

MERIDIAN OIL

OIL CONSERVATION DIVISION
RECEIVED

'91 AUG 28 AM 8 54

August 27, 1991

State of New Mexico
Energy, Minerals and Natural Resources Department
Oil Conservation Commission
P. O. Box 2088
Santa Fe, NM 87504

ATTN: WILLIAM J. LEMAY, DIRECTOR

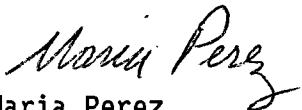
RE: REGISTERED RETURN-RECEIPT
APPLICATION FOR SIMULTANEOUS DEDICATION
EMERY KING SE NO. 1
O, 660' FSL & 1980' FEL
EMERY KING SE NO. 3
J, 2310' FSL & 1650' FEL
SEC. 1, T23S, R36E
LEA COUNTY, NEW MEXICO
FEE LEASE

Dear Mr. Lemay:

Enclosed are the registered return-receipts that have come in for the offset operators notification on the captioned application.

Should you require additional information, please contact me at 915-686-5767.

Sincerely,



Maria Perez
Production Assistant

MP/sm

cc: Well File
Don McBee
Reading File

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

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

3. Article Addressed to: HAL J. RASMUSSEN OPERATING INC. ATTN: SCOTT RAMSEY 6 DESTA DRIVE SUITE 1600 MIDLAND, TX 79705	4. Article Number P 154 362 024 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Esther Meyer</i>	
7. Date of Delivery <i>8/19/91</i>	

PS Form 3811, Apr. 1989

★ U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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

3. Article Addressed to: TEXACO INC. ATTN: R. S. LAND P. O. BOX 3109 MIDLAND, TX 79701	4. Article Number P 154 362 018 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Toby Leone</i>	
7. Date of Delivery AUG 19 1991	

PS Form 3811, Apr. 1989

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

3. Article Addressed to: V.H. WESTBROOK OIL OPERATOR ATTN: V.H. WESTROOK P. O. BOX 2264 HOBBS, NM 88240	4. Article Number P 154 362 022 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>[Signature]</i>	
7. Date of Delivery 8-19-91	

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

3. Article Addressed to: AMERADA HESS CORP. ATTN: IRA JOHNSON P. O. BOX 840 SEMINOLE, TX 79360	4. Article Number P 154 362 033 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Norma Flores</i>	
7. Date of Delivery 8-20-91	

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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3. Article Addressed to: AMOCO PRODUCTION COMPANY ATTN: J.C. ALLEN ROOM 3.248 BOX 3092 HOUSTON, TX 77253	4. Article Number P 154 362 031 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>R. Saul</i>	
7. Date of Delivery AUG 19 1991	

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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

3. Article Addressed to: ARCO OIL & GAS CO. ATTN: LIZ BUSH P. O. BOX 1610 MIDLAND, TX 79702	4. Article Number P 154 362 028 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Liz Bush</i>	
7. Date of Delivery AUG 19 1991	

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3. Article Addressed to: CHEVRON USA INC. ATTN: AL BOHLING PRORATION ENGINEER P. O. BOX 1150 MIDLAND, TX 79702	4. Article Number P 154 362 017 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
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3. Article Addressed to: CITATION OIL & GAS ATTN: STEVE ROBINSON 8223 WILLOW PLACE SOUTH SUITE 250 HOUSTON, TX 77070-5623	4. Article Number P 154 362 019 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery	

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3. Article Addressed to: CONOCO INC. ATTN: BILL KEATHLY #10 DESTA DRIVE MIDLAND, TX 79705	4. Article Number P 154 362 029 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery AUG 20 1991	

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

3. Article Addressed to: ESTORIL PRODUCING CORP. ATTN: JIMMY WALKER 400 W. ILLINOIS SUITE 1600 MIDLAND, TX 79702	4. Article Number P 154 362 023 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X <i>Cathy Miller</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery 8-19-91	

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3. Article Addressed to: EXXON COMPANY USA ATTN: SHARON HALL REGULATORY AFFAIRS P. O. BOX 1600 MIDLAND, TX 79702	4. Article Number P 154 362 026 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>[Signature]</i>	
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3. Article Addressed to: GREAT WESTERN DRILLING CO. ATTN: B.C. MAHANAY P. O. BOX 1659 MIDLAND, TX 79702	4. Article Number P 154 362 021 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>[Signature]</i>	
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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: DOYLE HARTMAN ATTN: PATRICK WORRELL P. O. BOX 10426 MIDLAND, TX 79702	4. Article Number P 154 362 027 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid) M2
6. Signature — Agent X <i>L. Rossler</i>	
7. Date of Delivery 8/19/91	

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3. Article Addressed to: KERN COMPANY ATTN: WILLIAM G. KERN 3005 N. BIG SPRING MIDLAND, TX 79705	4. Article Number P 154 362 030 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X <i>Laura Bartley</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery 8/19/91	

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3. Article Addressed to: OXY USA INC. ATTN: Bob Hunt P. O. BOX 50250 MIDLAND, TX 79710	4. Article Number P 154 362 032 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>K. Woodard</i>	
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3. Article Addressed to: CLAYTON W. WILLIAMS, JR. INC. ATTN: MATT SWIERC 6 BESTA DRIVE MIDLAND, TX 79705	4. Article Number P 154 362 020 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X <i>J. Bann</i>	8. Addressee's Address (ONLY if requested and fee paid) EW
6. Signature — Agent X	
7. Date of Delivery <i>8/19</i>	

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3. Article Addressed to: LEWIS B. BURLESON, INC. P. O. BOX 2479 MIDLAND, TX 79702	4. Article Number P 154 362 025 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Norie Swierlein</i>	
7. Date of Delivery <i>8-20-91</i>	

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DOMESTIC RETURN RECEIPT