

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

In the matter of the hearing called
by the Oil Conservation Division
for the purpose of considering:

CASE NO. 11377

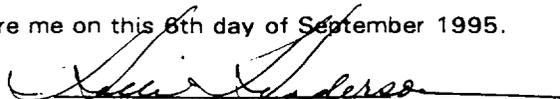
Application of Nearburg Exploration
Company for an Unorthodox Gas Well Location,
Trigg "29" Federal Com Well No 1
Eddy County, New Mexico.

CERTIFICATE OF MAILING AND COMPLIANCE WITH ORDER R-8054

W. THOMAS KELLAHIN, attorney in fact and authorized representative of Nearburg Exploration Company, states that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on the 16th day of August, 1995 I caused to be sent, by certified mail return receipt requested, notice of this hearing and a copy of the application for the referenced case along with the cover letter, at least twenty days prior to the hearing set for September 7, 1995, to the parties shown in the application as evidenced by the attached copies of receipt cards, and that pursuant to Division Rule 1207, notice has been given at the correct addresses provided by such rule.

W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me on this 8th day of September 1995.


Notary Public

My Commission Expires: June 15th, 1998

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.
 • A: Nearburg/Trigg09/07/95
 • does: August 16, 1995
 • W:
 • T:
 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:
 Tom Ingram
 Drawer 1757
 Roswell, New Mexico 88201

4a. Article Number
 194 406 606

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

7. Date of Delivery
 08/19/95

5. Signature (Addressee)
 Tom Ingram

6. Signature (Agent)

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

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 194 406 606

Receipt for Certified Mail
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

1993 Sent to
 Tom Ingram
 Drawer 1757
 Roswell, New Mexico 88201

PS F

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage	\$

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.
 • A: Nearburg/Trigg09/07/95
 • does: August 16, 1995
 • W:
 • T:
 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:
 Judy B. Gurley Oil & Gas Account
 2005 Hemlock
 Borger, Texas 79007

4a. Article Number
 194 406 607

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

7. Date of Delivery

5. Signature (Addressee)
 Judy B. Gurley

6. Signature (Agent)

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

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 194 406 607

Receipt for Certified Mail
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

1993 Sent to
 Judy B. Gurley Oil & Gas Account
 2005 Hemlock
 Borger, Texas 79007

PS F

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

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.
 • Att: Nearburg/Trigg09/07/95
 • does: August 16, 1995
 • W:
 • T:
 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:
 Douglas L. Cone
 Box 64344
 Lubbock, Texas 79484

4a. Article Number
 194 406 608

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

7. Date of Delivery
 8/18/95

5. Signature (Addressee)

6. Signature (Agent)
 Doree Schoolcraft

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

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

Z 194 406 608

Receipt for Certified Mail
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

1993 Sent to
 Douglas L. Cone
 Box 64344
 Lubbock, Texas 79484

PS F

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

Nearburg/Trigg09/07/95
 August 16, 1995

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 in the space provided.
- The form must be returned to the post office.

Nearburg/Trigg09/07/95
August 16, 1995

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:

Murchison Oil and Gas
1445 Ross
Ste 5300
Dallas, Texas 75202

4a. Article Number
194 406 599

4b. Service Type

Registered Insured

Certified COD

Express Mail Return Receipt for Merchandise

7. Date of Delivery
AUG 18 1995

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Z 194 406 599

 **Receipt for Certified Mail**
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to

Murchison Oil and Gas
1445 Ross
Ste 5300
Dallas, Texas 75202

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	

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 in the space provided.
- The form must be returned to the post office.

Nearburg/Trigg09/07/95
August 16, 1995

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:

Union Pacific Oil & Gas Co.
Box 7
Fort Worth, Texas 76101

4a. Article Number
194 406 600

4b. Service Type

Registered Insured

Certified COD

Express Mail Return Receipt for Merchandise

7. Date of Delivery
AUG 18 1995

5. Signature (Addressee)

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

6. Signature (Agent)

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Z 194 406 600

 **Receipt for Certified Mail**
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to

Union Pacific Oil & Gas Co.
Box 7
Fort Worth, Texas 76101

Special Delivery Fee	
----------------------	--

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 in the space provided.
- The form must be returned to the post office.

Nearburg/Trigg09/07/95
August 16, 1995

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:

Eugene Nearburg
1608 Lakeway Blvd.
Austin, Texas 78734

4a. Article Number
194 406 605

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)

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

Z 194 406 605

 **Receipt for Certified Mail**
No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

Sent to

Eugene Nearburg
1608 Lakeway Blvd.
Austin, Texas 78734

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

Nearburg/Trigg09/07/95
August 16, 1995

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.
 • At does Nearburg/Trigg09/07/95
 • W August 16, 1995
 • T 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:
 Exxon Corporation
 PO Box 1600
 Midland, Texas 79702

4a. Article Number
 194 406 611

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

7. Date of Delivery
 AUG 18 1995

5. Signature (Addressee)
 [Signature]

6. Signature (Agent)
 [Signature]

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

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.



2 194 406 611
 Sent to
Exxon Corporation
 PO Box 1600
 Midland, Texas 79702

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

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.
 • At does Nearburg/Trigg09/07/95
 • W August 16, 1995
 • T 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:
 PC Ltd.
 PO Box 911
 Breckenridge, Texas 76024

4a. Article Number
 194 406 613

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

7. Date of Delivery
 8/17/95

5. Signature (Addressee)

6. Signature (Agent)
 [Signature]

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

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.



2 194 406 613
 Sent to
PC Ltd.
 PO Box 911
 Breckenridge, Texas 76024

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

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.
 • At does Nearburg/Trigg09/07/95
 • W August 16, 1995
 • T 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:
 MW Petroleum Corporation
 200 East Randolph Drive
 Chicago, Illinois 60607

4a. Article Number
 194 406 609

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

7. Date of Delivery
 8-22-95

5. Signature (Addressee)

6. Signature (Agent)
 [Signature]

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

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.



2 194 406 609
 Sent to
MW Petroleum Corporation
 200 East Randolph Drive
 Chicago, Illinois 60607

PS Form 3811, December 1991 ☆ U.S.G.P.O. : 1992-307-530

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

Nearburg/Trigg09/07/95
August 16, 1995

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 card to the back of the envelope.
 • Write clearly in ink.
 • The card must be 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:
 Amoco Production Company
 PO Box 3092
 Houston, Texas 77001
 Attn: Andy Gallo, Esq.

4a. Article Number
 194406604

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

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)
 Karen Crow

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

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

2 194 406 604

 **Receipt for Certified Mail**
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

Sent to
 Amoco Production Company
 PO Box 3092
 Houston, Texas 77001
 Attn: Andy Gallo, Esq.

PS Form

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

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 card to the back of the envelope.
 • Write clearly in ink.
 • The card must be 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:
 Devon Energy Corporation
 20 North Broadway
 Ste. 1500
 Oklahoma City, OK 73102

4a. Article Number
 194406612

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

7. Date of Delivery
 8/21/95

5. Signature (Addressee)

6. Signature (Agent)
 P. Reynolds

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

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

2 194 406 612

 **Receipt for Certified Mail**
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

Sent to
 Devon Energy Corporation
 20 North Broadway
 Ste. 1500
 Oklahoma City, OK 73102

2 194 406 610

 **Receipt for Certified Mail**
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

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 card to the back of the envelope.
 • Write clearly in ink.
 • The card must be 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:
 Atlantic Richfield Company
 PO Box 600
 Dallas, Texas 75221

4a. Article Number
 194406610

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

7. Date of Delivery

5. Signature (Addressee)

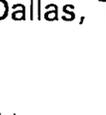
6. Signature (Agent)
 M. Reynolds

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

PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-307-530 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

2 194 406 610

 **Receipt for Certified Mail**
 No Insurance Coverage Provided
 Do not use for International Mail
 (See Reverse)

Sent to
 Atlantic Richfield Company
 PO Box 600
 Dallas, Texas 75221

PS Form

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date and Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

Nearburg/Trigg09/07/95
 August 16, 1995

Z 194 406 603



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

93 Sent to

**Ben A. Coppas, Jr.
Box 357
Waxahachie, Texas 75165**

PS For	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt Showing to Whom & Date Delivered	
	Return Receipt Showing to Whom, Date, and Addressee's Address	
	TOTAL Postage & Fees	\$
Postmark or Date		

**Nearburg/Trigg09/07/95
August 16, 1995**

Z 194 406 601



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

93 Sent to

**American Trading & Production Corporation
110 W. Louisiana
Midland, Texas 79701**

PS For	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt Showing to Whom & Date Delivered	
	Return Receipt Showing to Whom, Date, and Addressee's Address	
	TOTAL Postage & Fees	\$
Postmark or Date		

**Nearburg/Trigg09/07/95
August 16, 1995**

Z 194 406 602



Receipt for Certified Mail

No Insurance Coverage Provided
Do not use for International Mail
(See Reverse)

93 Sent to

**Joe Warren
Box 374
Waxahachie, Texas 75165**

PS For	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt Showing to Whom & Date Delivered	
	Return Receipt Showing to Whom, Date, and Addressee's Address	
	TOTAL Postage & Fees	\$
Postmark or Date		

**Nearburg/Trigg09/07/95
August 16, 1995**