

| | | | | | |
|---------|----------|----------|-----------|------|---------|
| DATE IN | SUSPENSE | ENGINEER | LOGGED IN | TYPE | APP NO. |
|---------|----------|----------|-----------|------|---------|

ABOVE THIS LINE FOR DIVISION USE ONLY

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



ADMINISTRATIVE APPLICATION CHECKLIST

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

Application Acronyms:

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

[1] TYPE OF APPLICATION - Check Those Which Apply for [A]

- [A] Location - Spacing Unit - Simultaneous Dedication**
☐ NSL ☐ NSP ☐ SD

Check One Only for [B] or [C]

- [B] Commingling - Storage - Measurement**
☐ DHC ☐ CTB ☐ PLC ☐ PC ☐ OLS ☐ OLM

- [C] Injection - Disposal - Pressure Increase - Enhanced Oil Recovery**
☐ WFX ☐ PMX ☒ SWD ☐ IPI ☐ EOR ☐ PPR

- [D] Other: Specify _____**

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NOV 17 2005

OCU-ARTESIA

[2] NOTIFICATION REQUIRED TO: - Check Those Which Apply, or Does Not Apply

- [A] ☐ Working, Royalty or Overriding Royalty Interest Owners**
- [B] ☒ Offset Operators, ~~Leaseholders~~ or Surface Owner**
- [C] ☒ Application is One Which Requires Published Legal Notice**
- [D] ☒ Notification and/or Concurrent Approval by BLM or ~~SLO~~**
U.S. Bureau of Land Management - Commissioner of Public Lands, State Land Office
- [E] ☒ For all of the above, Proof of Notification or Publication is Attached, and/or,**
- [F] ☐ Waivers are Attached**

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

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

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

David Stewart
 Print or Type Name

[Signature]
 Signature

SE. Reg. Analyst 11/16/05
 Title Date

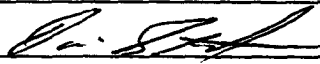
Accepted for record
NMOCD

[Signature]

david_stewart@orky.com
 e-mail Address

NOV 17 2005

APPLICATION FOR AUTHORIZATION TO INJECT WATER

- I. PURPOSE: Secondary Recovery Pressure Maintenance X Disposal Storage
Application qualifies for administrative approval? X Yes No
- II. OPERATOR: OXY USA WTP Limited Partnership - 192463
ADDRESS: P.O. Box 50250 Midland, TX 79710-0250
CONTACT PARTY: David Stewart PHONE: 432-685-5717
- III. WELL DATA: Complete the data required on the reverse side of this form for each well proposed for injection.
Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? Yes X No
If yes, give the Division order number authorizing the project: _____
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and,
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate geologic data on the injection zone including appropriate lithologic detail, geologic name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such sources known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- *X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division, they need not be resubmitted).
- *XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground sources of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification: I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.
- NAME: David Stewart TITLE: Sr. Regulatory Analyst
SIGNATURE:  DATE: 11/14/05
E-MAIL ADDRESS: david_stewart@oxy.com
- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be resubmitted. Please show the date and circumstances of the earlier submittal: _____

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 the 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, 1220 South St. Francis Dr., Santa Fe, New Mexico 87505, 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.

INJECTION WELL DATA SHEET

OPERATOR: OXY USA WTP Limited Partnership - 192463WELL NAME & NUMBER: Righthand Canyon 35 Federal #7WELL LOCATION: 1975 FSL 2405 FWL K (NESW) 35 21S 24EFOOTAGE LOCATION UNIT LETTER SECTION TOWNSHIP RANGEWELLBORE SCHEMATICWELL CONSTRUCTION DATA
Surface CasingOXY USA WTP LP
Righthand Canyon 35 Federal #7
1975 FSL 2405 FWL (NESW) 35-21S-24E
API No. 30-015-17-1/2" hole @ 1700'
13-3/8" csg @ 1700'
w/1000psi TOC-Surf-CircHole Size: 17-1/2" Casing Size: 13-3/8" @ 1700'Cemented with: 1000 SK. or ft³Top of Cement: Surface Method Determined: CirculatedIntermediate CasingHole Size: Casing Size: Cemented with: SK. or ft³Top of Cement: Method Determined: Production CasingHole Size: 12-1/4" Casing Size: 8-5/8" @ 11000'Cemented with: 1400 SK. or ft³Top of Cement: +/-6900' Method Determined: Temp SvyTotal Depth: 12100'Injection Interval - Open Hole11000 feet to 12100'12-1/4" hole @ 11000'
8-5/8" csg @ 11000'
w/1400psi TOC-8900'-Gate7" FJ Tubing @ 10800'
7" PC Baker Log-Set @ 10800'

7-7/8" hole @ 11000-12100'

TD-12100'

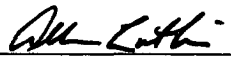
(Perforated or Open Hole; indicate which)

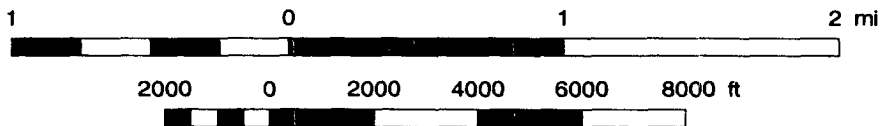
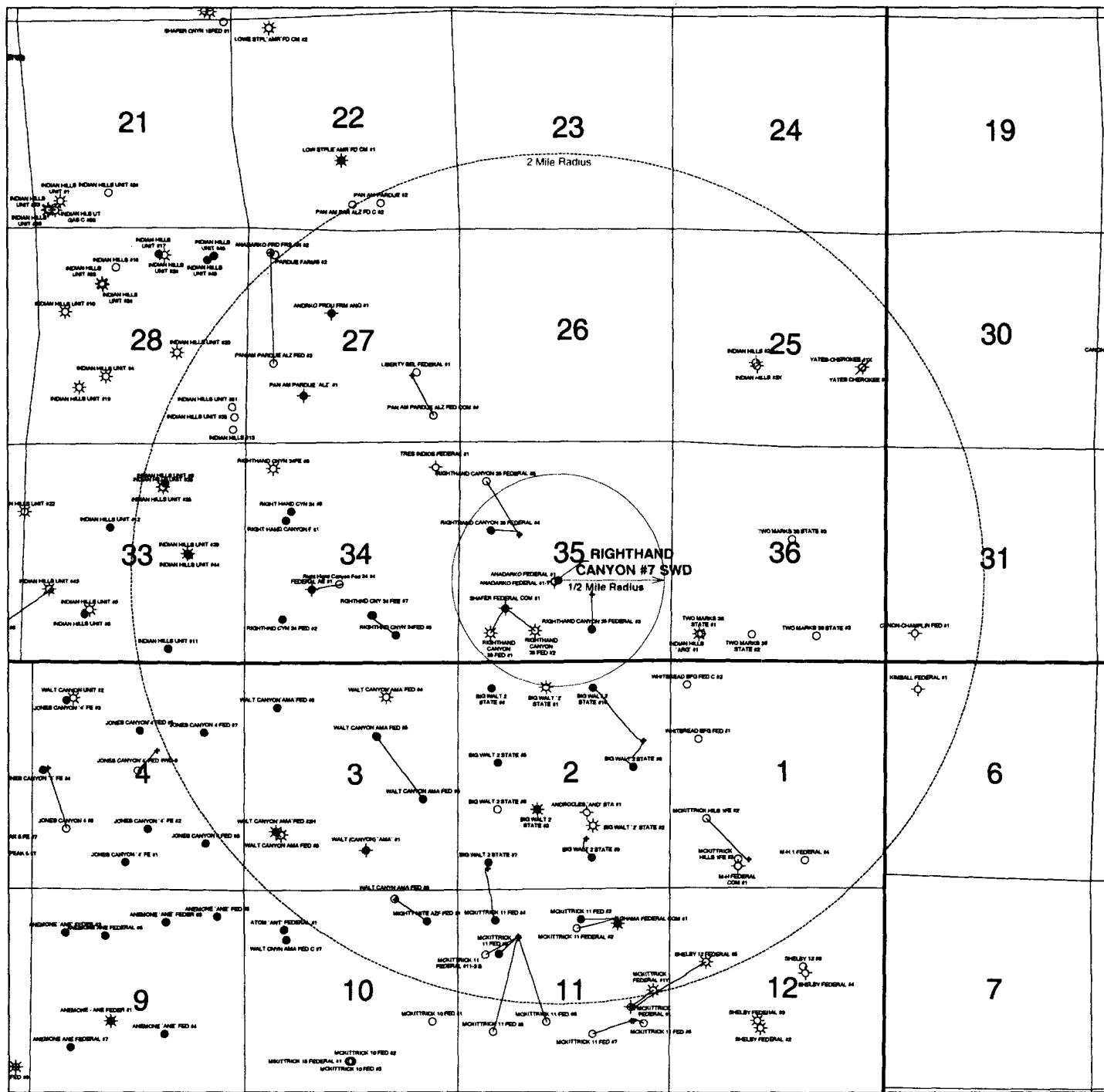
Additional Data

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

5. Give the name and depths of any oil or gas zones underlying or overlying the proposed injection zone in this area: Morrow-9700' Cisco/Canyon - 7900'

ATTACHMENT C-108
OXY USA WTP LP
Righthand Canyon 35 Federal #7
Sec 35 T21S R24E

- V. See Attachment A
- VI. No wells within the ¼ mile Area of Review penetrate the proposed Devonian disposal interval. See Attachment B
- VII. Proposed Operations
1. Injection Rate - Average-30000BWPD - Maximum-40000BWPD
 2. Closed System
 3. Injection Pressure - Average-1500psi - Maximum-2200psi
 4. See Attachment C for copy of Cisco/Canyon Water Analysis
 5. See Attachment D for copy of Devonian Water Analysis
- VIII. Injection Zone
- The proposed disposal interval consists of fractured, vuggy dolomite with 3-14% porosity. The gross depth interval is +/- 1000' at a depth of 11070' MD, 7125' TVDSS. There are no prospective commercial oil or gas bearing zones within this interval in this borehole or in any boreholes within a ¼ mile radius of this proposed well. Specifically, the proposed intervals for disposal are as follows:
- Devonian: 11070 - 12100' MD +/-1000'
7125-8155' TVDSS
- Fresh Water Zones
- The base of near surface aquifer is estimated to be approximately 650' in the Grayburg formation. No freshwater zones exist at or below the proposed disposal interval.
- IX. 30000 gallons acid
- X. Not available, this well has not been drilled yet and will not be drilled until this application is approved.
- XI. No fresh water wells within one mile of the proposed location. The nearest fresh water well is located 1.4 miles northeast of the proposed location.
- XII. 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 sources of drinking water.
-  11/16/05
Allen Luthi - Staff Geologist
- XIII. See attached for service list. A copy of this application has been sent certified mail, return receipt requested, to all parties on the service list. The legal advertisement has been requested and proof of publication will be forwarded as soon as it is received.



| | |
|--|-----------------------------|
| OXY | |
| Proposed Righthand Canyon #7 SWD | |
| Devonian Salt Water Disposal Well | |
| Author: Allen Luthi | Date: 29 September, 2005 |

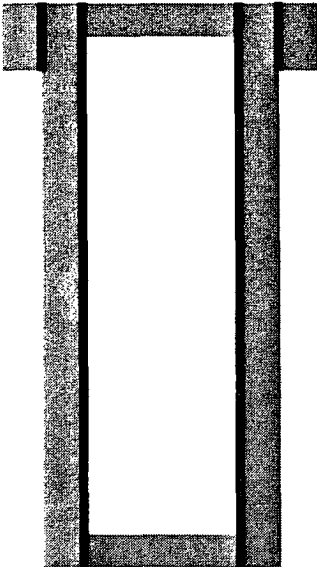
C-108 - ATTACHMENT B
RIGHTHAND CANYON 35 FED #6
AREA OF REVIEW

| OPERATOR | LEASE | WELL NO. | PLAT | LOCATION | DATE DRILLED | TD | PERFS | CASING-CEMENT | STATUS | API NO. |
|-------------------|---------------|----------|------|----------------|--------------|-------|------------|--|--------|---------|
| *William Barnhill | Anadarko Rd | 1 | 1 | 1980S 2310W | 1/26/79 | 190' | --- | --- | JCA | 22774 |
| | | | | 35-21-24 | | | | | | |
| | | | | | | | | | | |
| *Harvey Yates Co. | Anadarko Rd | 1Y | 2 | 1960S 2310W | 3/14/79 | 7994' | 7928-7990' | 13-3/8" @ 180'w/180sx 8-5/8" @ 2600'w/1200sx | DeA | 22881 |
| | | | | 35-21-24 | | | | 4-1/2" @ 7994'w/350sx | | |
| | | | | | | | | | | |
| *OXY USA WTP LP | Big Walt 2 St | 1 | 3 | 660N 2130W | 7/1/79 | 7975' | 7902-7914' | 13-3/8" @ 200'w/250sx-TOC-Surf-Circ 8-5/8" @ 1600'w/950sx-TOC-Surf-Circ 4-1/2" @ 7994'w/300sx-TOC-6243'-Calc | TA | 22947 |
| | | | | 2-22-24 | 8/27/93 | | | | | |
| | | | | | | | | | | |
| *OXY USA WTP LP | Rightland | 1 | 4 | SL-1328S 1160W | 6/21/89 | 8500' | 7834-7860' | 13-3/8" @ 367'w/400sx-TOC-Surf-Circ 9-5/8" @ 2469'w/1000sx-TOC-Surf-Circ 7" @ 8504'w/590sx-TOC-4579'-Calc | Act | 26126 |
| | Canyon 35 Fee | | | BHL-737S 747W | 8/6/03 | | | | | |
| | | | | 35-21-24 | | | | | | |
| | | | | | | | | | | |
| *OXY USA WTP LP | Rightland | 2 | 5 | SL-1347S 1177W | 10/21/03 | 8592' | 7894-8043' | 9-5/8" @ 1620'w/500sx-TOC-Surf-Circ 7" @ 8592'w/550sx-TOC-4933'-Calc | Act | 32827 |
| | Canyon 35 Fee | | | BHL-660S 1980W | | | | | | |
| | | | | 35-21-24 | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| *OXY USA WTP LP | Rightland | 3 | 6 | SL-1650S 1980E | 3/2/04 | 8684' | 8030-8088' | 9-5/8" @ 1595'w/1150sx-TOC-Surf-Circ 7" @ 8684'w/1510sx-TOC-Surf-Circ | Act | 33217 |
| | Canyon 35 Rd | | | BHL-912S 1987E | | | | | | |
| | | | | 35-21-24 | | | | | | |
| | | | | | | | | | | |
| *OXY USA WTP LP | Rightland | 4 | 7 | SL-2310N 1475W | 3/29/04 | 8523' | 7837-8050' | 9-5/8" @ 1590'w/1150sx-TOC-Surf-Circ 7" @ 8518'w/1600sx-TOC-Surf-Circ | Act | 33290 |
| | Canyon 35 Rd | | | BHL-2222N 780W | | | | | | |
| | | | | 35-21-24 | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |

* WELLBORE DOES NOT PENETRATE PROPOSED INJECTION INTERVAL

Harvey Yates Co.
Anadarko Federal #1y
API No. 30-015-22881
P&A - 11/15/79

25sx @ Surface



17-1/2" hole @ 180'
13-3/8" csg @ 180'
w/180sx-TOC-Surf-Circ

35sx @ 2568-2468'

12-1/4" hole @ 2600'
8-5/8" csg @ 2600'
w/1200sx-TOC-Surf-Circ

35sx @ 3716-3616'

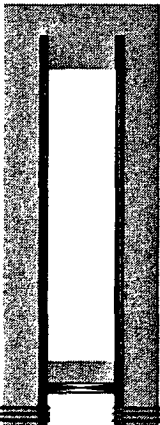


35sx @ 4900-4800'



55sx @ 6375-6225'

Cut & Pull 4-1/2" csg @ 6300'



7-7/8" hole @ 7994"
4-1/2" csg @ 7994"
w/350sx-TOC-6300'-Calc

CIBP @ 7800' w/ 35' cmt

Dev Perfs @ 7928-7990'

TD-7994"

FW01W145

B.I. SERVICES COMPANY **WATER ANALYSIS #FW01W145**

ARTESIA, NM LAB

Sec 2 T22S R24E

Well File
C2, D4

GENERAL INFORMATION

| | |
|------------------------------|-------------------------|
| OPERATOR: NEARBURG PRODUCING | DEPTH: 8100+/- |
| WELL: BIG WALT 2 ST. #3 | DATE SAMPLED: 01/21/97 |
| FIELD: | DATE RECEIVED: 01/21/97 |
| SUBMITTED BY: MATT LEE | COUNTY: EDDY STATE: NM |
| WORKED BY: JAIME LOPEZ | FORMATION: CC. |
| PHONE NUMBER: FAX 8748-1125 | (GISCO-CANYON) |

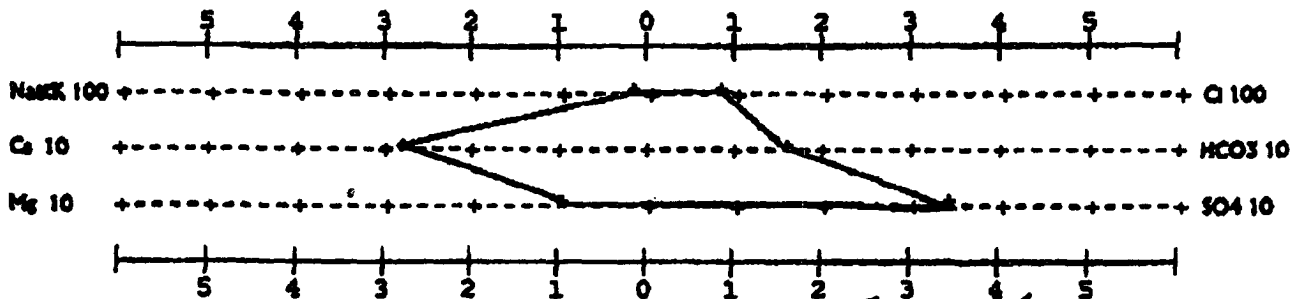
SAMPLE DESCRIPTION

PHYSICAL AND CHEMICAL DETERMINATIONS

| | | | | |
|---------------------------|-----------|------------------------|-------|------|
| SPECIFIC GRAVITY: | 1.005 | @ 74°F | PH: | 7.07 |
| RESISTIVITY (CALCULATED): | 0.735 | ohms @ 75°F | | |
| IRON (FE++) : | 1 ppm | SULFATE: | 1,592 | ppm |
| CALCIUM: | 566 ppm | TOTAL HARDNESS | 1,892 | ppm |
| MAGNESIUM: | 116 ppm | BICARBONATE: | 935 | ppm |
| CHLORIDE: | 2,488 ppm | SODIUM CHLORIDE (Calc) | 4,093 | ppm |
| SODIUM+POTASS: | 245 ppm | TOT. DISSOLVED SOLIDS: | 7,152 | ppm |
| IODINE: | | POTASSIUM CHLORIDE: | | |

REMARKS

STIFF TYPE PLOT (IN MEQ/L)



ANALYST

JAIME LOPEZ



Water Analysis

Date: 08-Jan-04

Devonion - Sec 14-T22S R24E

2700 West County Road, Hobbs NM 88240

Phone (505) 392-5556 Fax (505) 392-7307

30-015-21010

Analyzed For

| Company | Well Name | County | State |
|---------------------|-------------------------|--------|------------|
| Nearburg Production | McKittrick 14 Fed SWD 1 | Eddy | New Mexico |

Sample Source

Swab Sample

Sample

Formation

Depth

11,500

Specific Gravity

1.004

SG @ 60 °F

1.006

pH

6.95

Sulfides

Temperature (°F)

68

Reducing Agents

Cations

| | | | | |
|--------------------|---------|-------|--------|-------|
| Sodium (Calc) | in Mg/L | 5,491 | in PPM | 5,461 |
| Calcium | in Mg/L | 1,200 | in PPM | 1,193 |
| Magnesium | in Mg/L | 384 | in PPM | 382 |
| Soluble Iron (FE2) | in Mg/L | 500.0 | in PPM | 497 |

Anions

| | | | | |
|--------------|---------|--------|--------|--------|
| Chlorides | in Mg/L | 12,000 | in PPM | 11,933 |
| Sulfates | in Mg/L | 400 | in PPM | 398 |
| Bicarbonates | in Mg/L | 24 | in PPM | 24 |

| | | | | |
|-------------------------------|---------|--------|--------|--------|
| Total Hardness (as CaCO3) | in Mg/L | 4,600 | in PPM | 4,574 |
| Total Dissolved Solids (Calc) | in Mg/L | 20,000 | in PPM | 19,888 |
| Equivalent NaCl Concentration | in Mg/L | 19,497 | in PPM | 19,388 |

Scaling Tendencies

Attachment C-108 - Service List
OXY USA WTP LP
Righthand Canyon 35 Federal #7
Sec 35 T218 R34

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

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

Offset Operators Within ¼ Mile:

OXY USA WTP LP
P.O. Box 50250
Midland, TX 79710-0250

Surface Owner:

United States Department of the Interior
Bureau of Land Management
Roswell District Office
2909 West Second Street
Roswell, New Mexico 88201

Surface Lessee:

Stacey Biebelle
646 Queen Route
Carlsbad, NM 88220.

Affidavit of Publication

State of New Mexico,
County of Eddy, ss.

Dawn Higgins, being first duly sworn, on oath says:

That she is Business Manager of the Carlsbad Current-Argus, a newspaper published daily at the City of Carlsbad, in said county of Eddy, state of New Mexico and of general paid circulation in said county; that the same is a duly qualified newspaper under the laws of the State wherein legal notices and advertisements may be published; that the printed notice attached hereto was published in the regular and entire edition of said newspaper and not in supplement thereof on the date as follows, to wit:

| | |
|------------|------|
| November 4 | 2005 |
| _____ | 2005 |
| _____ | 2005 |
| _____ | 2005 |

That the cost of publication is \$36.29 and that payment thereof has been made and will be assessed as court costs.

Dawn Higgins

Subscribed and sworn to before me this

4 day of November 2005
Stephanie Olson

My commission Expires on 12-13-05

Notary Public

November 4, 2005

NOTICE OF APPLICATION FOR FLUID DISPOS- AL

Applicant:
OXY USA WTP
Limited Partnership
P.O. Box 50250
Midland, TX 79710-
0250
432-685-5717
ATTN: David Stewart

Purpose-Well:
Disposal of produced
water into a zone not
productive of oil and
gas. Righthand Canyon
35 Federal #7
1975 FSL 2405 FWL
(K) Sec 35 T21S R34E
Eddy County

Formation:
Name- Devonian
Interval-11000-12100'
Maximum Injection
Rate-40000 BWPD
Maximum Injection
Pressure- 2200psi

Interested parties must
file objections or re-
quests for hearing with
the Oil Conservation
Division, 1220 South
St. Francis Dr. Santa
Fe, New Mexico 87505,
within 15 days of this
posting. enj ul '000Z

| SENDER COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>1. Complete items 1, 2, and 3. Also complete item 4 if Registered Delivery is checked.</p> <p>2. Print your name and address on the envelope so that we can return the card to you.</p> <p>3. Attach this card to the back of the envelope, or on the front if space permits.</p> <p>Article Addressed to:</p> | | <p>4. Signature</p> <p>5. <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>6. Received by (Printed Name) 7. Date of Delivery</p> <p>8. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>9. Is this article returnable by mail? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10. Sample Type</p> <p>11. <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> G.O.D. <input type="checkbox"/> Registered Delivery (Check Box) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | |
| <p>Article Number: 7002 2410 0000 0033 9395</p> <p>Transfer from existing label</p> <p>PS Form 3811, August 2001</p> | | <p>7002 2410 0000 0033 9395</p> <p>Domestic Return Receipt</p> | |

STATE OF NEW MEXICO
ENERGY & MINERALS DEPARTMENT
OIL CONSERVATION DIVISION
1220 SOUTH ST. FRANCIS DR.
SANTA FE, NM 87505

| SENDER COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>1. Complete items 1, 2, and 3. Also complete item 4 if Registered Delivery is checked.</p> <p>2. Print your name and address on the envelope so that we can return the card to you.</p> <p>3. Attach this card to the back of the envelope, or on the front if space permits.</p> <p>Article Addressed to:</p> | | <p>4. Signature</p> <p>5. <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>6. Received by (Printed Name) 7. Date of Delivery</p> <p>8. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>9. Is this article returnable by mail? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10. Sample Type</p> <p>11. <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> G.O.D. <input type="checkbox"/> Registered Delivery (Check Box) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | |
| <p>Article Number: 7002 2410 0000 0033 9401</p> <p>Transfer from existing label</p> <p>PS Form 3811, August 2001</p> | | <p>7002 2410 0000 0033 9401</p> <p>Domestic Return Receipt</p> | |

STATE OF NEW MEXICO
ENERGY & MINERALS DEPARTMENT
OIL CONSERVATION DIVISION
1301 W. GRAND AVE.
ARTESIA, NM 88210

| SENDER COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>1. Complete items 1, 2, and 3. Also complete item 4 if Registered Delivery is checked.</p> <p>2. Print your name and address on the envelope so that we can return the card to you.</p> <p>3. Attach this card to the back of the envelope, or on the front if space permits.</p> <p>Article Addressed to:</p> | | <p>4. Signature</p> <p>5. <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>6. Received by (Printed Name) 7. Date of Delivery</p> <p>8. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>9. Is this article returnable by mail? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10. Sample Type</p> <p>11. <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> G.O.D. <input type="checkbox"/> Registered Delivery (Check Box) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | |
| <p>Article Number: 7002 2410 0000 0033 9418</p> <p>Transfer from existing label</p> <p>PS Form 3811, August 2001</p> | | <p>7002 2410 0000 0033 9418</p> <p>Domestic Return Receipt</p> | |

UNITED STATES DEPT OF
INTERIOR
BUREAU OF LAND MANAGEMENT
2909 WEST SECOND STREET
ROSWELL, NM 88201

| SENDER COMPLETE THIS SECTION | | COMPLETE THIS SECTION ON DELIVERY | |
|---|--|---|--|
| <p>1. Complete items 1, 2, and 3. Also complete item 4 if Registered Delivery is checked.</p> <p>2. Print your name and address on the envelope so that we can return the card to you.</p> <p>3. Attach this card to the back of the envelope, or on the front if space permits.</p> <p>Article Addressed to:</p> | | <p>4. Signature</p> <p>5. <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>6. Received by (Printed Name) 7. Date of Delivery</p> <p>8. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>9. Is this article returnable by mail? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>10. Sample Type</p> <p>11. <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> G.O.D. <input type="checkbox"/> Registered Delivery (Check Box) <input type="checkbox"/> Yes <input type="checkbox"/> No</p> | |
| <p>Article Number: 7002 2410 0000 0033 9425</p> <p>Transfer from existing label</p> <p>PS Form 3811, August 2001</p> | | <p>7002 2410 0000 0033 9425</p> <p>Domestic Return Receipt</p> | |

Sharon Michelle
646 Aspen Route
Covington, NM 86220