



CONSERVATION DIVISION  
RECEIVED

607 10th Street, Suite 208  
Golden, Colorado 80401  
(303) 278-7505  
FAX (303) 278-7520

P.O. Box 338  
Ignacio, Colorado 81137  
(303) 563-4000  
FAX (303) 563-4116

APR 21 1995

State of New Mexico  
Energy, Minerals & Natural  
Resources Dept.  
Oil Conservation Division  
P.O. Box 2088  
Santa Fe, NM 87504

Attn: Mr. Michael Stogner

RE: Application for Non-Standard  
Proration Units  
Township 26 North, Range 13 West  
Sections 18 and 19  
San Juan County, New Mexico

Dear Mr. Stogner:

Per our letter dated March 16, 1995, regarding the captioned application, enclosed for your files and information please find copies of the certified return receipts and returned envelopes attached to a copy of our letter dated March 16, 1995, to the surrounding half section working interest owners and offset operators.

If you have any questions or need anything further, please do not hesitate to contact me at the Golden telephone number shown above.

Sincerely,

MARALEX RESOURCES, INC.

  
Jennifer A. Ritcher, CPL  
Land Manager

Enclosures



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Ignacio, Colorado 81137  
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FAX (303) 563-4116

March 16, 1995

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

TO: All Working Interest Owners and Operators  
(See Attached Address List)

RE: Application for Non-Standard  
Proration Unit  
T26N-R13W  
Sections 18 and 19  
San Juan County, New Mexico

TO WHOM IT MAY CONCERN:

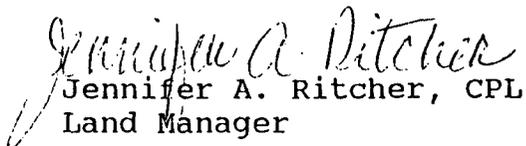
You are hereby notified that on March 16, 1995, Maralex Resources, Inc. filed an Application for Non-Standard Proration Unit with the New Mexico Oil Conservation Division for administrative approval of non-standard proration units for Sections 18 and 19, T26N-R13W, San Juan County, New Mexico (copy enclosed).

You are further notified that in the event no protest is received by the Director of the New Mexico Oil Conservation Division within thirty (30) days of receipt of this letter, the Director may grant administrative approval to the application.

If you have any questions or need anything further, please do not hesitate to contact me at the Golden address shown above.

Sincerely,

MARALEX RESOURCES, INC.

  
Jennifer A. Ritcher, CPL  
Land Manager

Enclosures

Section 18-T26N-R13W  
Operators and Offset Operators

Pendragon Resources L.P.  
1600 Broadway, Suite 1950  
Denver, CO 80202

Giant Exploration & Production Company  
Attn: Steven K. Smith  
P.O. Box 2810  
Farmington, NM 87499-2810

Texaco Exploration and Production  
P.O. Box 2100  
Denver, CO 80201

Robert L. Bayless  
P.O. Box 168  
Farmington, NM 87499

Union Pacific Resources Company  
Attn: Paul Dowden  
P.O. Box 7  
Fort Worth, TX 76101-0007

Key Production Company, Inc.  
Attn: David R. Dix  
1700 Lincoln St., Suite 2000  
Denver, CO 80203-4520

Vorcen Explorer, Inc.  
Attn: Darlene L. Adiska  
200 Westlake Park Blvd., Suite 800  
Houston, TX 77079-2653

Merrion Oil & Gas Corporation  
Attn: Crystal Williams  
P.O. Box 840  
Farmington, NM 87499

J. K. Edwards Associates, Inc.  
1401 17th Street, Suite 1401  
Denver, CO 80202

Bureau of Land Management  
New Mexico State Office  
P.O. Box 27115  
Santa Fe, NM 87502-7115

Apache Corporation  
1700 Lincoln, Suite 2000  
Denver, CO 80203-4520

Bureau of Indian Affairs  
Navajo Area Office  
P.O. Box M  
Window Rock, AZ 86515

Section 19-T26N-R13W  
Operators and Offset Operators

Edna Ione Hall Living Trust  
P.O. Box 1355  
Roswell, NM 88201

Bureau of Land Management  
State of New Mexico  
P.O. Box 27115  
Santa Fe, NM 87502-7115

R. P. Brewer Estate  
40 NE Loop 410  
San Antonio, TX 78216

Giant Exploration & Production Company  
Attn: Steven K. Smith  
P.O. Box 2810  
Farmington, NM 87499-2810

Robert L. Bayless  
P.O. Box 168  
Farmington, NM 87499

Union Pacific Resources Company  
Attn: Paul Dowden  
P.O. Box 7  
Fort Worth, TX 76101-0007

Key Production Company, Inc.  
Attn: David R. Dix  
1700 Lincoln St., Suite 2000  
Denver, CO 80203-4520

Norcen Explorer, Inc.  
Attn: Dianne L. Adiska  
200 Westlake Park Blvd., Suite 800  
Houston, TX 77079-2653

Frank O. Elliott Living Trust  
P.O. Box 1355  
Roswell, NM 88201

Larry Doehla  
150 Central Park South  
New York, NY

Rodney P. Calvin  
202 Patterson Building  
Denver, CO 80202

Natalie Bergman  
130 E. 63rd St.  
New York, NY

Arthur Sorensen  
1424 SW Ave.  
Sioux Falls, SD

Howard Hall  
Address Unknown

East Side Service  
Address Unknown

Miniza Prod. Co.  
P.O. Box 2810  
Farmington, NM 87499

R. P. Brewer III Estate  
200 Mercantile Nat. Bank Bldg.  
40 NE Loop 410  
San Antonio, TX 78216

India B. Chumney de Marigny  
40 NE Loop 410  
San Antonio, TX 78216

Winifred Chumney Meaden  
40 NE Loop 410  
San Antonio, TX 78216

Elizabeth H. Chumney  
40 NE Loop 410  
San Antonio, TX 78216

Ameritrust Texas NA, Trustee  
Fleming Rev. Trust Agreement  
P.O. Box 33400  
San Antonio, TX 78265

Robert and Edna Mae Bear  
308 N. Main  
Roswell, NM

W. T. Chumney Jr. Trust  
40 NE Loop 410  
San Antonio, TX 78216

MTrust Corp., Trustee for  
Elizabeth Hixon  
P.O. Box 900  
San Antonio, TX 78293

Universal Resources Corp.  
P.O. Box 11070  
Salt Lake City, UT 84147

Dugan Production Corp.  
P.O. Box 420  
Farmington, NM 87499

Brookhaven Oil Co.  
P.O. Box 644  
Albuquerque, NM

Barry Sue Douthit and W. L. Douthit  
405 Harvard Dr.  
Midland, TX

Bureau of Indian Affairs  
Navajo Area Office  
P.O. Box M  
Window Rock, AZ 86515

Betty Brewer Chumney  
200 Mercantile Nat. Bank Bldg.  
40 NE Loop 410  
San Antonio, TX 78216



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March 16, 1995

CERTIFIED MAIL - RETURN RECEIPT REQUESTED

State of New Mexico  
Energy, Minerals & Natural  
Resources Dept.  
Oil Conservation Division  
P.O. Box 2088  
Santa Fe, NM 87504

Attn: Mr. Michael Stogner

RE: Application for Non-Standard  
Proration Units  
Township 26 North, Range 13 West  
Sections 18 and 19  
San Juan County, New Mexico

Dear Mr. Stogner:

Maralex Resources, Inc. (Maralex) hereby requests administrative approval for four (4) non-standard proration units in Sections 18 and 19, T26N-R13W, San Juan County, New Mexico. Maralex requests the designated proration units for its proposed four (4) Fruitland coal wells in Sections 18 and 19, T26N-R13W be as follows:

The N/2 of Sections 18 and 19 be Lots 1, 2, 5, 6, and the NE/4 (320 acres). The S/2 of Sections 18 and 19 be Lots 7, 8, 11, 12 and the SE/4 (320 acres).

The non-standard unit and the unorthodox size is necessitated by a variation in the legal subdivision of the U. S. Public Land Surveys (see attached copy of OG plat).

Attached is a list of the names of the affected offset operators and all operators owning interests in Sections 18 and 19, T26N-R13W. These operators have been sent a copy of this application by certified mail and advised to notify the Commission of any objections within thirty days.

If you have any questions or need anything further, please do not hesitate to contact me at the Golden telephone number shown above.

Sincerely,

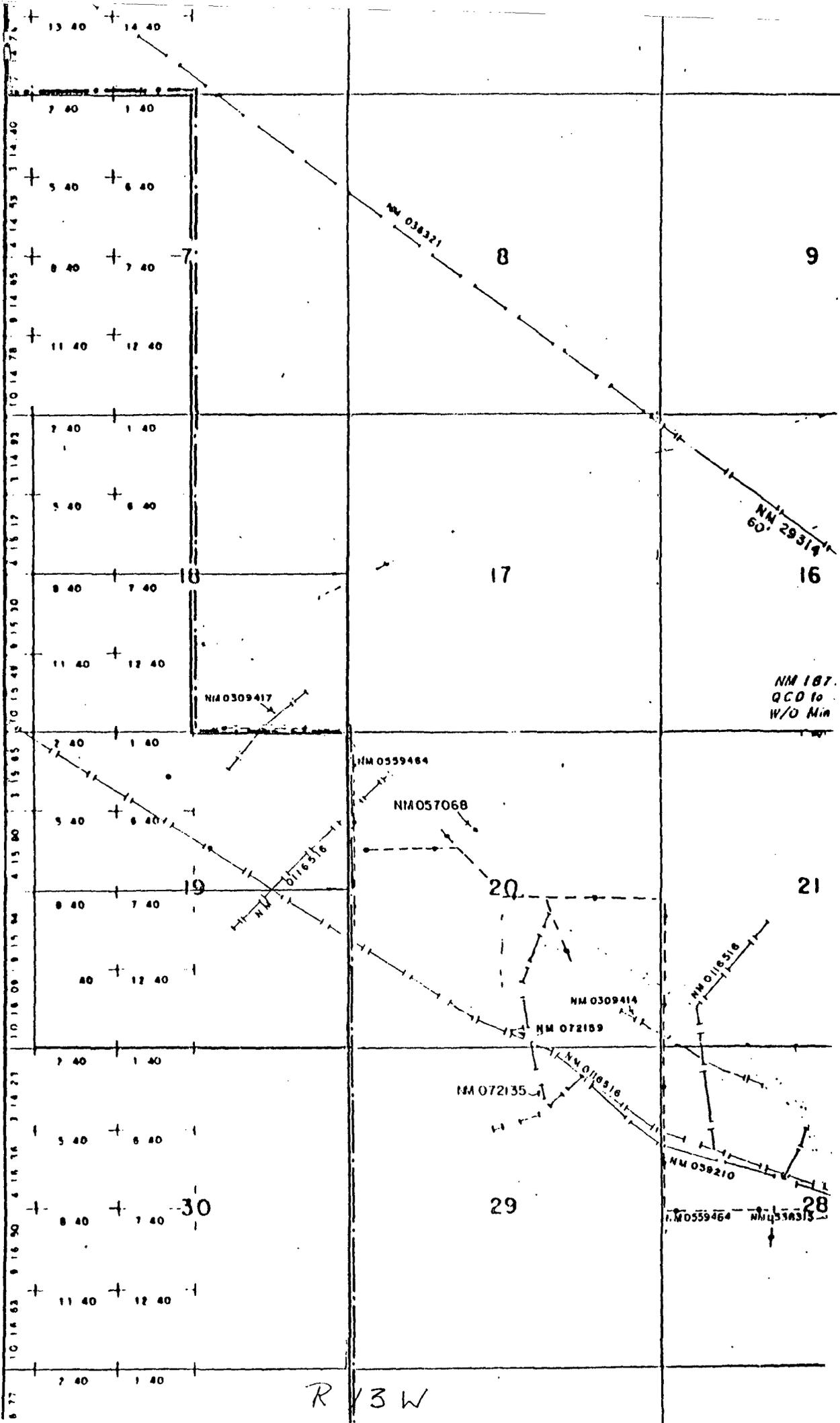
MARALEX RESOURCES, INC.

*Jennifer A. Ritcher*

Jennifer A. Ritcher, CPL  
Land Manager

Enclosures

T  
26  
N



Is your RETURN ADDRESS completed on the reverse side?

- SENDER:**
- Complete items 1 and/or 2 for additional services.
  - Complete items 3, and 4a & b.
  - Print your name and address on the reverse of this form so that we can return this card to you.
  - Attach this form to the front of the mailpiece, or on the back if space does not permit.
  - Write "Return Receipt Requested" on the mailpiece below the article number.
  - The Return Receipt will show to whom the article was delivered and the date delivered.

- I also wish to receive the following services (for an extra fee):
- Addressee's Address
  - Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

State of New Mexico  
 Energy, Minerals & Natural Resources Department  
 Oil Conservation Division  
 Attn: Mr. Michael Stogner  
 P.O. Box 2088  
 Santa Fe, NM 87504

4a. Article Number

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
 3/24

5. Signature (Addressee)  
*[Signature]* 3/24/95

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

- SENDER:**
- Complete items 1 and/or 2 for additional services.
  - Complete items 3, and 4a & b.
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- I also wish to receive the following services (for an extra fee):
- Addressee's Address
  - Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

Bureau of Indian Affairs  
 Navajo Area Office  
 Natural Resources  
 P.O. Box 1060, Mail Code 400  
 Gallup, NM 87305-1060

4a. Article Number *Remail NS, Sec*  
 P159-437-095 18+19

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
 3-7-95

5. Signature (Addressee)  
*[Signature]*

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

- SENDER:**
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- I also wish to receive the following services (for an extra fee):
- Addressee's Address
  - Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

W. T. Chumney Jr. Trust  
 40 NE Loop 410  
 San Antonio, TX 78216

4a. Article Number *NS for Sec*  
 P159-437-084 18+19

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
 3-20-95

5. Signature (Addressee)  
*[Signature]*

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Edna Ione Hall Living Trust  
P.O. Box 1355  
Roswell, NM 88201

4a. Article Number *US Secs 18*  
*P-159-437-060 19*

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*1995*

5. Signature (Addressee)

6. Signature (Agent)  
*W. Harpone*

8. Addressee's Address (Only if requested and fee is paid)  
*88201*

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
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I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Frank O. Elliott Living Trust  
P.O. Box 1355  
Roswell, NM 88201

4a. Article Number  
*P159-437-071*

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*201*

5. Signature (Addressee)

6. Signature (Agent)  
*W. Harpone*

8. Addressee's Address (Only if requested and fee is paid)  
*88201*

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Universal Resources Corp.  
P.O. Box 11070  
Salt Lake City, UT 84147

4a. Article Number *US for Secs*  
*P159-437-086 18419*

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-28-95*

5. Signature (Addressee)

6. Signature (Agent)  
*W. Harpone*

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

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Bureau of Land Management  
New Mexico State Office  
P.O. Box 27115  
Santa Fe, NM 87502-7115

4a. Article Number *NS for Seco.*  
**P159-437-091 18419**

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
**MAR 20 1995**

5. Signature (Addressee)

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

6. Signature (Agent)  
*Touffler*

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Dugan Production Corp.  
P.O. Box 420  
Farmington, NM 87499

4a. Article Number *NS for Seco*  
**P159-437-087 18419**

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
**3/20/95**

5. Signature (Addressee)

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

6. Signature (Agent)  
*[Signature]*

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Merrion Oil & Gas Corporation  
Attn: Crystal Williams  
P.O. Box 840  
Farmington, NM 87499

4a. Article Number *NS for Seco*  
**P159-437-069 18419**

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

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

6. Signature (Agent)  
*Mark Barnes*

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

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I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Betty Brewer Chumney  
 200 Mercantile Nat. Bank Bldg.  
 40 NE Loop 410  
 San Antonio, TX 78216

4a. Article Number *NS for Sec 2*  
*P159-436-942 18419*

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-20-95*

5. Signature (Addressee)

*Cari Williamson*

6. Signature (Agent)

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

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714

**DOMESTIC RETURN RECEIPT**

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**SENDER:**

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1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Union Pacific Resources Company  
 Attn: Paul Dowden  
 P.O. Box 7  
 Fort Worth, TX 76101-0007

4a. Article Number *NS for Sec 2*  
*P-159-437-066 18419*

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*MAR 20 1995*

5. Signature (Addressee)

*Paul Dowden*

6. Signature (Agent)

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

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714

**DOMESTIC RETURN RECEIPT**

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I also wish to receive the following services (for an extra fee):

1.  Addressee's Address
2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Elizabeth H. Chumney  
 40 NE Loop 410  
 San Antonio, TX 78216

4a. Article Number *NS for Sec 2*  
*P159-437-080 18419*

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-20-95*

5. Signature (Addressee)

*Cari Williamson*

6. Signature (Agent)

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

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714

**DOMESTIC RETURN RECEIPT**

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I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

India B. Chumney de Marigny  
40 NE Loop 410  
San Antonio, TX 78216

4a. Article Number *NS for Seco*  
*P159-437-078 18+19*

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-20-95*

5. Signature (Addressee)  
*Cari Williamson*

6. Signature (Agent)

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

Thank you for using Return Receipt Service.

your RETURN ADDRESS completed on the reverse side?

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- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

R. P. Brewer Estate  
40 NE Loop 410  
San Antonio, TX 78216

4a. Article Number *NS Seco 18*  
*P-159-437-062 19*

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-20-95*

5. Signature (Addressee)  
*Cari Williamson*

6. Signature (Agent)

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

Thank you for using Return Receipt Service.

your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Winifred Chumney Meaden  
40 NE Loop 410  
San Antonio, TX 78216

4a. Article Number *NS for Seco*  
*P159-437-079 18+19*

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-20-95*

5. Signature (Addressee)  
*Cari Williamson*

6. Signature (Agent)

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

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Pendragon Resources L.P.  
1600 Broadway, Suite 1950  
Denver, CO 80202

4a. Article Number *NS Seco 184*  
*P-159-437-061 19*

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

R. P. Brewer III Estate  
200 Mercantile Nat. Bank Bldg.  
40 NE Loop 410  
San Antonio, TX 78216

4a. Article Number *NS for Seco*  
*P159-437-077 18419*

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-20-95*

5. Signature (Addressee)  
*Nara Williamson*

6. Signature (Agent)

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

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1.  Addressee's Address

2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Robert L. Bayless  
P.O. Box 168  
Farmington, NM 87499

4a. Article Number  
*P159-437-065*

4b. Service Type

Registered  Insured

Certified  COD

Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3/20/95*

5. Signature (Addressee)

6. Signature (Agent)

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

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ciniza Prod. Co.  
P.O. Box 2810  
Farmington, NM 87499

4a. Article Number *NS for Seco*  
**P159-437-076 18+9**

- 4b. Service Type
- Registered  Insured
  - Certified

- Express Mail  Return Receipt for Merchandise

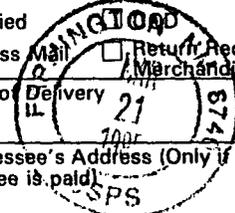
7. Date of Delivery **21**

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

5. Signature (Addressee)

6. Signature (Agent)

*Reilly Rowe*



Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Ameritrust Texas NA, Trustee  
Fleming Rev. Trust Agreement  
P.O. Box 33400  
San Antonio, TX 78265

4a. Article Number *NS for Seco*  
**P159-437-081 18+19**

- 4b. Service Type
- Registered  Insured
  - Certified  COD

- Express Mail  Return Receipt for Merchandise

7. Date of Delivery **3-21-95**

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

5. Signature (Addressee)

6. Signature (Agent)

*W. Shreeve*

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1.  Addressee's Address
- 2.  Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Norcen Explorer, Inc.  
Attn: Dianne L. Adiska  
200 Westlake Park Blvd., Suite 800  
Houston, TX 77079-2653

4a. Article Number *NS for Seco*  
**P159-437-068 18+19**

- 4b. Service Type
- Registered  Insured
  - Certified  COD

- Express Mail  Return Receipt for Merchandise

7. Date of Delivery **3/20/95**

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

5. Signature (Addressee)

6. Signature (Agent)

*J. Wagner*

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
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- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MTrust Corp., Trustee for  
Elizabeth Hixon  
P.O. Box 900  
San Antonio, TX 78293

4a. Article Number *NS for Seco*  
**P159-437-085** 18419

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

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

6. Signature (Agent)  
*[Signature]*

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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- Complete items 3, and 4a & b.
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- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Apache Corporation  
1700 Lincoln, Suite 2000  
Denver, CO 80203-4520

4a. Article Number *NS for Seco*  
**P159-437-083** 18419

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3/22*

5. Signature (Addressee)  
*[Signature]*

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

6. Signature (Agent)  
*[Signature]*

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Giant Exploration & Production Company  
Attn: Steven K. Smith  
P.O. Box 2810  
Farmington, NM 87499-2810

4a. Article Number  
**P159-437-063**

4b. Service Type

Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3/22*

5. Signature (Addressee)

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

6. Signature (Agent)  
*[Signature]*

PS Form 3811, December 1991 \*U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

J. K. Edwards Associates, Inc.  
1401 17th Street, Suite 1401  
Denver, CO 80202

4a. Article Number *NS for Seco.*  
**P159-437-070 18x19**

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)  
*Donna Carpenter*

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Texaco Exploration and Production  
P.O. Box 2100  
Denver, CO 80201

4a. Article Number *NS Seco 18*  
**P-159-437-064 x19**

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-20*

5. Signature (Addressee)

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

6. Signature (Agent)  
*BTW*

PS Form 3811, December 1991 ☆U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

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- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Key Production Company, Inc.  
Attn: David R. Dix  
1700 Lincoln St., Suite 2000  
Denver, CO 80203-4520

4a. Article Number *NS for Seco.*  
**P159-437-067 18x19**

4b. Service Type  
 Registered  Insured  
 Certified  COD  
 Express Mail  Return Receipt for Merchandise

7. Date of Delivery  
*3-20*

5. Signature (Addressee)

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

6. Signature (Agent)  
*Buswood*

PS Form 3811, December 1991 ☆U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

**MARALEX**  
Resources, Inc.

607 10th Street, Suite 208  
Golden, Colorado 80401

**CERTIFIED**

P 159 437 090

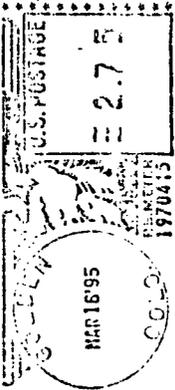
**MAIL**

Return Receipt Requested

*Handwritten:* Unclaimed  
Addressee not known  
Insufficient address  
No such street  
No such office in state  
Do not return to this office

~~Bureau of Indian Affairs  
Navajo Area Office  
P.O. Box M  
Window Rock, AZ 86515~~

*Handwritten:* Natural Resources  
P.O. Box 1060  
Mail Code 400  
Gallup, NM 87305-1060



**MARALEX**  
Resources, Inc.

607 10th Street, Suite 208  
Golden, Colorado 80401

**CERTIFIED**

P 159 437 082

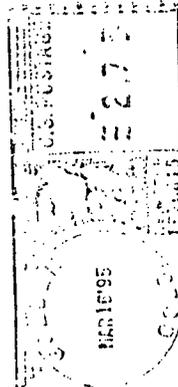
**MAIL**

Return Receipt Requested

*Handwritten:* UNCLAIMED  
ADDRESS UNKNOWN  
NO SUCH STREET  
NO SUCH OFFICE IN STATE  
DO NOT RETURN TO THIS OFFICE

~~Bob and Edna Mae Bear  
1308 N. Main  
Roswell, NM~~

*Handwritten:* N S H  
C 17  
M 17



~~Handwritten signature~~  
*Handwritten:* TIM

**MARALEX**  
Resources, Inc.

607 10th Street, Suite 208  
Golden, Colorado 80401

P 159 437 075

**MAIL**

Return Receipt Requested

Ruth Sorensen  
2424 SW Ave.  
StouxFalls, SD

**RETURNED TO SENDER**  
**REASON CHECKED**  
Unclaimed  
Attempted Not Known  
Insufficient Address  
No such street number  
No such office in state  
Do not remail in this envelope

**STOUX FALLS, SD MAIL STATION**  
MAR 19 1995  
1595 N. 15th St.

**GOLDEN**  
MAR 18 1995  
U.S. POSTAGE  
\$2.75  
POST OFFICE  
1970415

**MARALEX**  
Resources, Inc.

607 10th Street, Suite 208  
Golden, Colorado 80401

P 159 437 089

**MAIL**

Return Receipt Requested

Mary Sue Douthit and W. L. Douthit  
1405 Harvard Dr.  
Midland, TX

**RETURNED TO SENDER**

**ATTEMPTED, NOT KNOWN**

**GOLDEN**  
MAR 18 1995  
U.S. POSTAGE  
\$2.75  
POST OFFICE  
1970415

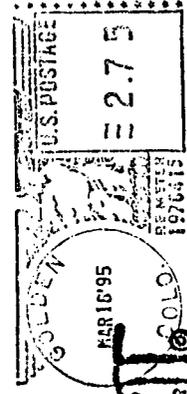
*APR 2*

**MARALEX**  
Resources, Inc.

607 10th Street, Suite 208  
Golden, Colorado 80401

**CERTIFIED MAIL**  
P 159 437 074

Return Receipt Requested



RETURNED TO SENDER  
 VACANT  
 NO SUCH FAX ATTEMPTED NOT KNOWN  
 TEMPORARILY AWAY  
 NO MAIL RECEIPTABLE  
2100

Natalie Bergman  
130 E. 63rd St.  
New York, NY

*1021*

**MARALEX**  
Resources, Inc.

607 10th Street, Suite 208  
Golden, Colorado 80401

**CERTIFIED MAIL**  
P 159 437 085

Return Receipt Requested



RETURNED TO SENDER  
*Attempted*  
*Unknow*

~~MTrust Corp., Trustee for  
Elizabeth Hixon  
P.O. Box 906  
San Antonio TX 78293~~

~~NOT APPROPT~~

*[Handwritten signatures]*

100% Recycled Paper

**MARALEX**  
Resources, Inc.

607 10th Street, Suite 208  
Golden, Colorado 80401

**CERTIFIED MAIL**  
P 159 437 072

RETURNED TO SENDER  
ATTEMPTED. NOT KNOWN  
NO SUCH NUMBER  
REFUSED

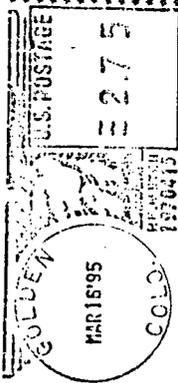
Return Receipt Requested

*No such NAME*

Harry Doehla  
150 Central Park South  
New York, NY

*100-1*

*RTG # CARR. INTS*



**MARALEX**  
Resources, Inc.

607 10th Street, Suite 208  
Golden, Colorado 80401

**CERTIFIED MAIL**  
P 159 437 088

Return Receipt Requested

Brookhaven Oil Co.  
P.O. Box 644  
Albuquerque, NM

RETURNED TO SENDER  
ATTEMPTED - NOT KNOWN

*UNKNOWN*

*3/21*  
*3/28*  
*4/5*





607 10th Street, Suite 208  
Golden, Colorado 80401

**CERTIFIED**  
P 159 437 073  
**MAIL**

Return Receipt Requested

Rodney P. Calvin  
202 Patterson Building  
Denver, CO 80202

