

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

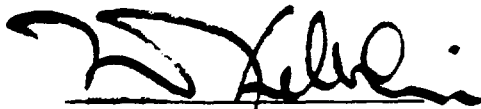
IN THE MATTER OF THE HEARING CALLED  
BY THE OIL CONSERVATION DIVISION  
FOR THE PURPOSE OF CONSIDERING:

CASE NO. 11168

Application of OXY USA, Inc.  
for Waterflood Expansion and  
Qualification for Recovered Oil  
Tax Rate, Lea County, New Mexico.

CERTIFICATE OF MAILING  
AND  
COMPLIANCE WITH ORDER R-8054

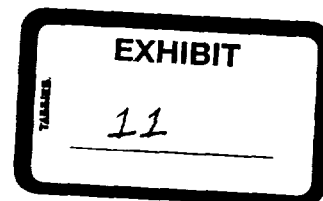
W. THOMAS KELLAHIN, attorney in fact and authorized representative of OXY USA, Inc., states that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on the 23rd day of November, 1994 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 December 15, 1994, 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 12th day of December, 1994.

  
Notary Public

My Commission Expires: June 15th, 1998



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.   
 OXY USA Inc./Myers   
 November 23, 1994   
 3. Article Addressed to:   
 Deep Wells Ranch   
 Star Route 1   
 Box 244   
 Jal, New Mexico 88252   
 4a. Article Number   
 321 036 983   
 4b. Service Type   
 ☒ Registered ☐ Insured ☐ Certified ☐ COD ☐ Express Mail ☒ Return Receipt for Merchandise   
 7. Date of Delivery   
 11-28-94   
 8. Addressee's Address (Only if requested and fee is paid)   
 5. Signature (Addressee)   
 Kelly Myers   
 6. Signature (Agent)   
 PS Form 3811, December 1991 U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT   
 Thank you for using Return Receipt Service.

P 321 036 983   
 Receipt for Certified Mail   
 No Insurance Coverage Provided   
 Do not use for International Mail (See Reverse)   
 Deep Wells Ranch   
 Star Route 1   
 Box 244   
 Jal, New Mexico 88252   
 1991   
 Special Delivery Fee   
 Restricted Delivery Fee   
 Return Receipt showing to Whom & Date Delivered

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.   
 OXY USA Inc./Myers   
 November 23, 1994   
 3. Article Addressed to:   
 Jimmy Doom   
 Star Route   
 Jal, New Mexico 88252   
 4a. Article Number   
 321 036 984   
 4b. Service Type   
 ☒ Registered ☐ Insured ☐ Certified ☐ COD ☐ Express Mail ☒ Return Receipt for Merchandise   
 7. Date of Delivery   
 11-25-94   
 8. Addressee's Address (Only if requested and fee is paid)   
 5. Signature (Addressee)   
 6. Signature (Agent)   
 Rebecca Doom   
 PS Form 3811, December 1991 U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT   
 Thank you for using Return Receipt Service.

P 321 036 984   
 Receipt for Certified Mail   
 No Insurance Coverage Provided   
 Do not use for International Mail (See Reverse)   
 Jimmy Doom   
 Star Route   
 Jal, New Mexico 88252   
 1991   
 Special Delivery Fee   
 Restricted Delivery Fee

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.   
 OXY USA Inc./Myers   
 November 23, 1994   
 3. Article Addressed to:   
 Christie Gas Corp   
 901 MOPAC Expressway   
 Ste. 515   
 Austin, Texas 78746   
 4a. Article Number   
 321 036 985   
 4b. Service Type   
 ☒ Registered ☐ Insured ☐ Certified ☐ COD ☐ Express Mail ☒ Return Receipt for Merchandise   
 7. Date of Delivery   
 8. Addressee's Address (Only if requested and fee is paid)   
 5. Signature (Addressee)   
 Susan Walker   
 6. Signature (Agent)   
 PS Form 3811, December 1991 U.S. GPO: 1993-352-714 DOMESTIC RETURN RECEIPT   
 Thank you for using Return Receipt Service.

P 321 036 985   
 Receipt for Certified Mail   
 No Insurance Coverage Provided   
 Do not use for International Mail (See Reverse)   
 Christie Gas Corp   
 901 MOPAC Expressway   
 Ste. 515   
 Austin, Texas 78746   
 800, June 1991   
 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   
 OXY USA Inc./Myers   
 November 23, 1994

**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 it to you.  
• At OXY USA Inc./Myers  
• On November 23, 1994  
• Return Receipt will be sent to you.

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:  
O'Neill Properties, Ltd.  
POB 2840  
Midland, Texas 79702

4a. Article Number  
321 036 986

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

7. Date of Delivery

5. Signature (Addressee)

6. Signature (Agent)  
[Signature]

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

PS Form 3841, December 1991 ★U.S. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

P 321 036 986

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

O'Neill Properties, Ltd.  
POB 2840  
Midland, Texas 79702

Special Delivery Fee	
Restricted Delivery Fee	

P 321 036 989

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

BUREAU of LAND MANAGEMENT  
ATTN: Vince Balderez  
PO Box 1157  
Hobbs, New Mexico 88240

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to Whom & Date Delivered	
Return Receipt showing to Whom	

P 321 036 991

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

Arco Oil & Gas Company  
P O Box 1610  
Midland, Texas 79701

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	

OXY USA Inc./Myers  
November 23, 1994

**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  
• Write  
• The Return Receipt will be sent to you.

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  
ATTN: Vince Balderez  
PO Box 1157  
Hobbs, New Mexico 88240

4a. Article Number  
321 036 989

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

7. Date of Delivery

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. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

**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 it to you.  
• At OXY USA Inc./Myers  
• On November 23, 1994  
• Return Receipt will be sent to you.

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:  
Arco Oil & Gas Company  
P O Box 1610  
Midland, Texas 79701

4a. Article Number  
321 036 991

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

7. Date of Delivery

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. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

PS Form 3811, December 1991 U.S. GPO: 1993-352-714

**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.

**OXY USA Inc./Myers**  
November 23, 1994

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 Drive**  
**Ste. 100W**  
**Midland, Texas 79705**  
**ATTN: Jerry Hoover**

4a. Article Number  
**321 036 992**

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

7. Date of Delivery  
**NOV 23 1994**

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. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

**P 321 036 993**

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

**Conoco, Inc.**  
**10 Desta Drive**  
**Ste. 100W**  
**Midland, Texas 79705**  
**ATTN: Jerry Hoover**

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt (if required)	

**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.

**OXY USA Inc./Myers**  
November 23, 1994

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:  
**Great Western Drilling**  
**POB 1659**  
**Midland, Texas 79702**  
**ATTN: Michael Heathington**

4a. Article Number  
**321 036 994**

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

7. Date of Delivery

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. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

**P 321 036 994**

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

**Great Western Drilling**  
**POB 1659**  
**Midland, Texas 79702**  
**ATTN: Michael Heathington**

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt (if required)	

**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.

**OXY USA Inc./Myers**  
November 23, 1994

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:  
**State of New Mexico Land Office**  
**3830 N. Grimes**  
**Ste. C**  
**Hobbs, New Mexico 88240**

4a. Article Number  
**321 036 997**

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

7. Date of Delivery  
**11 28 94**

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. GPO: 1993-352-714 **DOMESTIC RETURN RECEIPT**

Thank you for using Return Receipt Service.

**P 321 036 997**

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

**State of New Mexico Land Office**  
**3830 N. Grimes**  
**Ste. C**  
**Hobbs, New Mexico 88240**

Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt (if required)	
Return Receipt (if required)	
Return Receipt (if required)	
TOTAL Postage & Fees	\$
Postmark or Date	

**OXY USA Inc./Myers**  
November 23, 1994

**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 to this form.  
• Write on the reverse of this form.  
• 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:  
Doyle Hartman  
500 N. Main  
Midland, Texas 79701

4a. Article Number  
321 036 996

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

7. Date of Delivery  
11-23-94

5. Signature (Addressee)  
Christie Petty

6. Signature (Agent)

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

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

P 321 036 996

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

Doyle Hartman  
500 N. Main  
Midland, Texas 79701

Special Delivery Fee  
Restricted Delivery Fee  
Return Receipt (including to Whom's Care Delivered)  
Return Receipt (including to Whom's Care Delivered)  
TOTAL Postage & Fees  
Postmark or Date

**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 to this form.  
• Write on the reverse of this form.  
• 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:  
TEXACO Exploration & Production, Inc.  
POB 730  
Hobbs, New Mexico 88241

4a. Article Number  
321 036 988

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

7. Date of Delivery  
11-29-94

5. Signature (Addressee)  
11-29-94

6. Signature (Agent)  
Dan Brown

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

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

P 321 036 988

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

TEXACO Exploration & Production, Inc.  
POB 730  
Hobbs, New Mexico 88241

P 321 036 982

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

**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 to this form.  
• Write on the reverse of this form.  
• 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:  
AMOCO PRODUCTION CO.  
POB 3092  
Houston, Texas 77253  
ATTN: Andy Gallo, Esq.

4a. Article Number  
321 036 982

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

7. Date of Delivery  
11-28-94

5. Signature (Addressee)  
Curtis Nickerson

6. Signature (Agent)  
Curtis Nickerson

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

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

AMOCO PRODUCTION CO.  
POB 3092  
Houston, Texas 77253  
ATTN: Andy Gallo, Esq.

Special Delivery Fee  
Restricted Delivery Fee  
Return Receipt (including to Whom's Care Delivered)  
Return Receipt (including to Whom's Care Delivered)  
TOTAL Postage & Fees  
Postmark or Date

OXY USA Inc./Myers  
November 23, 1994

USER:

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.

OXY USA Inc./Myers  
November 23, 1994

Return Receipt will show to whom the article was delivered and the date  
delivered.

Article Addressed to:

Lanexco Inc.  
POB 2730  
Midland, Texas 79702

Signature (Addressee)

Signature (Agent)

*[Signature]*

3811, December 1991

U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

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

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

321 036 995

4b. Service Type

☒ Registered ☐ Insured

☐ Certified ☐ COD

☐ Express Mail ☒ Return Receipt for  
Merchandise

7. Date of Delivery

13

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

Thank you for using Return Receipt Service.

P 321 036 995



Receipt for  
Certified Mail

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

Lanexco Inc.  
POB 2730  
Midland, Texas 79702

Service Type	
Restricted Delivery Fee	
Return Receipt (allowing for Return Date Delivered)	
Return Receipt (allowing for Return Date and Addressee's Address)	

June 1991

USER:

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.

OXY USA Inc./Myers  
November 23, 1994

Article Addressed to:

Amerada Hess Corporation  
Drawer D  
Monument, NM 88265  
ATTN: J. R. Jones

Signature (Addressee)

*[Signature]*

Signature (Agent)

3811, December 1991

U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

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

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

4a. Article Number

321 036 990

4b. Service Type

☒ Registered ☐ Insured

☐ Certified ☐ COD

☐ Express Mail ☒ Return Receipt for  
Merchandise

7. Date of Delivery

11-29-94

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

Thank you for using Return Receipt Service.

P 321 036 990



Receipt for  
Certified Mail

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

Amerada Hess Corporation  
Drawer D  
Monument, NM 88265  
ATTN: J. R. Jones

Service Type	
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P 321 036 992



Receipt for  
Certified Mail

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

Lewis B. Burleson Inc.  
POB 2479  
Midland, Texas 79702

Service Type	
Restricted Delivery Fee	
Return Receipt (allowing for Return Date Delivered)	
Return Receipt (allowing for Return Date and Addressee's Address)	
Postage	\$
Postmark or Date	

June 1991

OXY USA Inc./Myers