
1213 W. 3rd St.
Roswell, NM 88201

Claribel Y. Marshall
P.O. Box 1712
Roswell, NM 88202

Mayme Kaskie
7100 W. 13th Avenue
Apt 225
Lakewood, CO 80215

Robert B. Payne
3700 Renaissance TWR
1201 Elm Street
Dallas, TX 75270

Dorothy G. Kemper
P.O. Box 1105
Artesia, NM 88210

Lynn E. Desper
4601 Montano NW #7
Albuquerque, NM 87120

Cordella M. Kincaid
906 Hermosa Drive
Artesia, NM 88210

Hugh M. Kincaid
Swope Trust
Queen Route
Carlsbad, NM 88220

Eddie M. Mahfood
P.O. Box 896
Artesia, NM 88210

Marshall & Winston Inc.
P.O. Box 50880
Midland, TX 797100880

William J. McCaw
Box 376
Artesia, NM 88210

Gayle McDonald
2214 Chestnut St.
San Angelo, TX 76901

McQuiddy Communications & Energy Inc.
P.O. Box 2072
Roswell, NM 88201

Lillie M. Yates
Rep of the Est/Martin
207 S. Fourth
Artesia, NM 88210

W.T. Probandt
415 W. Wall Ste 1608
Midland, TX 79701

Quetico Superior Fon
2200 First Bank PL E
Minneapolis, MN 55402

Mary G. Riddle
P.O. Box 127
Artesia, NM 88210

A.M. Routh
Box 2004
Midland, TX 79702

Thelma May Schafer
906 Hermosa Drive
Artesia, NM 88210

Kenna Carter Scott
Rt. 3 Box 329
Big Spring, TX 79720

William Bryan Landsheft
Route 6
15880 S. Peoria
Bixby, OK 74008

Edward Wait
649 Madison St.
Albany, CA 94706

Yates Brothers A PRTNS
207 S. 4th St.
Artesia, NM 88210

PS Form 3811, July 1983 447-845

SENDER: Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 224 [illegible]

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
4-13-90

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983 447-845

SENDER: Complete items 1, 2, 3 and 4.

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4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 224 [illegible]

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X [illegible]

6. Signature – Agent
X

7. Date of Delivery
9-12-90

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983 447-845

SENDER: Complete items 1, 2, 3 and 4.

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4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 224 [illegible]

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X [illegible]

6. Signature – Agent
X

7. Date of Delivery
7-12-90

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

DOMESTIC RETURN RECEIPT

PS Form 3811, Dec. 1980

● **SENDER:** Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.

(CONSULT POSTMASTER FOR FEES)

1. The following service is requested (check one).
☐ Show to whom and date delivered ..... ¢
☐ Show to whom, date, and address of delivery.. ¢
2. ☐ RESTRICTED DELIVERY ¢
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL $

3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE:	ARTICLE NUMBER
☐ REGISTERED ☐ INSURED ☒ CERTIFIED ☐ COD ☐ EXPRESS MAIL	P 224 [illegible]

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
[illegible]

5. DATE OF DELIVERY 4-13-90 POSTMARK

6. ADDRESSEE'S ADDRESS *(Only if requested)*

7. UNABLE TO DELIVER BECAUSE: 7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

PS Form 3811, Dec. 1980

● **SENDER:** Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.

(CONSULT POSTMASTER FOR FEES)

1. The following service is requested (check one).
☐ Show to whom and date delivered ..... ¢
☐ Show to whom, date, and address of delivery.. ¢
2. ☐ RESTRICTED DELIVERY ¢
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL $

3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE:	ARTICLE NUMBER
☐ REGISTERED ☐ INSURED ☒ CERTIFIED ☐ COD ☐ EXPRESS MAIL	P 224 [illegible]

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
[illegible]

5. DATE OF DELIVERY 9-12-90 POSTMARK

6. ADDRESSEE'S ADDRESS *(Only if requested)*

7. UNABLE TO DELIVER BECAUSE: 7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

[illegible]

● SENDER: [illegible]

1. The following service is requested (check one.)
☐ Show to whom and date delivered ..... ¢
☐ Show to whom, date, and address of delivery... ¢
☐ RESTRICTED DELIVERY ¢
☐ Show to whom, date, and address of delivery $...
(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
[illegible]

3. ARTICLE DESCRIPTION:
REGISTERED NO. CERTIFIED NO. INSURED NO.

(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
[illegible]

4. DATE OF DELIVERY POSTMARK

5. ADDRESSEE'S ADDRESS (Only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO : 1979-300-459

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

● SENDER: [illegible]

1. The following service is requested (check one.)
☐ Show to whom and date delivered ..... ¢
☐ Show to whom, date, and address of delivery... ¢
☐ RESTRICTED DELIVERY ¢
☐ Show to whom, date, and address of delivery $...
(CONSULT POSTMASTER FOR FEES)

2. ARTICLE ADDRESSED TO:
[illegible]

3. ARTICLE DESCRIPTION:
REGISTERED NO. CERTIFIED NO. INSURED NO.

(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
[illegible]

4. DATE OF DELIVERY POSTMARK

5. ADDRESSEE'S ADDRESS (Only if requested)

6. UNABLE TO DELIVER BECAUSE: CLERK'S INITIALS

☆GPO : 1979-300-459

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

PS Form 3811, Dec. 1980

● **SENDER:** Complete items 1, 2, 3, and 4.
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(CONSULT POSTMASTER FOR FEES)

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TOTAL $

3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE:	ARTICLE NUMBER
☐ REGISTERED ☐ INSURED ☒ CERTIFIED ☐ COD ☐ EXPRESS MAIL	P 224 [illegible]

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
[illegible]

5. DATE OF DELIVERY 9-13-90 POSTMARK

6. ADDRESSEE'S ADDRESS *(Only if requested)*

7. UNABLE TO DELIVER BECAUSE: 7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

PS Form 3811, July 1983 447-845

SENDER: Complete items 1, 2, 3 and 4.

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1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:

4. Type of Service: | Article Number

☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
SEP 13 1990

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983 447-845

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3. Article Addressed to

4. Type of Service: | Article Number

☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail

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5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery

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

DOMESTIC RETURN RECEIPT

PS Form 3811, July 1983 447-845

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3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE: | ARTICLE NUMBER

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. DATE OF DELIVERY | POSTMARK

6. ADDRESS (Complete only if requested)

7. UNABLE TO DELIVER BECAUSE: | 8. CLERK'S INITIALS

☆GPO : 1979 K 0-459

SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.

(CONSULT POSTMASTER FOR FEES)

1. The following service is requested (check one).
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☐ Show to whom, date, and address of delivery .. ¢
2. ☐ RESTRICTED DELIVERY ¢
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL $

3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE: | ARTICLE NUMBER

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

6. DATE OF DELIVERY | POSTMARK

8. ADDRESSEE'S ADDRESS *(Only if requested)*

7. UNABLE TO DELIVER BECAUSE: | 7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

PS Form 3811, Dec. 1980

SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse

(CONSULT POSTMASTER FOR FEES)

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(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL $

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4. TYPE OF SERVICE: | ARTICLE NUMBER

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. DATE OF DELIVERY | POSTMARK

6. ADDRESSEE'S ADDRESS *(Only if requested)*

7. UNABLE TO DELIVER BECAUSE: | 7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

PS Form 3811, July 1983 447-845

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3. Article Addressed to:

4. Type of Service: | Article Number

☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X

6. Signature – Agent
X

7. Date of Delivery
SEP 27 1990

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

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1, 2, 3, and 4.
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(CONSULT POSTMASTER FOR FEES)

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TOTAL $

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4. TYPE OF SERVICE: | ARTICLE NUMBER

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. DATE OF DELIVERY | POSTMARK

6. ADDRESSEE'S ADDRESS *(Only if requested)*

7. UNABLE TO DELIVER BECAUSE: | 7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

---

1. ☐ Show to whom, date and address of delivery.
2. ☐ RESTRICTED DELIVERY.

3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE: | ARTICLE NUMBER

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. DATE OF DELIVERY | POSTMARK

6. ADDRESS (Complete only if requested)

7. UNABLE TO DELIVER BECAUSE: | 8. CLERK'S INITIALS

☆GPO : 1979-300-459

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1. ☐ Show to whom, date and address of delivery.
2. ☐ RESTRICTED DELIVERY.

3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE: | ARTICLE NUMBER

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. DATE OF DELIVERY | POSTMARK

6. ADDRESS (Complete only if requested)

7. UNABLE TO DELIVER BECAUSE: | 8. CLERK'S INITIALS

☆GPO : 1979-300-459

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(CONSULT POSTMASTER FOR FEES)

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☐ Show to whom, date, and address of delivery .. ¢
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TOTAL $

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4. TYPE OF SERVICE: | ARTICLE NUMBER

☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☐ Addressee ☐ Authorized agent

5. DATE OF DELIVERY | POSTMARK

6. ADDRESSEE'S ADDRESS *(Only if requested)*

7. UNABLE TO DELIVER BECAUSE: | 7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

PS Form 3811, July 1983 447-845

DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
Sterling Mark Carter
Box 97
Winston N.M. 87943

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 264 539 736

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X Judith Carter

6. Signature – Agent
X

7. Date of Delivery

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

[illegible]

[illegible]

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(CONSULT POSTMASTER FOR FEES)

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☐ Show to whom, date, and address of delivery.. ¢
2. ☐ RESTRICTED DELIVERY ¢
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL $

3. ARTICLE ADDRESSED TO:
[illegible]

4. TYPE OF SERVICE:	ARTICLE NUMBER
☐ REGISTERED ☐ INSURED ☒ CERTIFIED ☐ COD ☐ EXPRESS MAIL	[illegible]

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
[illegible signature]

5. DATE OF DELIVERY
09-12-90

POSTMARK

6. ADDRESSEE'S ADDRESS (Only if requested)

7. UNABLE TO DELIVER BECAUSE:

7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

PS Form 3811, July 1983 447-845

● **SENDER:** Complete items 1, 2, 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 service(s) requested.

1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery.

3. Article Addressed to:
[illegible handwriting]

4. Type of Service:	Article Number
☐ Registered ☐ Insured ☒ Certified ☐ COD ☐ Express Mail	P 264 53[illegible]

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature – Addressee
X [illegible signature]

6. Signature – Agent
X

7. Date of Delivery

8. Addressee's Address (ONLY if requested and fee paid)
9/19/90

DOMESTIC RETURN RECEIPT

[illegible]

[illegible]

PS Form 3811, Dec. 1980

● **SENDER:** Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.

(CONSULT POSTMASTER FOR FEES)

1. The following service is requested (check one).
☐ Show to whom and date delivered .... ¢
☐ Show to whom, date, and address of delivery ¢
2. ☐ RESTRICTED DELIVERY ¢
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL $

3. ARTICLE ADDRESSED TO:
[illegible]

4. TYPE OF SERVICE:	ARTICLE NUMBER
☐ REGISTERED ☐ INSURED ☐ CERTIFIED ☐ COD ☐ EXPRESS MAIL	

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☒ Authorized agent
[illegible signature]

5. DATE OF DELIVERY
9-1[illegible]-90

POSTMARK

6. ADDRESSEE'S ADDRESS (Only if requested)

7. UNABLE TO DELIVER BECAUSE:

7a. EMPLOYEE'S INITIALS

RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

☆GPO : 1979 300-459

● **SENDER:** Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.

(CONSULT POSTMASTER FOR FEES)

1. The following service is requested (check one).
☐ Show to whom and date delivered .... ¢
☐ Show to whom, date, and address of delivery.. ¢
2. ☐ RESTRICTED DELIVERY ¢
(The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL $

3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE:	ARTICLE NUMBER
☐ REGISTERED ☐ INSURED ☐ CERTIFIED ☐ COD ☐ EXPRESS MAIL	

(Always obtain signature of addressee or agent)

I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
[illegible signature]

5. DATE OF DELIVERY

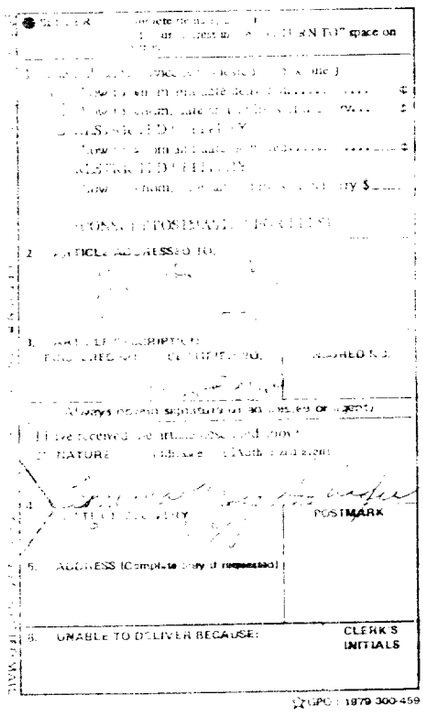
POSTMARK

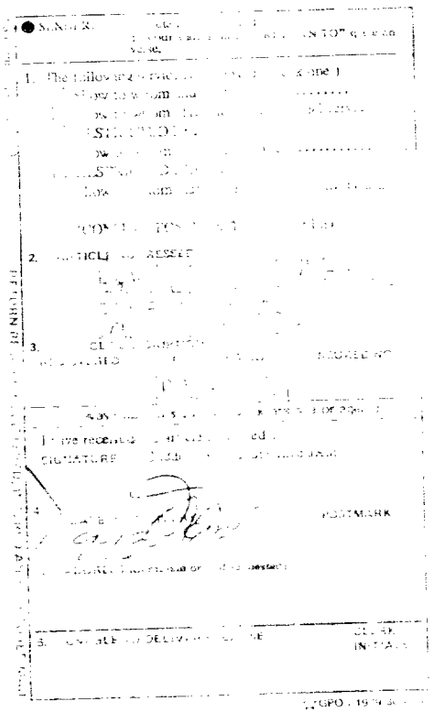
6. ADDRESSEE'S ADDRESS (Only if requested)

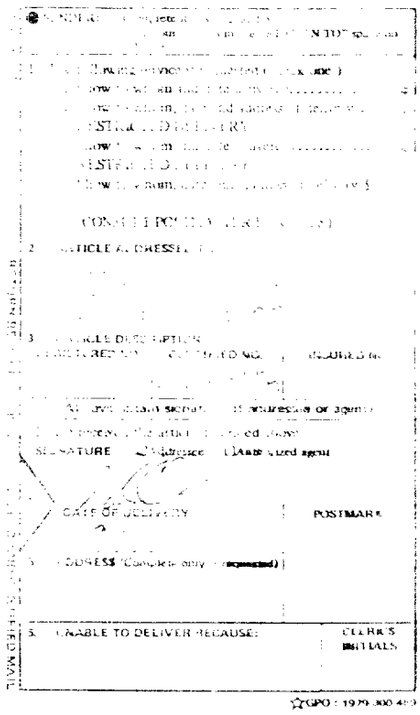
7. UNABLE TO DELIVER BECAUSE:

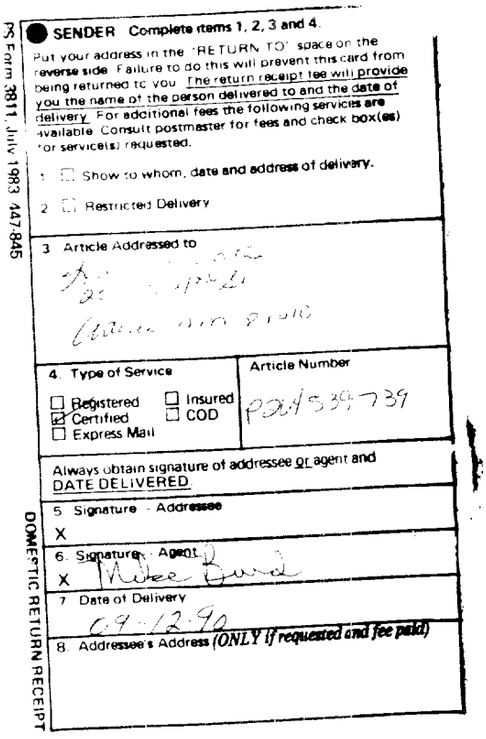
7a. EMPLOYEE'S INITIALS

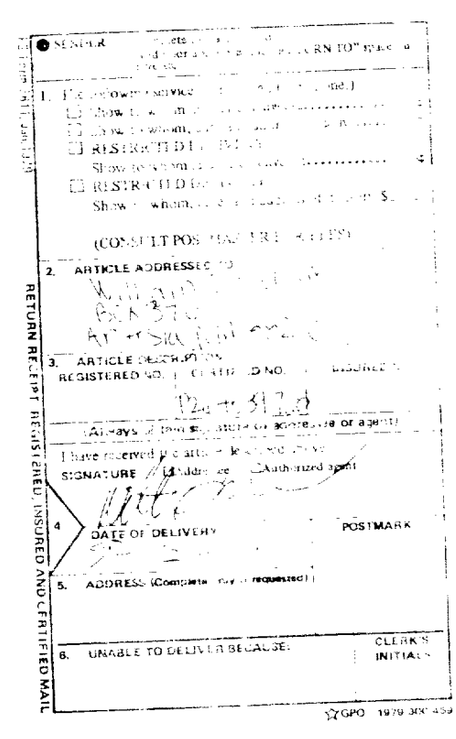
RETURN RECEIPT, REGISTERED, INSURED AND CERTIFIED MAIL

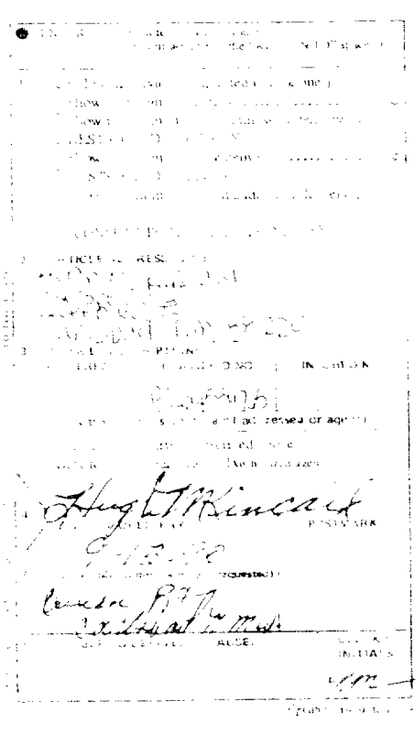


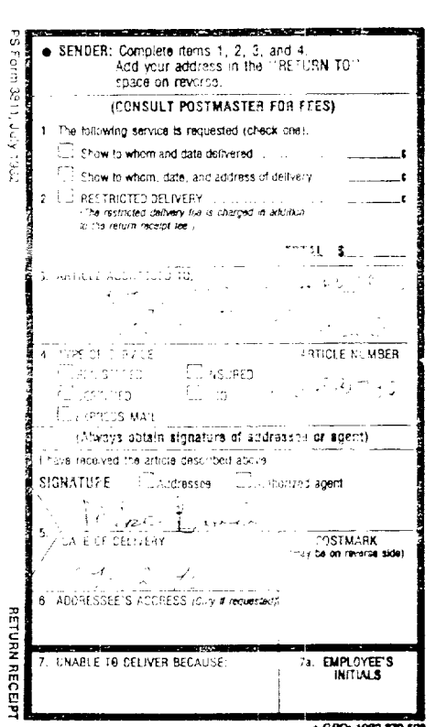


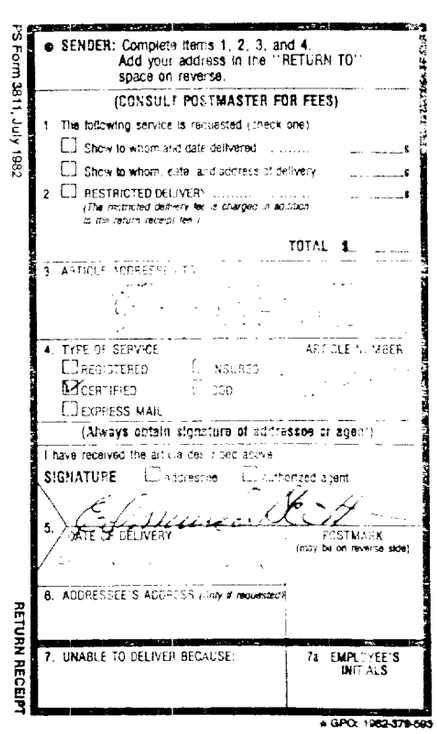


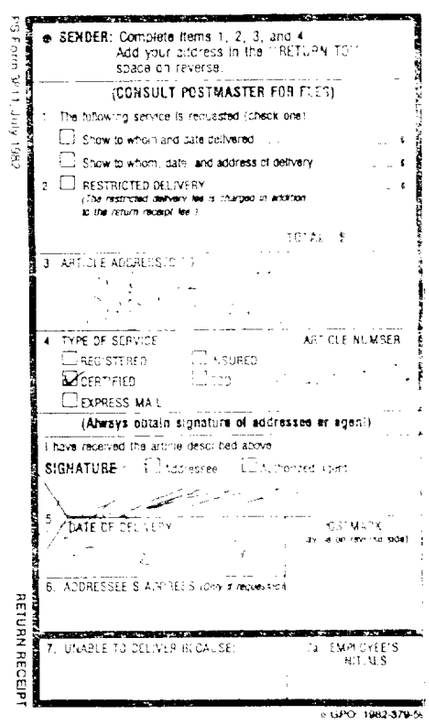

PS Form 3811, July 1983 447-845
SENDER Complete items 1, 2, 3 and 4.
Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for service(s) requested.
1. ☐ Show to whom, date and address of delivery.
2. ☐ Restricted Delivery
3. Article Addressed to
4. Type of Service
☐ Registered ☐ Insured
☑ Certified ☐ COD
☐ Express Mail
Article Number
P 045 397 739
Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addressee
X
6. Signature - Agent
X
7. Date of Delivery
8. Addressee's Address (ONLY if requested and fee paid)
DOMESTIC RETURN RECEIPT

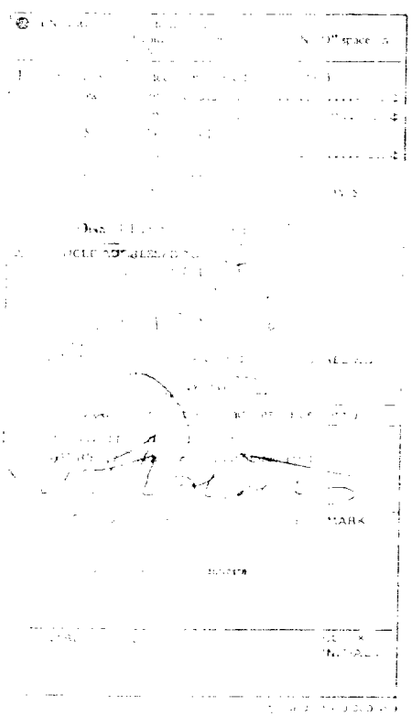

RETURN RECEIPT REGISTERED, INSURED AND CERTIFIED MAIL
SENDER
2. ARTICLE ADDRESSED TO
3. ARTICLE DESCRIPTION
REGISTERED NO.
CERTIFIED NO.
INSURED NO.
(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
4. DATE OF DELIVERY
POSTMARK
5. ADDRESS (Complete only if requested)
6. UNABLE TO DELIVER BECAUSE:
CLERK'S INITIALS
☆GPO: 1979-300-459

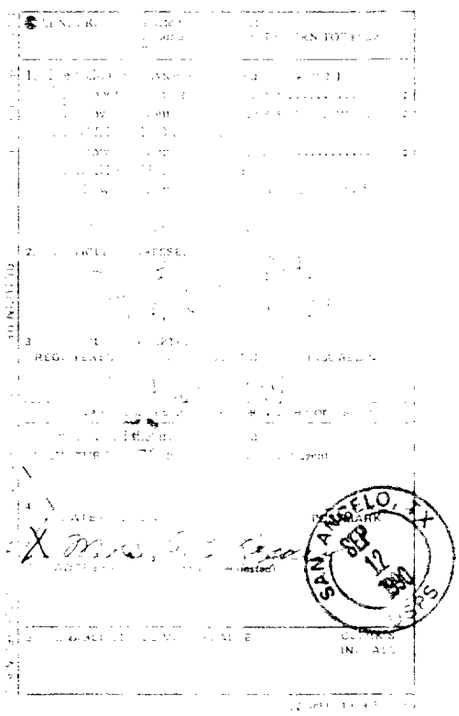


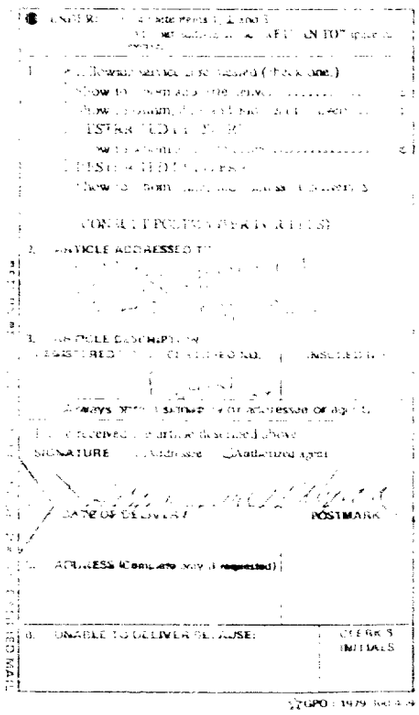

PS Form 3811, July 1982
SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.
(CONSULT POSTMASTER FOR FEES)
1. The following service is requested (check one).
☐ Show to whom and date delivered
☐ Show to whom, date, and address of delivery
2. ☐ RESTRICTED DELIVERY
(The restricted delivery fee is charged in addition to the return receipt fee.)
TOTAL $
3. ARTICLE ADDRESSED TO:
4. TYPE OF SERVICE
ARTICLE NUMBER
☐ REGISTERED ☐ INSURED
☐ CERTIFIED ☐ COD
☐ EXPRESS MAIL
(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
5. DATE OF DELIVERY
POSTMARK (may be on reverse side)
6. ADDRESSEE'S ADDRESS (Only if requested)
7. UNABLE TO DELIVER BECAUSE:
7a. EMPLOYEE'S INITIALS
RETURN RECEIPT
* GPO: 1982-379-593

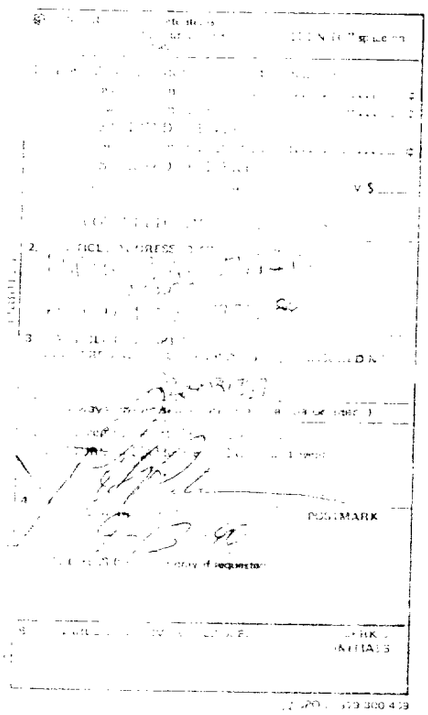

PS Form 3811, July 1982
SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.
(CONSULT POSTMASTER FOR FEES)
1. The following service is requested (check one)
☐ Show to whom and date delivered
☐ Show to whom, date, and address of delivery
2. ☐ RESTRICTED DELIVERY
(The restricted delivery fee is charged in addition to the return receipt fee.)
TOTAL $
3. ARTICLE ADDRESSED TO
4. TYPE OF SERVICE
ARTICLE NUMBER
☐ REGISTERED ☐ INSURED
☑ CERTIFIED ☐ COD
☐ EXPRESS MAIL
(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
5. DATE OF DELIVERY
POSTMARK (may be on reverse side)
6. ADDRESSEE'S ADDRESS (Only if requested)
7. UNABLE TO DELIVER BECAUSE:
7a. EMPLOYEE'S INITIALS
RETURN RECEIPT
* GPO: 1982-379-593

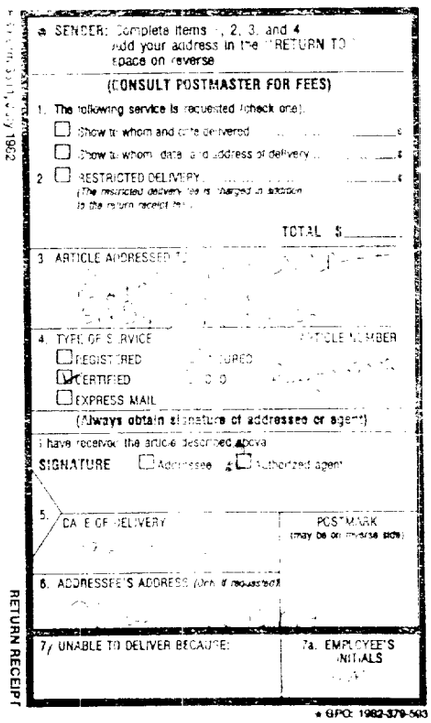

PS Form 3811, July 1982
SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.
(CONSULT POSTMASTER FOR FEES)
1. The following service is requested (check one)
☐ Show to whom and date delivered
☐ Show to whom, date, and address of delivery
2. ☐ RESTRICTED DELIVERY
(The restricted delivery fee is charged in addition to the return receipt fee.)
TOTAL $
3. ARTICLE ADDRESSED TO
4. TYPE OF SERVICE
ARTICLE NUMBER
☐ REGISTERED ☐ INSURED
☑ CERTIFIED ☐ COD
☐ EXPRESS MAIL
(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE ☐ Addressee ☐ Authorized agent
5. DATE OF DELIVERY
POSTMARK (may be on reverse side)
6. ADDRESSEE'S ADDRESS (Only if requested)
7. UNABLE TO DELIVER BECAUSE:
7a. EMPLOYEE'S INITIALS
RETURN RECEIPT
* GPO: 1982-379-593

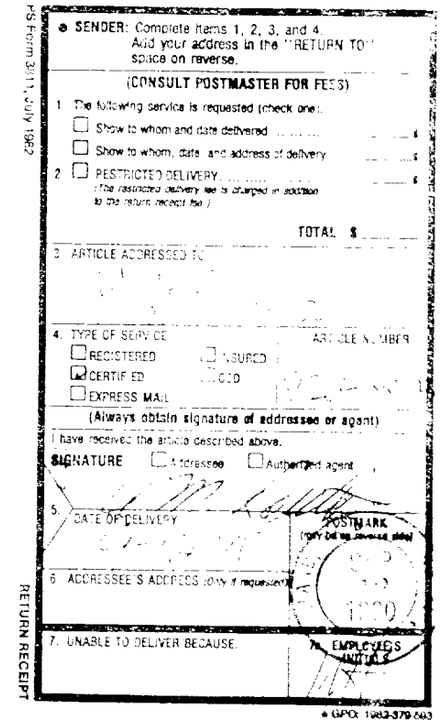


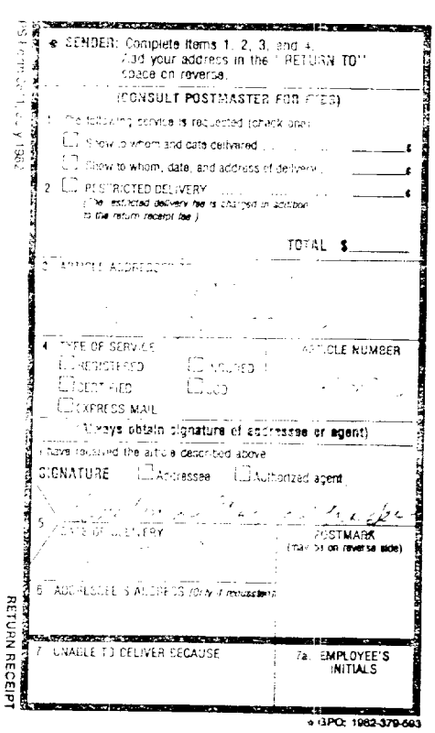

SAN ANGELO, TX
SEP
12
1980
USPS

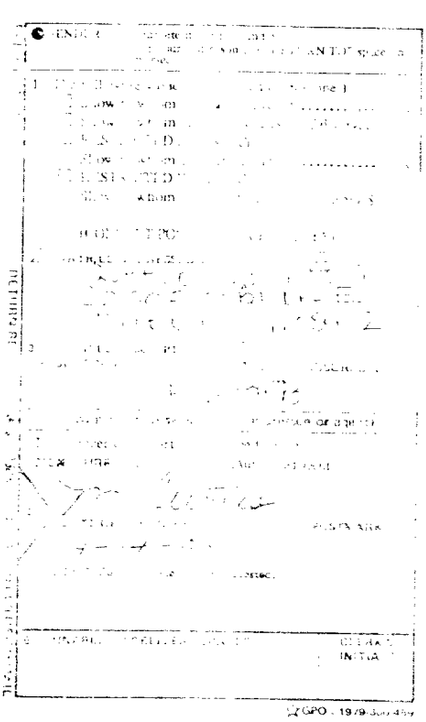


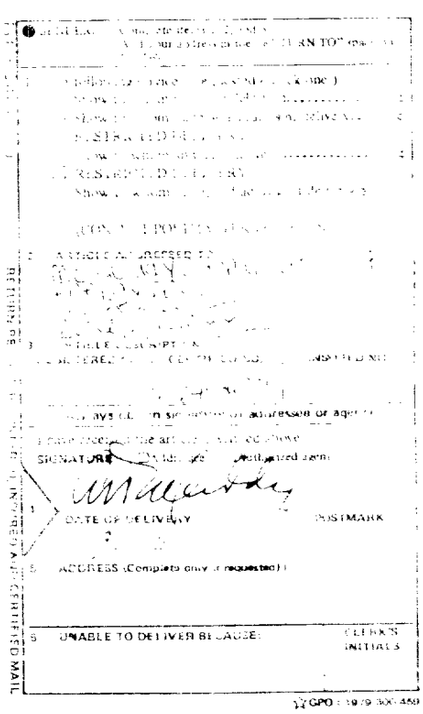


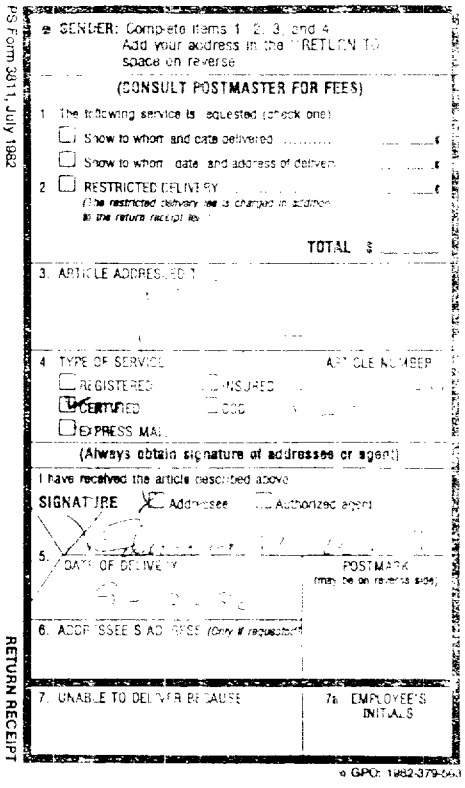

SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.
(CONSULT POSTMASTER FOR FEES)
1. The following service is requested (check one).
Show to whom and date delivered
Show to whom, date, and address of delivery
2 RESTRICTED DELIVERY
(The restricted delivery fee is charged in addition to the return receipt fee.)
TOTAL $
3. ARTICLE ADDRESSED TO:
4. TYPE OF SERVICE
REGISTERED
INSURED
CERTIFIED
C.O.D.
EXPRESS MAIL
ARTICLE NUMBER
(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE
Addressee
Authorized agent
5. DATE OF DELIVERY
POSTMARK
(may be on reverse side)
6. ADDRESSEE'S ADDRESS (Only if requested)
7. UNABLE TO DELIVER BECAUSE:
7a. EMPLOYEE'S INITIALS
RETURN RECEIPT
PS Form 3811, July 1982
GPO: 1982-379-503


SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.
(CONSULT POSTMASTER FOR FEES)
1. The following service is requested (check one).
Show to whom and date delivered
Show to whom, date, and address of delivery
2 RESTRICTED DELIVERY
(The restricted delivery fee is charged in addition to the return receipt fee.)
TOTAL $
3. ARTICLE ADDRESSED TO:
4. TYPE OF SERVICE
REGISTERED
INSURED
CERTIFIED
C.O.D.
EXPRESS MAIL
ARTICLE NUMBER
(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE
Addressee
Authorized agent
5. DATE OF DELIVERY
POSTMARK
(only be on reverse side)
6. ADDRESSEE'S ADDRESS (Only if requested)
7. UNABLE TO DELIVER BECAUSE:
7a. EMPLOYEE'S INITIALS
RETURN RECEIPT
PS Form 3811, July 1982
GPO: 1982-379-503


SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.
(CONSULT POSTMASTER FOR FEES)
1. The following service is requested (check one).
Show to whom and date delivered
Show to whom, date, and address of delivery
2 RESTRICTED DELIVERY
(The restricted delivery fee is charged in addition to the return receipt fee.)
TOTAL $
3. ARTICLE ADDRESSED TO:
4. TYPE OF SERVICE
REGISTERED
INSURED
CERTIFIED
C.O.D.
EXPRESS MAIL
ARTICLE NUMBER
(Always obtain signature of addressee or agent)
I have received the article described above.
SIGNATURE
Addressee
Authorized agent
5. DATE OF DELIVERY
POSTMARK
(may be on reverse side)
6. ADDRESSEE'S ADDRESS (Only if requested)
7. UNABLE TO DELIVER BECAUSE:
7a. EMPLOYEE'S INITIALS
RETURN RECEIPT
PS Form 3811, July 1982
GPO: 1982-379-503




SIGNATURE
Addressee
Authorized agent
DATE OF DELIVERY
POSTMARK
ADDRESS (Complete only if requested)
UNABLE TO DELIVER BECAUSE:
CLERK'S INITIALS
RETURN RECEIPT
CERTIFIED MAIL



PS Form 3811, July 1982

RETURN RECEIPT

☛ SENDER: Complete items 1, 2, 3, and 4.
Add your address in the "RETURN TO" space on reverse.

(CONSULT POSTMASTER FOR FEES)

1. The following service is requested (check one.)
   - ☐ Show to whom and date delivered ..... ¢
   - ☐ Show to whom, date, and address of delivery ..... ¢
2. ☐ RESTRICTED DELIVERY ..... ¢
   (The restricted delivery fee is charged in addition to the return receipt fee.)

TOTAL $ _____

3. ARTICLE ADDRESSED TO:

4. TYPE OF SERVICE: ARTICLE NUMBER
   - ☐ REGISTERED ☐ INSURED
   - ☒ CERTIFIED ☐ COD
   - ☐ EXPRESS MAIL

(Always obtain signature of addressee or agent)

I have received the article described above.

SIGNATURE ☒ Addressee ☐ Authorized agent

5. DATE OF DELIVERY: POSTMARK (may be on reverse side)

6. ADDRESSEE'S ADDRESS *(Only if requested)*

7. UNABLE TO DELIVER BECAUSE: 7a. EMPLOYEE'S INITIALS

☆ GPO: 1982-379-865

Midland Division
Exploration and Production

Conoco Inc.
10 Desta Drive West
Midland, TX 79705-4514
(915) 686-5400

September 10, 1990

Dear Interest Owner:

Conoco is requesting your approval for off-lease storage and surface commingling of production from our proposed Jenny COM Well No. 1 to be located at 1750' FNL and 660' FWL in Section 17, T-19S, R-25E, Eddy County, New Mexico.

The purpose of this off-lease storage and surface commingling is to reduce operating costs for storage and treating and thereby extend the economic life of this well. Without approval for utilizing the already existing battery facilities on an adjacent lease, separate facilities would have to be constructed just for this one well. This would increase operating costs and shorten the economic life of the well.

Because interests for the proposed well are different from those for the lease where the proposed storage facilities are located, oil from the Jenny COM No. 1 will be measured by positive displacement, temperature compensated metering equipment prior to surface commingling. Gas from the well will also be metered separately. This metering will ensure that all production from the Jenny COM No. 1 is equitably accounted for with no significant effect on your revenue.

We would appreciate your returning an approved copy of this letter to us by October 1, 1990 in the enclosed postage paid envelope. If we do not hear from you by that date, we will assume that you have no objections to our proposal and will request approval from the New Mexico Oil Conservation Division for this proposed off- lease storage and surface commingling.

Yours very truly,

Brent D. Meyers
Divisions Operations Manager

JWH/tm

APPROVED BY: _____ DATE: _____

Ray Hall Beck
1804 Booker
Artesia, NM 88210

Michael Carter
1021 Plaza Drive
Granbury, TX 76048

Sterling Mark Carter
P.O. Box 97
Winston, NM 87943

Madlyn Cauhape
Star Rt.
Hope, NM 88250

R. E. Chambers
2413 Clayton Lane
Wichita Falls, TX 76308

Lillie M. Yates
207 S 4th St.
Artesia, NM 88210

Robert B. Payne
3700 Renaissance TWR
1201 Elm Street
Dallas, TX 75270

Richard H. Landcheft Jr.
2313 Jim Dent
El Paso, TX 79936

Dr. Donald L. Zink
903 Naamans Creek Rd.
Chadds Ford, PA 19317

Scarlet Nunes
C/O Conoco
600 N. Dairy Ashford Rd.
Houston, TX 77252

Minerals Management Service
P.O. Box 5810
Denver, CO 80217

Yates Drilling Co.
207 S. 4th Street
Artesia, NM 88210

Yates Petroleum Corp.
105 S. 4th St.
Artesia, NM 88210

John A. Yates
207 S. 4th Street
Artesia, NM 88210

Northern Trust Company
11 Greenway Plaza
Suite 3025
Houston, TX 77046

Floyd Childress II
712 N. Lea St.
Roswell, NM 88201

James W. Childress
P.O. Box 209
Roswell, NM 88201

Florence M. Essman Curry
No. 1 Deerfield
Midland, TX 79701

James H. Essman
P.O. Box 302
Midland, TX

Ann F. Freeman
P.O. Box 4143
Wichita Falls, TX 76308

Claydesta National Bank
A/C Mike Roberts
P.O. Box 3090
Midland, TX 79702

Dr. Roy E. Glass
2303 Douglas Drive
San Angelo, TX 76904

Clarence F. Hinkle
P.O. Box 2002
Roswell, NM 88201

R. R. Hinkle Co. Inc.
1213 W. 3rd St.
Roswell, NM 88201

Claribel Y. Marshall
P.O. Box 1712
Roswell, NM 88202

Mayme Kaskie
7100 W. 13th Avenue
Apt 225
Lakewood, CO 80215

Robert B. Payne
3700 Renaissance TWR
1201 Elm Street
Dallas, TX 75270

Dorothy G. Kemper
P.O. Box 1105
Artesia, NM 88210

Lynn E. Desper
4601 Montano NW #7
Albuquerque, NM 87120

Cordella M. Kincaid
906 Hermosa Drive
Artesia, NM 88210

Hugh M. Kincaid
Swope Trust
Queen Route
Carlsbad, NM 88220

Eddie M. Mahfood
P.O. Box 896
Artesia, NM 88210

Marshall & Winston Inc.
P.O. Box 50880
Midland, TX 797100880

William J. McCaw
Box 376
Artesia, NM 88210

Gayle McDonald
2214 Chestnut St.
San Angelo, TX 76901

McQuiddy Communications & Energy Inc.
P.O. Box 2072
Roswell, NM 88201

Lillie M. Yates
Rep of the Est/Martin
207 S. Fourth
Artesia, NM 88210

W.T. Probandt
415 W. Wall Ste 1608
Midland, TX 79701

Quetico Superior Fon
2200 First Bank PL E
Minneapolis, MN 55402

Mary G. Riddle
P.O. Box 127
Artesia, NM 88210

A.M. Routh
Box 2004
Midland, TX 79702

Thelma May Schafer
906 Hermosa Drive
Artesia, NM 88210

Kenna Carter Scott
Rt. 3 Box 329
Big Spring, TX 79720

William Bryan Landsheft
Route 6
15880 S. Peoria
Bixby, OK 74008

Edward Wait
649 Madison St.
Albany, CA 94706

Yates Brothers A PRTNS
207 S. 4th St.
Artesia, NM 88210