

MERIDIAN OIL INC

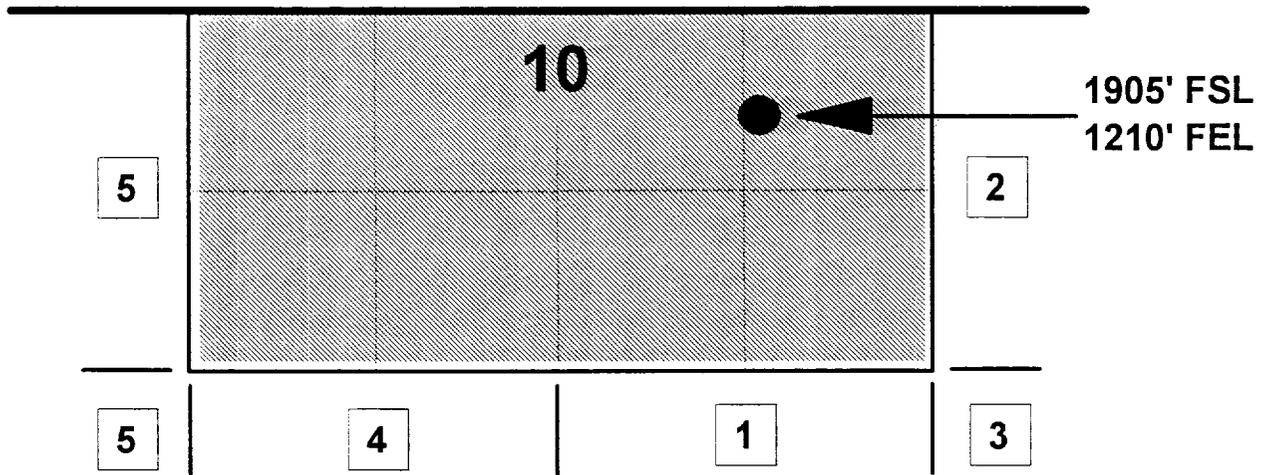
MADDOX COM #100

OFFSET OPERATOR \ OWNER PLAT

Off Pattern Fruitland Coal Well Location

Township 32 North, Range 11 West

COLORADO



1) Meridian Oil Inc

2) Southland Royalty Company

3) Southland Royalty Company &

Conoco, Inc. 10 Desta Drive, Suite 100W, Midland, TX 79705-4500

4) Conoco, Inc. 10 Desta Drive, Suite 100W, Midland, TX 79705-4500

5) Phillips Petroleum Company 5525 Highway 64, Farmington, NM 87401

**Maddox Com #100
Owner List**

V. F. Neuhas Properties, Inc. & Marital Trust
P. O. Drawer 1270
McAllen, TX 78505

Elyse Lee Kilgore Trust
Lee W. Kilgore Trust
c/o Ms. Donna Lisa Johnson, Trustee
1200 Melissa Court
Santa Rosa, CA 95409

Jewell M. Lanier Trust
c/o McAllen National Bank, Trustee
ATTN: Ms. H. Villarreal, Trust Ofcr.
P. O. Box 5555
McAllen, TX 78502-5555

Williams Production Company
Attn: Ms. Kris Russell
P.O. Box 58900
Salt Lake City, UT 84158-0900

Vastar Resources, Inc.
Attn: Ms. C. J. Shull
P. O. Box 1610
Midland, TX 79702-1610

Conoco Inc.
10 Desta Drive, Suite 100W
Midland, TX 79705-4500

Phillips Petroleum Company
5525 Hwy 64
Farmington, NM 87401

Robert L. & Maxine Maddox Rev. Trust
c/o Maxine Maddox, Trustee
224 Las Mananitas
Santa Fe, NM 87501

Piper Investments, Ltd.
7263 Pelona Ct. NE
Rio Rancho, NM 87124

Minerals Management Service
Royalty Management Program
P. O. Box 5810
Denver, CO 80217-5810

Bureau of Land Management
1235 La Plata Hwy
Farmington, NM 87401

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 Jewell M. Lanier Trust
 c/o McAllen National Bank
 Attn: Ms. H. Villarreal, Trust
 P.O. Box 5555
 McAllen, TX 78502-5555

4a. Article Number
 023 847 894

4b. Service Type

Registered Insured

Certified COD

Express Mail Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

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

6. Signature (Agent)

[Signature]

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

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 Williams Production
 Attn: Ms. Kris Russell
 PO Box 58900
 Salt Lake City, UT 84158-8900

4a. Article Number
 023 847 895

4b. Service Type

Registered Insured

Certified COD

Express Mail Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

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

6. Signature (Agent)

[Signature]

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

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
 V. F. Neuhas Properties, Inc.
 + Marital Trust
 PO Drawer 1270
 McAllen, TX, 78502

4a. Article Number
 023 847 882

4b. Service Type

Registered Insured

Certified COD

Express Mail Return Receipt for Merchandise

7. Date of Delivery
 SEP-27-1994

5. Signature (Addressee)

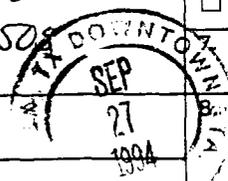
8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

[Signature]

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

Thank you for using Return Receipt Service.



Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

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

Consult postmaster for fee.

3. Article Addressed to:
 Vastar Resources, Inc
 Attn: Ms. CS Skull
 PO Box 1410
 Midland, TX 79702 7610

4a. Article Number
 023 847 890

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

7. Date of Delivery
 SEP 24 1994

5. Signature (Addressee)

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

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

Consult postmaster for fee.

3. Article Addressed to:
 Minerals Management
 Royalty Management Program
 PO Box 5810
 Denver, CO 80217-5810
 CHAMPION MESSENGER

4a. Article Number
 023 847 885

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

7. Date of Delivery
 SEP 26 1994

5. Signature (Addressee)
 P. O. BOX 6954

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

6. Signature (Agent)
 DENVER, CO 80206
 AGENT FOR MINERAL & MGT SERVICE

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

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

Consult postmaster for fee.

3. Article Addressed to:
 Conoco Inc.
 10 Desta Dr. Suite 1000
 Midland, TX
 79705-4500

4a. Article Number
 023 847 889

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

7. Date of Delivery
 SEP 26 1994

5. Signature (Addressee)

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

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

Consult postmaster for fee.

3. Article Addressed to:
 Bureau of Land Management
 1235 La Plata Hwy
 Farmington, NM
 87401

4a. Article Number
 023 847 884

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

7. Date of Delivery
 9-23-94

5. Signature (Addressee)

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

6. Signature (Agent)
 Leonard Derrige

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

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

Consult postmaster for fee.

3. Article Addressed to:
 Piper Investments, Ltd
 7263 Pelona Ct. NE
 Rio Rancho, NM
 87124

4a. Article Number
 023 847 886

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

7. Date of Delivery
 9-24-94

5. Signature (Addressee)
 A. V. Piper

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

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

Consult postmaster for fee.

3. Article Addressed to:
 Robert L. + Maxine Maddox
 Rev. Trust c/o Maxine Maddox Trust
 224 Las Mananitas
 Santo, 2e NM 87501

4a. Article Number
 023 847 887

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

7. Date of Delivery
 9-23-94

5. Signature (Addressee)
 X Maxine Maddox

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

6. Signature (Agent)

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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

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

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Phillips Petroleum Co.
5525 Hwy 64
Farmington, NM
87401

4a. Article Number
023 847 888

4b. Service Type

<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

5. Signature (Addressee)
W. Aronson

7. Date of Delivery

6. Signature (Agent)

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

Thank you for using Return Receipt Service.