NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

GARY E. JOHNSON
Governor
Jennifer A. Salisbury
Cabinet Secretary

Lori Wrotenbery
Director
Oil Conservation Division

October 11, 2001

ADDRESS LIST

VIA: CERTIFIED MAIL, RETURN RECEIPT REQUESTED

Re: Case No. 12758: **Application of the New Mexico Oil Conservation Division for an Order Requiring Operators to Bring One Hundred Forty-Seven (147) Wells into Compliance with Rule 201.B, and Assessing Appropriate Civil Penalties; Lea, Roosevelt and Chaves Counties, New Mexico.**

Ladies and Gentlemen:

You are hereby notified that the New Mexico Oil Conservation Division has filed the referenced Application, a copy of which is enclosed herewith, seeking an Order requiring you to bring specified inactive wells in Lea, Roosevelt and Chaves Counties, New Mexico into compliance with Dvision Rule 201.B, by either restoring such wells to production or beneficial use, permanently abandoning or temporarily abandoning them. In addition, the Division seeks assessment of civil penalties for your failure to comply with previous administrative notices to bring these wells into compliance.

A hearing on this Application will take place before a Division hearing officer on Thursday, November 1, 2001, at 8:15 a.m., in the Division Hearing Room, First Floor, 1220 South St. Francis Drive in Santa Fe, New Mexico. At that hearing you will have an opportunity to show cause, if any there be, why an order should not be entered as requested in the Application.

Operational inquiries concerning the subject of this hearing should be directed to Mr. Chris Williams, District Supervisor, Oil Conservation Division, 1625 French Drive, Hobbs, NM 88240; phone (505)-393-6161. Counsel may contact the undersigned in the Santa Fe office at (505)-476-3450.

Very truly yours,

David K. Brooks

David K. Brooks
Assistant General Counsel

STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION

APPLICATION OF THE NEW MEXICO OIL CONSERVATION DIVISION, THROUGH THE SUPERVISOR OF DISTRICT I, FOR AN ORDER REQUIRING OPERATORS TO BRING ONE HUNDRED FORTY-SEVEN (147) WELLS INTO COMPLIANCE WITH RULE 201.B, AND ASESSING APPROPRIATE CIVIL PENALTIES; LEA, ROOSEVELT AND CHAVES COUNTIES, NEW MEXICO

OIL CONSERVATION DIV.
2009 DEC 9 PM 3:45

CASE NO. 12758

APPLICATION FOR COMPLIANCE ORDERS AND CIVIL PENALTIES

1. Amtex Energy, Inc. is the operator of four (4) wells in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A. Exhibits A and B are attached hereto and by this reference incorporated into this application and made part hereof for all purposes.

2. Bettis Boyle & Stovall is the operator of eleven (11) wells in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A.

3. C.E. Larue & B.M. Muncy, Jr. are the operators of two (2) wells in Lea County, New Mexico, and of two (2) wells in Chaves County, New Mexico, specifically identified by name, location and API number on Exhibit A, and are also the operators of six (6) additional wells in Lea County, New Mexico, and of one (1) additional well in Chaves County, New Mexico, so identified on Exhibit B.

4. C.W. Stumhoffer is the operator of one (1) well in Lea County, New Mexico specifically identified by name, location and API number on Exhibit A.

5. Crestridge Drilling and Production Co., LLC is the operator of two (2) wells in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A, and is also the operator of one (1) well in Lea County, New Mexico, so identified on Exhibit B.

6. Erwin Oil & Gas Ltd Co. is the operator of one (1) well in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A.

7. Fi-Ro Corp. is the operator of one (1) well in Lea County, New Mexico, and of two (2) wells in Chaves County, New Mexico, specifically identified by name, location and API number on Exhibit A.

8. Hal J. Rasmussen Operating Inc. is the operator of twenty (20) wells in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A, and is also the operator of ten (10) additional wells in Lea County, New Mexico, so identified on Exhibit B.

9. Happy Oil Inc. is the operator of one (1) well in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A.

10. John A. Yares, Jr. is the operator of one (1) well in Roosevelt Count, New Mexico, specifically identified by name, location and API number on Exhibit A.

11. Kenson Operating Company, Inc. is the operator of eleven (11) wells in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A, and also of thirty-seven (37) additional wells in Lea County, New Mexico, so identified on Exhibit B.

12. Kersey & Co. is the operator of one (1) well in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A.

13. Kevin O. Butler & Associates Inc. is the operator of three (3) wells in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A, and also of ten (10) additional wells in Lea County, New Mexico, and three (3) additional wells in Chaves County, New Mexico, so identified on Exhibit B.

14. Mallon Oil Co. is the operator of twelve (12) wells in Lea County, New Mexico, specifically identified by name, location and API number on Exhibit A, and also of four (4) additional wells in Lea County, New Mexico, so identified on Exhibit B.

15. The above named operators are herein referred to collectively as "Operators" and individually as "Operator." The wells identified on Exhibit A are herein called "the subject wells," and the wells identified on Exhibit B are herein called "the additional wells." The phrase, "each Operator's subject wells" refers, as to each Operator individually, to those of the subject wells identified on Exhibit A as operated by such Operator. The phrase "each Operator's additional wells" refers, as to each Operator individually, to those of the additional wells identified on Exhibit B as operated by such Operator. The New Mexico Oil Conservation Division is hereinafter called "the Division."

16. Each of the subject wells was continuously inactive for a period in excess of one (1) year immediately preceding May 11, 2000, and has remained inactive continuously from such date to the date of filing of this Application. The date of last reported production from, or injection into, each of the subject wells is set forth on Exhibit A. None of the subject wells is currently approved for temporary abandonment by the Division.

17. In the alternative, if there has been any production from, or injection into, any of the subject wells since the date of last production or injection indicated with respect to such well on Exhibit A, such production or injection has not been reported to the Division as required by Rule 1115.

18. On May 11, 2000, the New Mexico Oil Conservation Division (hereinafter "the Division") notified Operators that the subject wells were not in compliance with Division Rule 201.B(3), and should be brought into compliance either by returning the same to production or other beneficial use or by securing Division approval for temporary abandonment. The Division received no response to such notification from any of the above-named Operators, and none of said Operators took any action to bring such Operator's subject wells into compliance.

19. On or about September 8, 2000 the Division, acting through the District Supervisor of District I, again notified Operators that the subject wells were not in compliance with Division Rule 201.B(3), and directed Operators to bring such wells into compliance within sixty (60) days following such notification. By subsequent correspondence, Operators were notified that their continued failure to bring the subject wells into compliance would result in their being summoned to a show cause hearing before a Division hearing examiner. The Division received no response to such notifications from any of Operators, and no action has been taken to bring any of the subject wells into compliance.

20. Each Operator's additional wells, though not referenced in the written notices from the Division to the Operators described above, are also out of compliance with Rule 201.B(3), in that said wells had not been produced or beneficially used for a

continuous period of one year prior to June 1, 2001, and have not been restored to production or beneficial use or plugged since that date, nor have applications been filed for temporary abandonment of any of such additional wells. The date of last reported production from, or injection into, each of the additional wells is set forth on Exhibit B.

21. If there has been any production from, or injection into, any of the additional wells since the date of last production or injection reflected on Exhibit B, such production or injection has not been reported to the Division as required by Rule 1115.

22. Division Rule 201.B(3) provides:

> A well shall be either properly plugged and abandoned or temporarily abandoned in accordance with these rules ninety (90) days after:
>
> ***
>
> (3) A period of one (1) year in which a well has been continuously inactive.

23. NMSA Section 70-2-31.A provides that:

> Any person who knowingly and willfully violates any provision of the Oil and Gas Act or any provision of any rule or order issued pursuant to that act shall be subject to a civil penalty of not more than one thousand dollars ($1,000) for each violation. For purposes of this subsection, in the case of a continuing violation, each day of violation shall constitute a separate violation.

24. Each Operator's failure to take action to restore such operator's subject wells to production or beneficial use, or to cause such wells to be plugged and abandoned, or to apply to the Division for approval for temporary abandonment, or, if such wells are in fact producing, to report such production to the Division as required, after receipt of notice of noncompliance from the Division as herein before described,

constitutes a continuing violation of Division Rule 201.B(3) or of Rule 1115, rules duly adopted by the Division pursuant to the Oil and Gas Act.

WHEREFORE, the Supervisor of District I of the Division hereby applies to the Director to enter an order:

A. Specifically ordering each of Operators to bring such Operator's subject wells and additional wells into compliance with OCD rules within a specified time fixed in said order by taking one of the following actions with respect to each of said Operator's subject wells and additional wells:

(i) causing such well to be plugged and abandoned in accordance with Division rules.

(ii) restoring such well to production or other Division-approved beneficial use,

(iii) applying to the Division for permission to place such well in "temporary abandonment" status pursuant to Division Rule 203, or

(iv) truly and accurately reporting to the Division any production from or injection into any of said wells which has, in fact, occurred and not been reported to the Division.

B. In those cases where the Director deems such action appropriate, requiring an Operator to furnish single-well financial assurance as to any well that has not been produced or otherwise beneficially used for two (2) consecutive years, pursuant to NMSA 70-2-14.A.

C. Assessing an appropriate civil penalty against each of Operators for failure to take action to remedy the non-compliance of such Operator's subject wells after notice and demand from the Division to do so; such penalty to be not less than $1,000 for each of such Operator's subject wells.

RESPECTFULLY SUBMITTED,

David K. Brooks
Assistant General Counsel
Energy, Minerals and Natural Resources Department of the State of New Mexico
1220 S. St. Francis Drive
Santa Fe, NM 87505
(505)-476-3450
Attorney for The New Mexico Oil Conservation Division

Exhibit A to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-025-32747	Lea	O	04-1995	CHUKAR STATE #001	785	AMTEX ENERGY INC	O-16-19S-34E	1
30-025-31653	Lea	O	07-1995	DAGGER LAKE 5 STATE #001	785	AMTEX ENERGY INC	O-05-22S-33E	2
30-025-31337	Lea	O	NONE	MERIT RECORD 35 #001	785	AMTEX ENERGY INC	P-35-19S-35E	3
30-025-32196	Lea	O	02-1997	RECORD #004	785	AMTEX ENERGY INC	N-26-19S-35E	4
30-025-11668	Lea	O	12-1986	B M JUSTIS A #002	2175	BETTIS BOYLE & STOVALL	H-20-25S-37E	5
30-025-11664	Lea	O	12-1981	B M JUSTIS A #006	2175	BETTIS BOYLE & STOVALL	H-20-25S-37E	6
30-025-11680	Lea	O	12-1987	B T LANEHART #001	2175	BETTIS BOYLE & STOVALL	G-21-25S-37E	7
30-025-11682	Lea	O	03-2000	B T LANEHART #003	2175	BETTIS BOYLE & STOVALL	C-21-25S-37E	8
30-025-11681	Lea	O	07-1990	B T LANEHART #004	2175	BETTIS BOYLE & STOVALL	B-21-25S-37E	9
30-025-11679	Lea	G	05-1994	B T LANEHART #005	2175	BETTIS BOYLE & STOVALL	G-21-25S-37E	10
30-025-25588	Lea	O	10-1985	B T LANEHART #006	2175	BETTIS BOYLE & STOVALL	B-21-25S-37E	11
30-025-23721	Lea	O	02-2000	PATSY A #001	2175	BETTIS BOYLE & STOVALL	B-20-22S-37E	12
30-025-23925	Lea	O	06-1998	PATSY B #002	2175	BETTIS BOYLE & STOVALL	N-17-22S-37E	13
30-025-11629	Lea	O	03-1985	STATE O #001	2175	BETTIS BOYLE & STOVALL	A-16-25S-37E	14
30-025-11666	Lea	O	05-1993	V H JUSTIS #002	2175	BETTIS BOYLE & STOVALL	D-20-25S-37E	15
30-005-20953	Chaves	O	12-1992	GULF KIMMONS #002	3292	C E LARUE & B M MUNCY JR	A-19-08S-31E	16
30-025-21710	Lea	O	03-1993	PEARSALL QUEEN SAND UNIT #001	3292	C E LARUE & B M MUNCY JR	P-32-17S-32E	17
30-025-00843	Lea	O	03-1995	PEARSALL QUEEN SAND UNIT #002	3292	C E LARUE & B M MUNCY JR	2-05-18S-32E	18
30-005-00983	Chaves	O	12-1993	TRIGG FEDERAL #014	3292	C E LARUE & B M MUNCY JR	J-04-14S-31E	19
30-025-27882	Lea	O	01-1983	SHIPMAN #001	3463	C W STUMHOFFER	G-35-22S-37E	20
30-025-05246	Lea	O	12-1993	MEXICO F #001	152464	CRESTRIDGE DRILLING AND PRODUCTION CO., LLC	3-02-15S-37E	21
30-025-05250	Lea	O	10-1993	MEXICO F #005	152464	CRESTRIDGE DRILLING AND PRODUCTION CO., LLC	2-02-15S-37E	22

Exhibit A to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-025-04392	Lea	G	01-1996	STATE WEG #001	18703	ERWIN OIL & GAS LTD CO	H-34-20S-36E	23
30-005-00822	Chaves	O	07-1988	GULF STATE H #001	7844	FI-RO CORP	H-23-13S-31E	24
30-005-00691	Chaves	O	10-1998	HONDO HOLLOWAY STATE #001	7844	FI-RO CORP	F-36-12S-31E	25
30-025-24155	Lea	O	04-1996	NORTH CAPROCK QUEEN UNIT 1 TR 27 #005Y	7844	FI-RO CORP	E-08-13S-32E	26
30-025-04377	Lea	G	05-1992	CHARLOTTE STATE #002	9809	HAL J RASMUSSEN OPER INC	C-32-20S-36E	27
30-025-04371	Lea	O	06-1991	CHARLOTTE STATE #004	9809	HAL J RASMUSSEN OPER INC	N-29-20S-36E	28
30-025-23964	Lea	O	02-1994	GULF COOKIE STATE #001	9809	HAL J RASMUSSEN OPER INC	G-21-23S-36E	29
30-025-24073	Lea	O	08-1996	GULF COOKIE STATE #002	9809	HAL J RASMUSSEN OPER INC	H-21-23S-36E	30
30-025-02534	Lea	O	08-1991	KAISER STATE #005	9809	HAL J RASMUSSEN OPER INC	J-13-21S-34E	31
30-025-02546	Lea	O	08-1991	KAISER STATE #041	9809	HAL J RASMUSSEN OPER INC	E-13-21S-34E	32
30-025-02547	Lea	G	03-1997	KAISER STATE #042	9809	HAL J RASMUSSEN OPER INC	J-13-21S-34E	33
30-025-32741	Lea	O	10-1997	KAISER STATE #044	9809	HAL J RASMUSSEN OPER INC	F-13-21S-34E	34
30-025-21747	Lea	O	05-1990	MOBIL STATE #001	9809	HAL J RASMUSSEN OPER INC	O-16-23S-36E	35
30-025-02549	Lea	G	12-1982	PHILLIPS STATE #001	9809	HAL J RASMUSSEN OPER INC	G-14-21S-34E	36
30-025-03424	Lea	O	10-1991	SHELL STATE #001	9809	HAL J RASMUSSEN OPER INC	K-07-21S-35E	37

Exhibit A to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-025-03422	Lea	O	06-1991	SHELL STATE #004	9809	HAL J RASMUSSEN OPER INC	4-07-21S-35E	38
30-025-03427	Lea	O	08-1991	SHELL STATE #007	9809	HAL J RASMUSSEN OPER INC	F-07-21S-35E	39
30-025-03428	Lea	O	12-1992	SHELL STATE #008	9809	HAL J RASMUSSEN OPER INC	C-07-21S-35E	40
30-025-02557	Lea	O	03-1995	STATE A #001	9809	HAL J RASMUSSEN OPER INC	O-16-21S-34E	41
30-025-02563	Lea	O	03-1995	STATE B #001	9809	HAL J RASMUSSEN OPER INC	B-21-21S-34E	42
30-025-02553	Lea	G	09-1989	VALERO STATE #001	9809	HAL J RASMUSSEN OPER INC	N-16-21S-34E	43
30-025-03433	Lea	O	03-1995	WILSON A STATE #002	9809	HAL J RASMUSSEN OPER INC	B-07-21S-35E	44
30-025-02575	Lea	O	12-1991	WILSON STATE #003	9809	HAL J RASMUSSEN OPER INC	J-23-21S-34E	45
30-025-02569	Lea	O	12-1992	WILSON STATE #017	9809	HAL J RASMUSSEN OPER INC	A-23-21S-34E	46
30-025-29725	Lea	O	01-1989	CHILKAT STATE 6 #001	9991	HAPPY OIL CO INC	O-06-21S-35E	47
30-041-00218	Roosevelt	O	05-1974	MURPHY KIRKPATRICK FEDERAL #002	11952	JOHN A YATES JR	B-14-08S-37E	48
30-025-24837	Lea	O	12-1992	LANGLIE JAL UNIT #002	185433	KENSON OPERATING COMPANY INC	1-31-24S-37E	49
30-025-11303	Lea	O	07-1996	LANGLIE JAL UNIT #012	185433	KENSON OPERATING COMPANY INC	G-31-24S-37E	50

Exhibit A to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-025-24890	Lea	O	07-1996	LANGLIE JAL UNIT #050	185433	KENSON OPERATING COMPANY INC	G-06-25S-37E	51
30-025-24480	Lea	O	10-1975	LANGLIE JAL UNIT #070	185433	KENSON OPERATING COMPANY INC	7-06-25S-37E	52
30-025-11644	Lea	O	01-1997	LANGLIE JAL UNIT #088	185433	KENSON OPERATING COMPANY INC	A-17-25S-37E	53
30-025-11635	Lea	O	05-1997	LANGLIE JAL UNIT #094	185433	KENSON OPERATING COMPANY INC	O-17-25S-37E	54
30-025-27842	Lea	O	05-1997	LANGLIE JAL UNIT #097	185433	KENSON OPERATING COMPANY INC	P-32-24S-37E	55
30-025-27844	Lea	O	02-1985	LANGLIE JAL UNIT #099	185433	KENSON OPERATING COMPANY INC	K-32-24S-37E	56
30-025-28406	Lea	O	08-1993	LANGLIE JAL UNIT #103	185433	KENSON OPERATING COMPANY INC	P-01-24S-37E	57
30-025-28963	Lea	O	06-1998	LANGLIE JAL UNIT #106	185433	KENSON OPERATING COMPANY INC	A-32-24S-37E	58
30-025-11306	Lea	O	09-1988	LANGLIE JAL UNIT #301	185433	KENSON OPERATING COMPANY INC	4-31-24S-37E	59
30-025-00789	Lea	O	11-1995	HOVER 1 #001	12576	KERSEY & CO	A-32-17S-32E	60
30-025-29786	Lea	O	05-1994	E B ANDERSON #003	12627	KEVIN O BUTLER & ASSOC INC	M-06-13S-38E	61
30-025-21806	Lea	O	01-1998	FEDERAL A #001	12627	KEVIN O BUTLER & ASSOC INC	P-12-15S-34E	62
30-025-29066	Lea	O	12-1992	STATE LAND 76 #003	12627	KEVIN O BUTLER & ASSOC INC	9-02-16S-32E	63
30-025-29980	Lea	O	08-1997	BYERS #001	13925	MALLON OIL CO	I-03-17S-37E	64
30-025-21930	Lea	O	NONE	GALLAGHER STATE #001	13925	MALLON OIL CO	1-03-17S-34E	65

Exhibit A to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-025-32617	Lea	O	NONE	MALLON 34 FEDERAL #006	13925	MALLON OIL CO	C-34-19S-34E	66
30-025-22029	Lea	O	01-1997	MOBIL STATE #001	13925	MALLON OIL CO	G-03-17S-34E	67
30-025-26749	Lea	O	05-1997	PENNZOIL STATE #002	13925	MALLON OIL CO	B-18-16S-37E	68
30-025-27323	Lea	O	11-1994	PENNZOIL STATE #003	13925	MALLON OIL CO	C-18-16S-37E	69
30-025-27498	Lea	O	07-1982	PENNZOIL STATE #004	13925	MALLON OIL CO	2-18-16S-37E	70
30-025-30497	Lea	O	02-1995	PRICE FAMILY TRUST #002	13925	MALLON OIL CO	N-01-17S-37E	71
30-025-24936	Lea	O	01-1988	STATE C #003	13925	MALLON OIL CO	O-17-16S-37E	72
30-025-27433	Lea	O	04-1996	STATE C #004	13925	MALLON OIL CO	G-20-16S-37E	73
30-025-29445	Lea	O	10-1994	VIERSEN #002	13925	MALLON OIL CO	O-04-17S-37E	74
30-025-29885	Lea	O	05-1994	WALDRON #002	13925	MALLON OIL CO	3-03-17S-37E	75

Exhibit B to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-005-20967	Chaves	O	NONE	GULF WILCOX #001	3292	C E LARUE & B M MUNCY JR	P-19-08S-31E	76
30-025-00839	Lea	I	03-1995	PEARSALL QUEEN SAND UNIT #001	3292	C E LARUE & B M MUNCY JR	E-04-18S-32E	77
30-025-00842	Lea	I	03-1995	PEARSALL QUEEN SAND UNIT #001	3292	C E LARUE & B M MUNCY JR	1-05-18S-32E	78
30-025-00846	Lea	I	12-1992	PEARSALL QUEEN SAND UNIT #001	3292	C E LARUE & B M MUNCY JR	I-05-18S-32E	79
30-025-20242	Lea	I	12-1991	PEARSALL QUEEN SAND UNIT #001	3292	C E LARUE & B M MUNCY JR	K-04-18S-32E	80
30-025-21711	Lea	I	12-1991	PEARSALL QUEEN SAND UNIT #001	3292	C E LARUE & B M MUNCY JR	O-32-17S-32E	81
30-025-00838	Lea	I	03-1995	PEARSALL QUEEN SAND UNIT #002	3292	C E LARUE & B M MUNCY JR	3-04-18S-32E	82
30-025-05249	Lea	S	12-1999	MEXICO F #004	152464	CRESTRIDGE DRILLING AND PRODUCTION CO., LLC	4-02-15S-37E	83
30-025-02531	Lea	S	NONE	AMERADA STATE #003	9809	HAL J RASMUSSEN OPER INC	G-13-21S-34E	84
30-025-02537	Lea	S	NONE	KAISER STATE #008	9809	HAL J RASMUSSEN OPER INC	O-13-21S-34E	85
30-025-02538	Lea	S	NONE	KAISER STATE #009	9809	HAL J RASMUSSEN OPER INC	F-13-21S-34E	86
30-025-03431	Lea	S	NONE	SHELL STATE #014	9809	HAL J RASMUSSEN OPER INC	3-07-21S-35E	87
30-025-02554	Lea	S	NONE	STATE #002	9809	HAL J RASMUSSEN OPER INC	K-16-21S-34E	88
30-025-10748	Lea	S	08-1996	STATE JCT #001	9809	HAL J RASMUSSEN OPER INC	B-16-23S-36E	89
30-025-03436	Lea	S	NONE	WILSON A STATE #001	9809	HAL J RASMUSSEN OPER INC	G-07-21S-35E	90

Exhibit B to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-025-02571	Lea	S	NONE	WILSON STATE #001	9809	HAL J RASMUSSEN OPER INC	G-23-21S-34E	91
30-025-02577	Lea	s		WILSON STATE #002	9809	HAL J RASMUSSEN OPER INC	J-23-21S-34E	92
30-025-02577	Lea	S	NONE	WILSON STATE #021	9809	HAL J RASMUSSEN OPER INC	J-23-21S-34E	93
30-025-11304	Lea	I	05-1999	LANGLIE JAL UNIT #001	185433	KENSON OPERATING COMPANY INC	B-31-24S-37E	94
30-025-11311	Lea	I	12-1992	LANGLIE JAL UNIT #003	185433	KENSON OPERATING COMPANY INC	D-32-24S-37E	95
30-025-11314	Lea	I	07-1997	LANGLIE JAL UNIT #007	185433	KENSON OPERATING COMPANY INC	H-32-24S-37E	96
30-025-11308	Lea	I	12-1995	LANGLIE JAL UNIT #010	185433	KENSON OPERATING COMPANY INC	E-32-24S-37E	97
30-025-11293	Lea	I	08-1997	LANGLIE JAL UNIT #011	185433	KENSON OPERATING COMPANY INC	H-31-24S-37E	98
30-025-11305	Lea	I	12-1992	LANGLIE JAL UNIT #015	185433	KENSON OPERATING COMPANY INC	3-31-24S-37E	99
30-025-11298	Lea	I	12-1995	LANGLIE JAL UNIT #018	185433	KENSON OPERATING COMPANY INC	I-31-24S-37E	100
30-025-11475	Lea	I	12-1992	LANGLIE JAL UNIT #031	185433	KENSON OPERATING COMPANY INC	4-06-25S-37E	101
30-025-11452	Lea	I	01-2000	LANGLIE JAL UNIT #036	185433	KENSON OPERATING COMPANY INC	3-05-25S-37E	102
30-025-11442	Lea	I	12-1992	LANGLIE JAL UNIT #039	185433	KENSON OPERATING COMPANY INC	4-04-25S-37E	103
30-025-11443	Lea	I	11-1997	LANGLIE JAL UNIT #044	185433	KENSON OPERATING COMPANY INC	E-04-25S-37E	104
30-025-11473	Lea	I	12-1992	LANGLIE JAL UNIT #051	185433	KENSON OPERATING COMPANY INC	F-06-25S-37E	105
30-025-11469	Lea	I	12-1992	LANGLIE JAL UNIT #053	185433	KENSON OPERATING COMPANY INC	6-06-25S-37E	106

Exhibit B to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-025-23884	Lea	I	12-1995	LANGLIE JAL UNIT #057	185433	KENSON OPERATING COMPANY INC	L-05-25S-37E	107
30-025-24879	Lea	I	12-1995	LANGLIE JAL UNIT #060	185433	KENSON OPERATING COMPANY INC	I-05-25S-37E	108
30-025-24880	Lea	O	04-1999	LANGLIE JAL UNIT #062	185433	KENSON OPERATING COMPANY INC	M-04-25S-37E	109
30-025-11451	Lea	I	05-1999	LANGLIE JAL UNIT #063	185433	KENSON OPERATING COMPANY INC	P-05-25S-37E	110
30-025-23885	Lea	I	05-2000	LANGLIE JAL UNIT #065	185433	KENSON OPERATING COMPANY INC	N-05-25S-37E	111
30-025-11472	Lea	I	12-1995	LANGLIE JAL UNIT #067	185433	KENSON OPERATING COMPANY INC	P-06-25S-37E	112
30-025-11471	Lea	O	03-1999	LANGLIE JAL UNIT #068	185433	KENSON OPERATING COMPANY INC	O-06-25S-37E	113
30-025-11470	Lea	I	12-1992	LANGLIE JAL UNIT #069	185433	KENSON OPERATING COMPANY INC	N-06-25S-37E	114
30-025-23869	Lea	I	12-1999	LANGLIE JAL UNIT #071	185433	KENSON OPERATING COMPANY INC	D-08-25S-37E	115
30-025-11506	Lea	I	02-1995	LANGLIE JAL UNIT #072	185433	KENSON OPERATING COMPANY INC	C-08-25S-37E	116
30-025-11497	Lea	I	05-1999	LANGLIE JAL UNIT #073	185433	KENSON OPERATING COMPANY INC	B-08-25S-37E	117
30-025-11510	Lea	I	05-1999	LANGLIE JAL UNIT #075	185433	KENSON OPERATING COMPANY INC	D-09-25S-37E	118
30-025-24881	Lea	O	04-1999	LANGLIE JAL UNIT #076	185433	KENSON OPERATING COMPANY INC	E-09-25S-37E	119
30-025-11498	Lea	I	05-1999	LANGLIE JAL UNIT #077	185433	KENSON OPERATING COMPANY INC	H-08-25S-37E	120
30-025-23870	Lea	I	05-1999	LANGLIE JAL UNIT #079	185433	KENSON OPERATING COMPANY INC	F-08-25S-37E	121
30-025-11501	Lea	I	05-1999	LANGLIE JAL UNIT #081	185433	KENSON OPERATING COMPANY INC	J-08-25S-37E	122
30-025-11513	Lea	I	05-1999	LANGLIE JAL UNIT #083	185433	KENSON OPERATING COMPANY INC	L-09-25S-37E	123

Exhibit B to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-025-11493	Lea	I	05-1999	LANGLIE JAL UNIT #085	185433	KENSON OPERATING COMPANY INC	P-08-25S-37E	124
30-025-11630	Lea	I	05-1999	LANGLIE JAL UNIT #089	185433	KENSON OPERATING COMPANY INC	H-17-25S-37E	125
30-025-11633	Lea	I	05-1999	LANGLIE JAL UNIT #093	185433	KENSON OPERATING COMPANY INC	P-17-25S-37E	126
30-025-27841	Lea	O	12-1999	LANGLIE JAL UNIT #096	185433	KENSON OPERATING COMPANY INC	N-32-24S-37E	127
30-025-28407	Lea	O	05-1999	LANGLIE JAL UNIT #104	185433	KENSON OPERATING COMPANY INC	M-32-24S-37E	128
30-025-29408	Lea	O	05-1999	LANGLIE JAL UNIT #112	185433	KENSON OPERATING COMPANY INC	C-08-25S-37E	129
30-025-31014	Lea	W	05-1999	LANGLIE JAL UNIT #115	185433	KENSON OPERATING COMPANY INC	I-05-25S-37E	130
30-025-22454	Lea	S	05-1996	E B ANDERSON #002	12627	KEVIN O BUTLER & ASSOC INC	M-06-13S-38E	131
30-025-02361	Lea	O	01-2000	EAST EK UNIT #002	12627	KEVIN O BUTLER & ASSOC INC	J-22-18S-34E	132
30-025-02357	Lea	O	01-2000	EAST EK UNIT #003	12627	KEVIN O BUTLER & ASSOC INC	K-22-18S-34E	133
30-025-22362	Lea	O		EAST EK UNIT #007	12627	KEVIN O BUTLER & ASSOC INC	G-22-18S-34E	134
30-025-22730	Lea	I		EAST EK UNIT #009	12627	KEVIN O BUTLER & ASSOC INC	E-23-18S-34E	135
30-025-27948	Lea	O		EAST EK UNIT #012	12627	KEVIN O BUTLER & ASSOC INC	F-22-18S-34E	136
30-025-20991	Lea	S		GULF FEDERAL #001	12627	KEVIN O BUTLER & ASSOC INC	H-12-15S-34E	137
30-025-21186	Lea	O		MAXWELL #001	12627	KEVIN O BUTLER & ASSOC INC	F-06-13S-38E	138
30-025-23089	Lea	S	NONE	MAXWELL #002	12627	KEVIN O BUTLER & ASSOC INC	E-06-13S-38E	139

Exhibit B to Application

API #	County	Type	Last Production/ Injection	Well Name and Number	OGRID	Operator	ULSTR	Seq. No.
30-005-01180	Chaves	O		SO CAPROCK QUEEN UNIT #012	12627	KEVIN O BUTLER & ASSOC INC	L-33-14S-31E	140
30-005-01193	Chaves	O		SO CAPROCK QUEEN UNIT #014	12627	KEVIN O BUTLER & ASSOC INC	N-33-14S-31E	141
30-005-01161	Chaves	O		SO CAPROCK QUEEN UNIT #015	12627	KEVIN O BUTLER & ASSOC INC	O-28-14S-31E	142
30-025-00376	Lea	O	01-1999	STATE LAND 76 #001	12627	KEVIN O BUTLER & ASSOC INC	10-02-16S-32E	143
30-025-29485	Lea	O	03-2000	BE SHIPP ESTATE #001	13925	MALLON OIL CO	G-04-17S-37E	144
30-025-32784	Lea	O	02-2000	MALLON 34 FEDERAL #009	13925	MALLON OIL CO	G-34-19S-34E	145
30-025-30351	Lea	O	06-1999	PRICE FAMILY TRUST #001	13925	MALLON OIL CO	E-01-17S-37E	146
30-025-30177	Lea	O	03-2000	SIMMONS ESTATE #001	13925	MALLON OIL CO	N-03-17S-37E	147

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Happy Oil Co. Inc.
811 Bullock Ave.
Artesia, NM 88210

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6500

PS Form 3811, July 1999 Domestic Return Receipt Case 12758 102595-00-M-0952

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0021 3771 6500

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	**$**

Postmark Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)
Happy Oil Co. Inc.
Street, Apt. No.; or PO Box No. 811 Bullock Ave.
City, State, ZIP+ 4 Artesia, NM 88210

PS Form 3800, February 2000 See Reverse for Instructions

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Hal J. Rasmussen Operating Inc
550 West TEXAS AVE, Ste. 200
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6494

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

case 12758

PS Form 3800, February 2000 See Reverse for Instructions

Hal J. Rasmussen Operating Inc.
550 W. Texas Ave., Ste. 200
Midland, TX 79701

7000 0520 0021 3771 6494

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

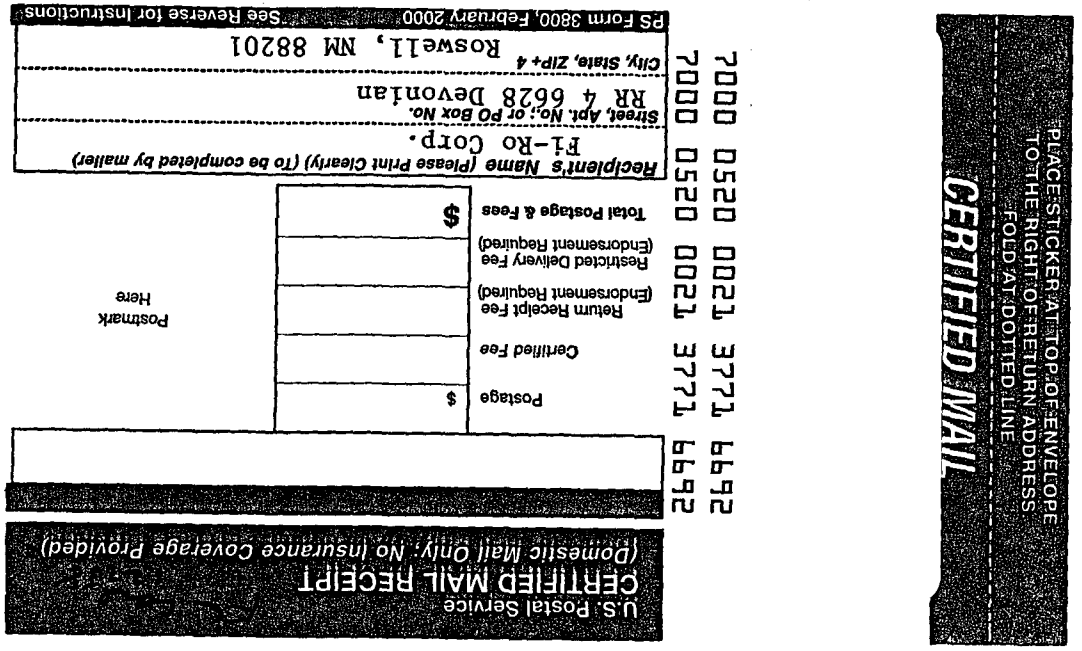
Postage $
Certified Fee
Return Receipt Fee (Endorsement Required)
Restricted Delivery Fee (Endorsement Required)
Total Postage & Fees $

Postmark Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)
Hal J. Rasmussen Operating Inc.
Street, Apt. No.; or PO Box No.
550 W. Texas Ave., Ste. 200
City, State, ZIP+4
Midland, TX 79701

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

FI-RO CORP.
RR 4
6628 Devonian
Roswell, NM 88201

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6692

PS Form 3811, July 1999 Domestic Return Receipt Case 1275 102595-00-M-0952

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Erwin Oil & Gas Ltd. Co.
PO Box 1506
Hobbs, NM 88241-1506

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☐ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6685

PS Form 3811, July 1999 Domestic Return Receipt Case 12758 102595-00-M-0952

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS FOLD AT DOTTED LINE

CERTIFIED MAIL

7000 0520 0021 3771 6685

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

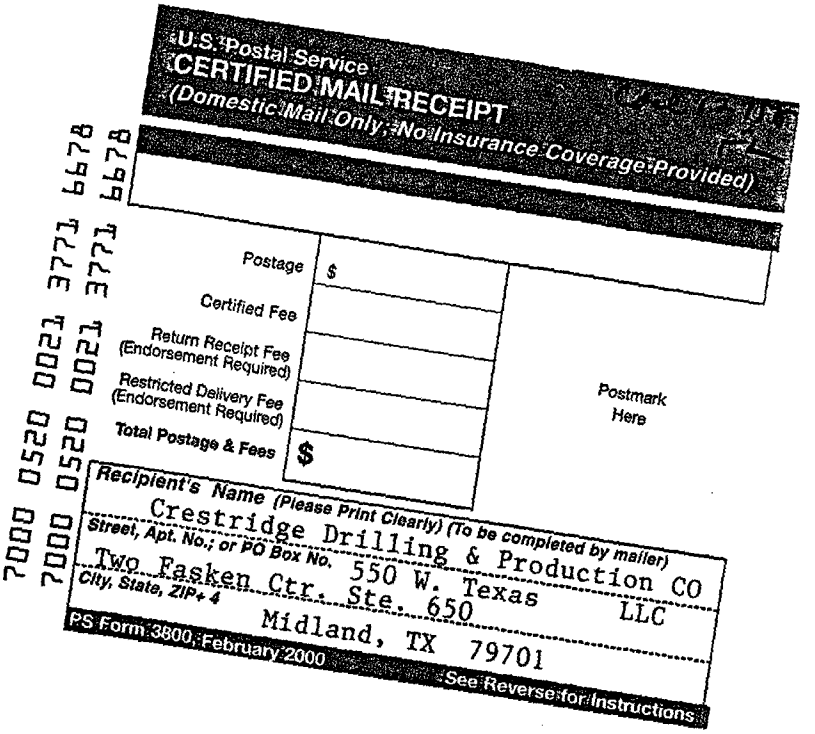
Postmark Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)
Erwin Oil & Gas Ltd. Co.

Street, Apt. No.; or PO Box No. PO Box 1506

City, State, ZIP+ 4 Hobbs, NM 88241-1506

PS Form 3800, February 2000 See Reverse for Instructions



SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Crestridge Drilling and
Production Co, LLC
550 West Texas
Two Fasken Center, Ste. 650
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6678

PS Form 3811, July 1999 Domestic Return Receipt case 12758 102595-00-M-0952

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS FOLD AT DOTTED LINE

CERTIFIED MAIL

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0021 3771 6647

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

***Recipient's Name** (Please Print Clearly) (To be completed by mailer)*
C W Stumhoffer
Street, Apt. No.; or PO Box No.
PO Box 100416
City, State, ZIP+ 4 Ft. Worth, TX 76185

PS Form 3800, February 2000 See Reverse for Instructions

FL

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

C W Stumhoffer
PO Box 100416
Ft. Worth, TX 76185

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature
X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6647

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

C 450 / 2758

FL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

C E Larue & B M Muncy Jr.
PO Box 1370
Artesia, NM 88211-1370

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6708

PS Form 3811, July 1999 Domestic Return Receipt Case 12758 102595-99-M-1789

PS Form 3800, February 2000 *See Reverse for Instructions

Recipient's Name (Please Print Clearly) (To be completed by mailer)
C E Larue & B M Muncy Jr.

Street, Apt. No.; or PO Box No.
PO Box 1370

City, State, ZIP+ 4
Artesia, NM 88211-1370

Total Postage & Fees	$
Restricted Delivery Fee (Endorsement Required)	
Return Receipt Fee (Endorsement Required)	
Certified Fee	
Postage	$

Postmark Here

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0021 3771 6708

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS
FOLD AT DOTTED LINE
CERTIFIED MAIL

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS FOLD AT DOTTED LINE

CERTIFIED MAIL

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0021 3771 6630

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)
Bettis, Boyle & Stovall
Street, Apt. No.; or PO Box No. PO Box 1240
City, State, ZIP+ 4 Graham, TX 76450

PS Form 3800, February 2000 See Reverse for Instructions

FL

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Bettis, Boyle & Stovall
PO Box 1240
Graham, TX 76450

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) | B. Date of Delivery

C. Signature
X ☐ Agent ☐ Addressee

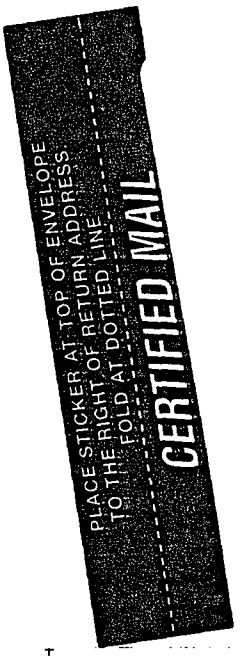
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

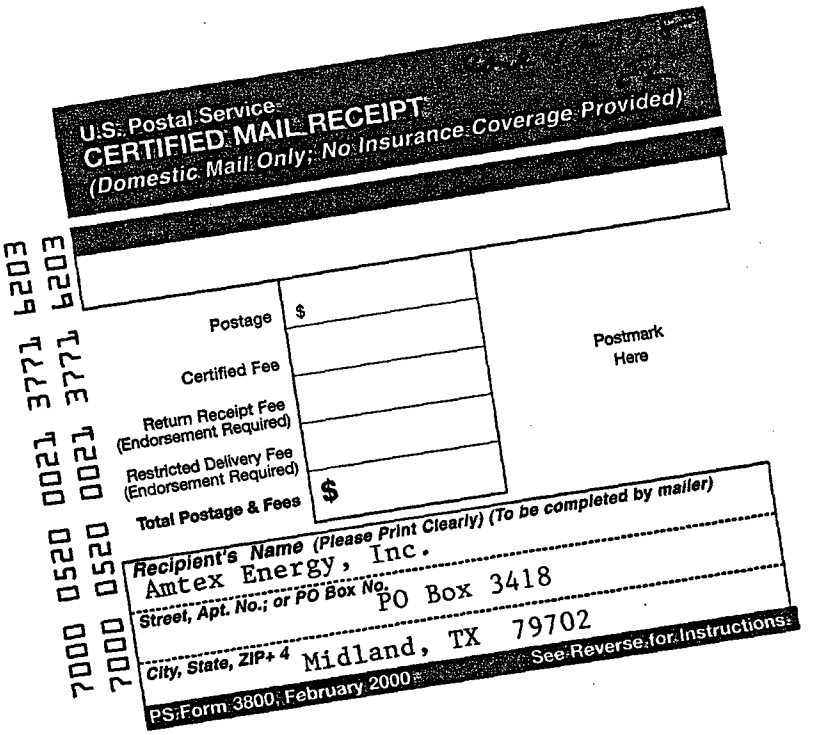
3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label) 7000 0520 0021 3771 6630

PS Form 3811, July 1999 Domestic Return Receipt Case 12758 102595-00-M-0952





FV

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Amtex Energy, Inc.
PO Box 3418
Midland, TX 79702

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

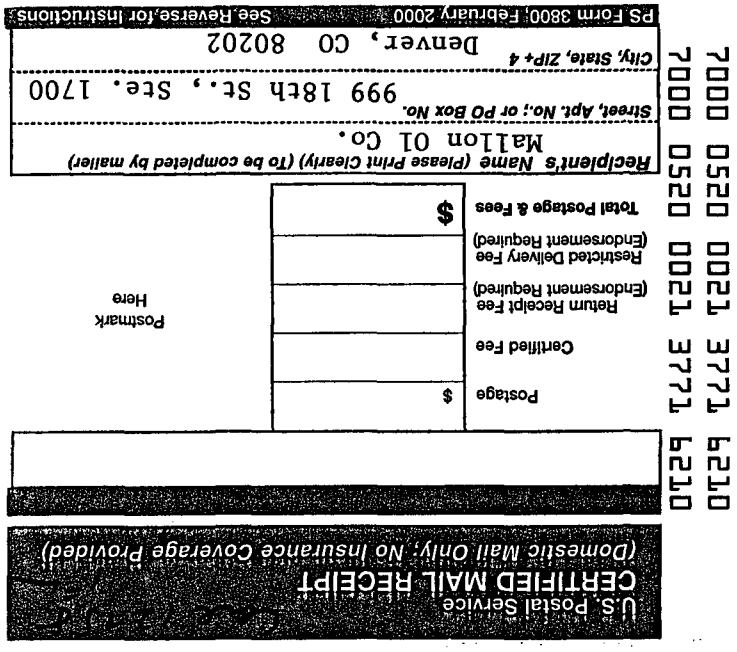
D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6203

PS Form 3811, July 1999 Domestic Return Receipt cone 12758 102595-00-M-0952



SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Mallon Oil Co.
999 18th St., Ste. 1700
Denver, CO 80202

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. *Signature*

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6210

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

case 12758

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0021 3771 6517

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

***Recipient's Name** (Please Print Clearly) (To be completed by mailer)*
John A. Yates, Jr.
Street, Apt. No.; or PO Box No. PO Box 853
City, State, ZIP+ 4 Artesia, NM 88210

PS Form 3800, February 2000 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

John A. Yates, Jr.
PO Box 853
Artesia, Nm 88210

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature ☐ Agent ☐ Addressee
X

D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6517

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Case 13758

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS FOLD AT DOTTED LINE

CERTIFIED MAIL

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0021 3771 6524

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)
Kenson Operating Co. Inc.
Street, Apt. No.; or PO Box No. c/o Rimco Holdings Corp.
600 Travis St. Ste 6875
City, State, ZIP+ 4 Houston, TX 77002

PS Form 3800, February 2000 See Reverse for Instructions

SENDER: *COMPLETE THIS SECTION*

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kenson Operating Co. Inc.
c/o Rimco Holdings Corp.
600 Travis St., Ste 6875
Houston, TX 77002

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* B. Date of Delivery

C. Signature
X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)* 7000 0520 0021 3771 6524

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

Case 12758

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS FOLD AT DOTTED LINE

CERTIFIED MAIL

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0021 3771 6531

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)
Kersey & Co.
Street, Apt. No.; or PO Box No.
PO Box 1248
City, State, ZIP+ 4
Fredericksburg, TX 78624

PS Form 3800, February 2000 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kersey & Co.
PO Box 1248
Fredericksburgh, TX 78624

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) | B. Date of Delivery

C. Signature
X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label) 7000 0520 0021 3771 6531

PS Form 3811, July 1999 Domestic Return Receipt Case 12756 102595-00-M-0952

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Kevin O.Butler & Assoc Inc.
500 W. Texas, Ste 995
Midland, TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Received by *(Please Print Clearly)* | B. Date of Delivery

C. Signature

X ☐ Agent ☐ Addressee

D. Is delivery address different from item 1? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type
☑ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? *(Extra Fee)* ☐ Yes

2. Article Number *(Copy from service label)*

7000 0520 0021 3771 6548

PS Form 3811, July 1999 Domestic Return Receipt case 12758 102595-00-M-0952

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF RETURN ADDRESS. FOLD AT DOTTED LINE

CERTIFIED MAIL

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

7000 0520 0021 3771 6548

Postage	$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	$

Postmark Here

Recipient's Name (Please Print Clearly) (To be completed by mailer)
Kevin O. Butler & Assoc Inc.
Street, Apt. No.; or PO Box No.
500 W. Texas, Ste 995
City, State, ZIP+4
Midland, TX 79701

PS Form 3800, February 2000 See Reverse for Instructions

AMTEX ENERGY INC
PO BOX 3418
MIDLAND, TX 79702

BETTIS BOYLE & STOVALL
PO BOX 1240
GRAHAM, TX 76450

C E LARUE & B M MUNCY JR
PO BOX 1370
ARTESIA, NM 88211-1370

C W STUMHOFFER
P.O. BOX 100416
FORT WORTH, TX 76185

CRESTRIDGE DRILLING AND
PRODUCTION CO., LLC
550 WEST TEXAS
TWO FASKEN CENTER, STE. 650
MIDLAND, TX 79701

ERWIN OIL & GAS LTD CO
PO BOX 1506
HOBBS, NM 88241-1506

FI-RO CORP
RR4
6628 DEVONIAN
ROSWELL, NM 88201

HAL J RASMUSSEN OPER INC
550 WEST TEXAS AVENUE, SUITE 200
MIDLAND, TX 79701

HAPPY OIL CO INC
811 BULLOCK AVE
ARTESIA, NM 88210

JOHN A YATES, JR.
PO BOX 853
ARTESIA, NM 88210

KENSON OPERATING COMPANY INC
C/O RIMCO HOLDINGS CORP
600 TRAVIS ST STE 6875
HOUSTON, TX 77002

KERSEY & CO
PO BOX 1248
FREDERICKSBURG, TX 78624

KEVIN O BUTLER & ASSOC INC
500 W. TEXAS, STE 955
MIDLAND, TX 79701

MALLON OIL CO
999 18TH ST, STE 1700
DENVER, CO 80202