MERIDIAN OIL

OIL CONSERVATION DIVISION RECTIVED

'91 AUR 29 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,

Nanu

Maria Perez Ar 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. <u>The return receipt fee will provide</u> the date of delivery. For additional fees the following service	e you the name of the person delivered to and es are available. Consult postmaster for fees
	and check box(es) for additional service(s) requested. 1.	
	3. Article Addressed to:	4. Article Number
	HAL J. RASMUSSEN OPERATING INC.	P 154 362 024
Ī	ATTN: SCOTT RAMSEY	Type of Service:
	6 DESTA DRIVE	☐ Registered ☐ Insured
	SUITE 1600	Express Mail Return Receipt
	MIDLAND, TX 79705	Always obtain signature of addressee
	5. Signature – Addressee	or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if
	X	requested and fee paid)
	6. Signeture – Agent	
	7. Date of Delivery	-
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ιć.	PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIPT
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	and check box(es) for additional service(s) requested. 1.	dress. 2. 🗆 Restricted Delivery
• •	(Extra charge)	(Extra charge)
:	3. Article Addressed to:	4. Article Number
	TEXACO INC.	P 154 362 018
	ATTN: R. S. LAND	Type of Service:
•	P. O. BOX 3109	Certified COD
	MIDLAND, TX 79701	Express Mail Return Receipt
		Always obtain signature of addressee or agent and DATE DELIVERED.
i	5. Signature – Addressee	8. Addressee's Address (ONLY if
	X	requested and fee paid)
	6. Signature – Agent	
	× Taby Leore	·
	7. Date 67 Delivery AUG 19 1991	
	Nv- -	·
	PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIPT
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	3. Article Addressed to:	4. Article Number
		P 154 362 022
		Type of Service:
	V.H. WESTBROOK OIL OPERATOR	🚊 Registered 🔲 Insured
	ATTN: V.H. WESTROOK	Certified COD
	P. 0. BOX 2264	Express Mail Return Receipt for Merchandise
	HOBBS, NM 88240	Always obtain signature of addressee or agent and DATE DELIVERED.
1	5. Signature – Addressee	8. Addressee's Address (ONLY if
	X	requested and fee paid)
-	6. Signature – Age	1
	X	
	7. Date of Delivery	4 · ·
	X-1-1-1	
	PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional	services are desired, and complete items
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from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service	you the name of the person delivered to and s are available. Consult postmaster for fees
i and check boxies) for additional service(s) requested.	
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3. Article Addressed to:	4. Article Number
	P 154 362 033
AMERADA HESS CORP.	Type of Service:
ATTN: IRA JOHNSON	Registered Insured
P. O. BOX 840	Certified COD
SEMINOLE, TX 79360	Express Mail Return Receipt
	Always obtain signature of addressee
	or agent and DATE DELIVERED.
5. Signature – Addressee	8. Addressee's Address (ONLY if
X	requested and fee paid)
6. Signature - Agent	-
* norma Hores	
7. Date of Delivery	
8-20-91	
PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIPT
*3 FORM 30 1 1, Apr. 1989 *0.3.0.F.C. 1989-230-61	
SENDER: Complete items 1 and 2 when additional	services are desired, and complete items
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and check box(es) for additional service(s) requested.	
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(Extra charge) 3. Article Addressed to:	(Extra charge) 4. Article Number
AMOCO PRODUCTION COMPANY	<u>P 154 362 031</u>
ATTN: J.C. ALLEN	Type of Service:
	Registered Insured
ROOM 3.248	Express Mail Return Receipt
BOX 3092	for Werchanoise
HOUSTON, TX 77253	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature – Addressee	8. Addressee's Address (ONLY if
X	requested and fee paid)
6. Signature – Agent A	- China -
X A Hand	
	4
7. Date of Delivery AUG 1 9 1991	
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PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIPT
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and check box(es) for additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's	address. 2. 🗇 Restricted Delivery
(Extra charge)	(Extra charge)
3. Article Addressed to:	4. Article Number
	P 154 362 028
ARCO OIL & GAS CO.	Type of Service:
ATTN: LIZ BUSH	Registered Insured
P. 0. BOX 1610	Certified COD
	Express Mail Return Receipt for Merchandise
MIDLAND, TX 79702	Always obtain signature of addressee
	or agent and DATE DELIVERED.
5. Signature – Addressee	8. Addressee's Address (ONLY if
x	requested and fee paid)
X 6. Signature – Agent	
6. Signature – Agent	
6. Signature – Agent X 7. Date of Delivery	
6. Signature – Agent X	requested and fee paid)

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 from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service and check box(es) for additional service(s) requested. 11 Show to whom delivered, date, and addressee's a	e you the name of the person delivered to and es are available. Consult postmaster for fees
(Extra charge)	(Extra charge)
3. Article Addressed to:	4. Article Number P 154 362 017
CHEVRON USA INC.	Type of Service:
ATTN: AL BOHLANG	Registered Insured
PRORATION ENGINEER	Certified COD
P. O. BOX 1150	Express Mail for Merchandise
MIDLAND, TX 79702	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	
7 Date of Delivery	2
AUG 1 9 1991 - U	
PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-8	5 DOMESTIC RETURN RECEIPT
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the date of delivery. For additional fees the following service	as are available. Consult postmaster for fees
and check box(es) for additional service(s) requested. 1. ☐ Show to whom delivered, date, and addressee's a (<i>Extra charge</i>)	ddress. 2. C Restricted Delivery (Extra charge)
3. Article Addressed to:	4. Article Number
CITATIÔN OIL & GAS	P 154 362 019
ATTN: STEVE ROBINSON	Type of Service:
8223 WILLOW PLACE SOUTH	Registered Insured
SUITE 250	Cortified COD
HOUSTON, TX 77070-5623	Always obtain signature of addressee
	or agent and DATE DELIVERED.
5. Signature – Addressee X	8. Actoressee's Address (ONLY if requested and fee paid)
6. Signer Gre - Agent	
7. Date of Delivery	-
7. Date of Delivery	
PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-61	5 DOMESTIC RETURN RECEIPT
6 FORM 60 FT, Apr. 1767 * 0.3.0.P.0. 1909-236-61	
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from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service	es are available. Consult postmaster for fees
and check box(es) for additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's an (Extra charge)	
3. Article Addressed to:	4. Article Number
	P 154 362 029
CONOCO INC.	Type of Service:
ATTN: BILL KEATHLY	Registered Insured
#10 DESTA DRIVE	Certified COD
MIDLAND, TX 79705	Always obtain signature of addressee
	or agent and DATE DELIVERED.
5. Signature – Addressee	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature Agent	
× Unita Lonzales	
7. Date of Delivery	
AUG. 20 1991	
7. Date of Delivery Alig. 2.0-1001 PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-81	5 DOMESTIC RETURN RECEIP

.[• SENDER: Complete items 1 and 2 when additional s 3 and 4.	services are desired, and complete items
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	(Extra charge) 3. Article Addressed to:	(Extra charge)
'	ESTODIL DODUCING CODD	P 154 362 023
	ESTORIL PRODUCING CORP. ATTN: JIMMY WALKER	Type of Service:
	400 W. ILLINOIS	Certified COD
	SUITE 1600	Express Mail Return Receipt for Merchandise
	MIDLAND, TX 79702	Always obtain sphature of addressee or agent and DATE DELIVERED.
	5. Signature – Addressee	8. Addressee's Address (ONLY if requested and fee paid)
	 K (Atty 7) (IIII) 6. Signature – Agent 	
	X	
	7. Date of Delivery S-19 WR	
	PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-815	DOMESTIC RETURN RECEIPT
	SENDER: Complete items 1 and 2 when additional	services are desired and complete items
•	3 and 4. Put your address in the "RETURN TO" Space on the reverse	
	from being returned to you. The return receipt fee will provide the date of delivery. For additional fees the following service	e you the name of the person delivered to and
	and check box(es) for additional service(s) requested. 1.	ddress. 2. CRestricted Delivery (Extra charge)
	3. Article Addressed to:	4. Article Number P 154 362 026
	EXXON COMPANY USA	Type of Service:
	ATTN: SHARON HALL	Registered Insured
	REGULATORY AFFAIRS	X Certified COD
	P. 0. BOX 1600	Express Mail Return Receipt for Merchandise
	MIDLAND, TX 79702	Always obtain signature of addressee or agent and DATE DELIVERED.
	5. Signature – Addressee	8. Addressee's Address (ONLY if requested and fee paid)
	X 6. Signature + Agent	
	×	
	7. Date of Delivery AUG 19 1991	
1	PS Form 3811, Apr. 1989 +U.S.G.P.O. 1989-238-8	15 DOMESTIC RETURN RECEIPT
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	and check box(es) for additional service(s) requested. 1. □ Show to whom delivered, date, and addressee's additional (<i>Extra charge</i>)	dress. 2. CRestricted Delivery (Extra charge)
	3. Article Addressed to:	4. Article Number
		P 154 362 021
1	GREAT WESTERN DRILLING CO.	Type of Service:
·	ATTN: B.C. MAHANAY	Registered Insured
	P. O. BOX 1659	Express Mail Return Receipt for Merchandise
	MIDLAND, TX 79702	Always obtain signature of addressee
	5. Signature – Addressee	or agent and <u>DATE DELIVERED</u> . 8. Addressee's Address (ONLY if
	X 1	requested and fee paid)
	6. Signature Agent	
	× Malshop	
	7. Date of Delivery	
	PS Form 3811 , Apr. 1989 * U.S.G.P.O. 1989-238-815	DOMESTIC RETURN RECEIPT

Put	2 and 4	services are desired, and complete items
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ano 1.	I check box(es) for additional service(s) requested. □ Show to whom delivered, date, and addressee's ad (Extra charge)	
3.	Article Addressed to:	(Extra charge) 4. Article Number
		P 154 362 027
	DOYLE HARTMAN ATTN: PATRICK WORRELL	Type of Service:
	P. 0. BOX 10426	Certified
	MIDLAND, TX 79702	for Merchandise
		Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. X	Signature – Addressee	8. Addressee's Address (ONLY if requested and fee paid)
	Signature Agent	MS.
X	& Rossler ,	
7.	Date of Delivery	
PS F	orm 3811, Apr. 1989 + U.S.G.P.O. 1989-238-81	DOMESTIC RETURN RECEIPT
	SENDER: Complete items 1 and 2 when additional	services are desired, and complete items
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fro	m being returned to you. The return receipt fee will provide a date of delivery. For additional fees the following service	you the name of the person delivered to and
and	d check box(es) for additional service(s) requested.	ldress. 2. 🗆 Restricted Delivery
3.	(Extra charge) Article Addressed to:	(Extra charge) 4. Article Number
•	KERN COMPANY	P 154 362 030
	ATTN: WILLIAM G. KERN	Type of Service:
	3005 N. BIG SPRING	Contified COD
	MIDLAND, TX 79705	Express Mail Return Receipt for Merchandise
		A Addressee
5.	Signature - Addressee	1 Mile
	Signature - Addressee	8. Addressee's Address (ONLY if
X	Jama Badley	8. Addressee's Address (ONLY if requested and fee paid)
X e X	Signature - Agent	
X đ X	Jama Badley	
X EL X 7.	Signature - Agent	requested and fee paid)
X 6. X 7.	Signature - Agent	requested and fee paid)
X 6. X 7.	Signature - Agent	requested and fee paid)
X 6. X 7.	Signature – Agent Date of Delivery Form 3811, Apr. 1989 *U.S.G.P.O. 1989-228-81 SENDER: Complete items 1 and 2 when additional	5 DOMESTIC RETURN RECEIPT
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the date of delivery. For additional fees the following ser and check box(es) for additional service(s) requested.	vices are available. Consult postmaster for fees
1. □ Show to whom delivered, date, and addressee' (Extra charge)	s address. 2. Restricted Delivery (<i>Extra charge</i>)
3. Article Addressed to:	4. Article Number
CLAYTON W. WILLIAMS, JR. INC.	P 154 362 020
	Type of Service:
ATTN: MATT SWIERC	Registered Insured
6 DESTA DRIVE	XX Certified COD
MIDLAND, TX 79705	Express Mail Return Receipt
	Always obtain signature of addressee
	or agent and DATE DELIVERED.
5. Signature – Addressee	8. Addressee's Address (ONLY if
X BOMMAL S	requested and fee paid)
6. Signature – Agent	
x Al. A	
7. Date of Delivery	
PS Form 3811, Apr. 1989	B8-815 DOMESTIC RETURN RECEIP
'S FORM SO I I, Apr. 1989 V *0.S.G.P.O. 1989-23	
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