

BEFORE THE
OIL CONSERVATION DIVISION

NEW MEXICO DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES

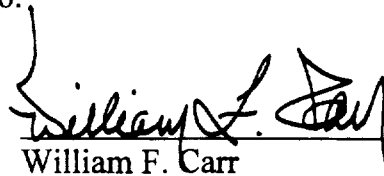
IN THE MATTER OF THE APPLICATION
OF MANZANO OIL CORPORATION
FOR COMPULSORY POOLING,
LEA COUNTY, NEW MEXICO.

CASE NO. 12094

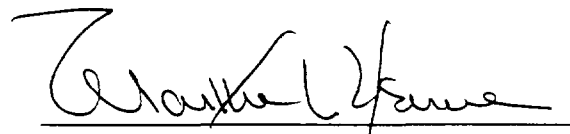
AFFIDAVIT

STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

William F. Carr, authorized representative of Manzano Oil Corporation, the Applicant herein, being first duly sworn, upon oath, states that in accordance with the notice provisions of Division rules, the Applicant has attempted to find the correct addresses of all interested persons entitled to receive notice of this application and that notice has been given at the addresses shown on Exhibit "A" attached hereto.


William F. Carr

SUBSCRIBED AND SWORN to before me this 2nd day of December, 1998 by William F. Carr.


Notary Public

My Commission Expires:

August 19, 1999

EXHIBIT A

Lea Investment Incorporated
Post Office Box 1297
Lovington, NM 88260

D.R. Townsend and
Lucille Townsend
502 Commercial
Lovington, NM 88260

Mary or Jimmy Trevino
413 Commercial
Lovington, NM 88260

Tommie Trailer
c/o Earlene Trailer Hall
357 Cockrell
Abilene, TX 79601

Lula Mae Williams
Post Office Box 365
Lovington, NM 88260

George W. Braggs
Post Office Box 1042
Eunice, NM 88231

Adan Marquez and Nancy Marquez
812 E. Monroe
Hobbs, NM 88240

Gerardo Rodriguez
Post Office Box 2011
Lovington, NM 88260

Pilar and Eulalia Garcia
c/o Corina Estrada
Post Office Box 54
Plains, TX 79355

Elizabeth Ann Molina
122 S. Commercial
Lovington, NM 88260

Olivia Gutierrez
Post Office Box 1433
Lovington, NM 88260

Mary E. Nelson
410 Ute
Hobbs, NM 88240

Harry S. Ward
c/o James Ward
624 1/2 E. Green Acres Drive
Hobbs, NM 88240

Norberto or Carolina Jacquez
c/o Lorenzo Jacquez
914 E. Madison
Lovington, NM 88260

Winnie Bell Williams
1311 Normandy
Carlsbad, NM 88220

Ignacio Arciniega or
Apolonia Arciniega
Post Office Box 1845
Lovington, NM 88260

Julio Espinoza &
Jesus Espinoza
Post Office Box 1763
Lovington, NM 88260

Gary L. Prince
905 West Aspen
Lovington, NM 88260

Estate of Willie James Taylor
c/o Willie Herbert Jackson
717 W. Tyler
Lovington, NM 88260

Neal Eugene Hunter and
Betty Earline Hunter
Post Office Box 365
Lovington, NM 88260

Margie Marie Sanders Lavow
Post Office Box 1281
Lovington, NM 88260

Estate of Lula Parks
c/o Margie Marie Sanders Lavow
Post Office Box 1281
Lovington, NM 88260

Charlie Lewis and Elsa Lewis
Post Office Box 215
Lovington, NM 88260

Waldo Licano
Post Office Box 31
Lovington, NM 88260

Sammie D. Thomas and
Versie Ann Thomas
Post Office Box 641
Lovington, NM 88260

Heirs of J.W. Wallrich
c/o John W. Wallrich
416 Elm Hurst Ave.
Mt. Prospect, IL 60065

Francisco Navarrette
450 Williams
Buffalo, WY 82834

Rafael Navarrette
450 Williams
Buffalo, WY 82834

Robert Mitchell, Sylvester Vaughn,
Willie Graham, Trustees The Christian
Methodist Episcopal Church
of Lovington, New Mexico
c/o Sylvester Bond
Lovington, NM 88260

CAMPBELL, CARR, BERGE
& SHERIDAN, P.A.
LAWYERS

MICHAEL B. CAMPBELL
WILLIAM F. CARR
BRADFORD C. BERGE
MARK F. SHERIDAN
MICHAEL H. FELDEWERT
ANTHONY F. MEDEIROS
PAUL R. OWEN
KATHERINE M. MOSS

JACK M. CAMPBELL
OF COUNSEL

JEFFERSON PLACE
SUITE 110 NORTH GUADALUPE
POST OFFICE BOX 2208
SANTA FE, NEW MEXICO 87504-2208
TELEPHONE: (505) 988-4421
FACSIMILE: (505) 983-6043
E-MAIL: ccbspa@ix.netcom.com

November 12, 1998

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

**TO AFFECTED OWNERS IN IRREGULAR SECTION 3, TOWNSHIP 16 SOUTH,
RANGE 36 EAST, NMPM, LEA COUNTY, NEW MEXICO**

Re: *Application of Manzano Oil Corporation for Compulsory Pooling, Lea
County, New Mexico*

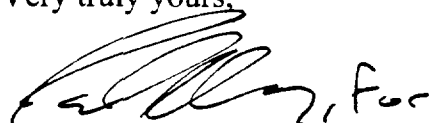
Gentlemen:

This letter is to advise you that Manzano Oil Corporation has filed the enclosed application with the New Mexico Oil Conservation Division seeking the pooling of all mineral interests in Lot 15 of Irregular Section 3, Township 16 South, Range 36 East, NMPM, Lea County, New Mexico. Manzano Oil Corporation proposes to dedicate the referenced pooled unit to its Quarry Well No. 1 which will be drilled at a standard location 3526 feet from the South line and 2095 feet from the East line of said Section 3 to test the Strawn formation.

This application has been set for hearing before an Examiner of the Oil Conservation Division on December 3, 1998. You are not required to attend this hearing, but as an owner of an interest that may be subject to pooling, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Parties appearing in cases have been requested by the Division (Memorandum 2-90) to file a Prehearing Statement substantially in the form prescribed by the Division. Prehearing statements should be filed by 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,



WILLIAM F. CARR
ATTORNEY FOR MANZANO OIL CORPORATION
WFC:mlh
Enclosure
cc: Ms Debbi Jeffers

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.

LAWYERS

POST OFFICE BOX 2208

SANTA FE, NEW MEXICO 87504-2208

Z 559 541 376

CERTIFIED

MAIL



11/29



- ☐ Not Deliverable As Addressed
- ☐ Unable To Forward
- ☐ Insufficient Address
- ☐ Moved, Lr. No Address
- ☐ Unclassified
- ☐ Attempted - Not Known
- ☐ No Such Street
- ☐ No Such Number
- ☒ No Mail For Addressee
- ☒ Box Closed - No Other Forwarding Order Pending

Lea Investment Incorporated
Post Office Box 1297
Lovington, NM 88260

RECEIVED

NOV 16 1998

CAMPBELL, CARR, et. al.

1ST NOTICE

2ND NOTICE

RETURN

Z 559 541 376

US Postal Service

Receipt for Certified Mail

Lea Investment Incorporated
Post Office Box 1297
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	NOV 16 1998
Return Receipt Showing to Whom Date, & Addressee's Address	
TOTAL Postage & Fees	2.67
Postmark or Date	NOV 16 1998

PS Form 3800 April 1995

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
 LAWYERS
 POST OFFICE BOX 2208
 SANTA FE, NEW MEXICO 87504-2208

RECEIVED
 NOV 20 1998
 CAMPBELL, CARR, et. al.

11-19

Z 559 541 377

US Postal Service
Receipt for Certified Mail

D.R. Townsend and
 Lucille Townsend
 502 Commercial
 Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$2.998
Postmark or Date	

PS Form 3800, April 1995

CERTIFIED
 Z 559 541 377
MAIL

D.R. Townsend and
 Lucille Townsend
 502 Commercial
 Lovington, NM 88260

[Faint circular postmark and handwritten notes]

Z 559 541 378

US Postal Service

Receipt for Certified Mail

Mary or Jimmy Trevino
413 Commercial
Lovington, NM 88260

Postage	\$.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom & Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	12 1998

USPS - 87594

PS Form 3800, April 1995

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.

LAWYERS

POST OFFICE BOX 2208

SANTA FE, NEW MEXICO 87506-2208

CERTIFIED

Z 559 541 379

MAIL

RECEIVED

NOV 30 1998

CAMPBELL, CARR, et. al.

ATTEMPTED
Tommie Trailer
c/o Earlene Trailer Hall
357 Cockrell
Abilene, TX 79601

HALL357

796012009 IN 05 11/17/98
RETURN TO SENDER

NO FORWARD ORDER ON FILE
UNABLE TO FORWARD
RETURN TO SENDER

1ST CLASS
2ND CLASS
POSTAGE
11-29
12-8

Z 559 541 379

US Postal Service

Receipt for Certified Mail

Tommie Trailer
c/o Earlene Trailer Hall
357 Cockrell
Abilene, TX 79601

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	

Z 559 541 380

US Postal Service

Receipt for Certified Mail

Lula Mae Williams
Post Office Box 365
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to Whom & Date Delivered	1.10
Return Receipt showing to Addressee's Address	
TOTAL Postage & Fees	2.77
Postmark or Date	

USPS - 8759A

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or 2 for additional services.
- ☐ Complete items 3, 4a, and 4b.
- ☐ 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:

George W. Braggs
Post Office Box 1042
Eunice, NM 88231

4a. Article Number
7559 541 381

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

7. Date of Delivery

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

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595 98 8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

7 559 541 381

US Postal Service

Receipt for Certified Mail

George W. Braggs
Post Office Box 1042
Eunice, NM 88231

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$2.99
Postmark or Date	

PS Form 3800, April 1995

Z 559 541 382

US Postal Service
Receipt for Certified Mail

Adan Marquez and Nancy Marquez
812 E. Monroe
Hobbs, NM 88240

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom Date, & Addressee's Address	1.10
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	NOV 12 1998 USPS 88240

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services <input type="checkbox"/> Complete items 3, 4a, and 4b <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Adan Marquez and Nancy Marquez 812 E. Monroe Hobbs, NM 88240		4a. Article Number Z 559 541 382	
5. Received By (Print Name) Adan Marquez		4b. Service type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature (Addressee or Agent) <i>Adan Marquez</i>		7. Date of Delivery 11/18	
PS Form 3811, December 1994		8. Addressee's Address (Only if requested and fee is paid) 102595-98-B-0229 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, 4a, and 4b
- ☐ 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:

Gerardo Rodriguez,
 Post Office Box 2011
 Lovington, NM 88260

4a. Article Number
 Z 559 541 383

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ COD
- ☒ Certified
- ☐ Insured

7. Date of Delivery

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *Gerardo Rodriguez*

PS Form 3811, December 1994

1025/95-98 B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 383

US Postal Service

Receipt for Certified Mail

Gerardo Rodriguez
 Post Office Box 2011
 Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Address (Addressee's)	
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	NOV 12 1998 LOVINGTON NM 88260 7594

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or 2 for additional services.
- ☐ Complete items 3, 4a, and 4b.
- ☐ 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:

Pilar and Eulalia Garcia
c/o Corina Estrada
Post Office Box 54
Plains, TX 79355

4a. Article Number

Z 559 541 384

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured

7. Date of Delivery

11-16-98

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

6. Signature (Addressee or Agent)

Maria Estrada

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 384

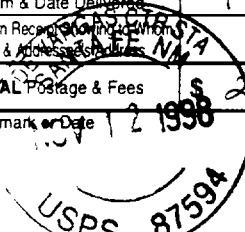
US Postal Service

Receipt for Certified Mail

Pilar and Eulalia Garcia
c/o Corina Estrada
Post Office Box 54
Plains, TX 79355

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom & Date Delivered	
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	NOV 12 1998

PS Form 3800, April 1995



Z 559 541 325

US Postal Service

Receipt for Certified Mail

Elizabeth Ann Molina
122 S. Commercial
Lovington, NM 88260

Postage	\$.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date, & Addressee's Address	
TOTAL Postage & Fees	2.77
Postmark or Date	

PS Form 3800, April 1995

12 1998

PS - 8759A

7 559 541 386

US Postal Service
Receipt for Certified Mail

Olivia Gutierrez
Post Office Box 1433
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom & Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	12 1998

PS Form 3811, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER: Complete items 1 and/or 2 for additional services: <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Olivia Gutierrez Post Office Box 1433 Lovington, NM 88260		4a. Article Number Z 559 541 386	
5. Received By: (Print Name) Olivia Gutierrez		4b. Service type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature: (Addressee or Agent) X Olivia Gutierrez		7. Date of Delivery 12/12/98	
PS Form 3811, December 1994		8. Addressee's Address (Only if requested and fee is paid) Domestic Return Receipt	

Thank you for using Return Receipt Service.

Z 559 541 387

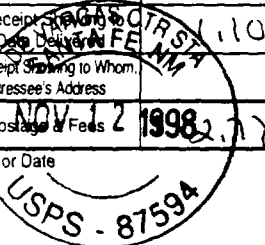
US Postal Service

Receipt for Certified Mail

Mary E. Nelson
410 Ute
Hobbs, NM 88240

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Fee	1.10
Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	2.77
Postmark or Date	

PS Form 3800, April 1995



Z 559 541 388

US Postal Service

Receipt for Certified Mail

Harry S. Ward
c/o James Ward
624 1/2 E. Green Acres Drive
Hobbs, NM 88240

Postage	\$.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom Date, & Addressee's Address	1.10
TOTAL Postage & Fees	2.77
Postmark or Date	NOV 12 1998

USPS - 87594

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services
- Complete items 3, 4a, and 4b
- 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:

Norberto or Carolina Jacquez
c/o Lorenzo Jacquez
914 E. Madison
Lovington, NM 88260

4a. Article Number
Z 559 541 389

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ COD
- ☒ Certified
- ☐ Insured

7. Date of Delivery

11-14-98

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

5. Received By (Print Name)

Carolina Jacquez

6. Signature: (Addressee or Agent)

X

PS Form 3811, December 1994

102595 98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 389

US Postal Service

Receipt for Certified Mail

Norberto or Carolina Jacquez
c/o Lorenzo Jacquez
914 E. Madison
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt, Restricted Delivery, Whom, & Date Delivered	1.10
Return Receipt, Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	2.77
Postmark or Date	NOV 12 1998

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b
- 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.
- While "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:

Winnie Bell Williams
1311 Normandy
Carlsbad, NM 88220

4a. Article Number
Z 559 541 390

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

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

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 390

US Postal Service
Receipt for Certified Mail

Winnie Bell Williams
1311 Normandy
Carlsbad, NM 88220

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom & Date Delivered	
TOTAL Postage & Fees	\$ 2.77
Postmark Date	NOV 12 1998

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or 2 for additional services.
- ☐ Complete items 3, 4a, and 4b.
- ☐ 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:

Ignacio Arciniega or
 Apolonia Arciniega
 Post Office Box 1845
 Lovington, NM 88260

4a. Article Number
 Z 359 541 391

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ Insured
- ☒ Certified
- ☐ COD

5. Received By: (Print Name)

8. Addressee's Address Only if requested and not is paid for

6. Signature: (Addressee or Agent)

X Ignacio Arciniega

PS Form 3811, December 1994

102595-98 B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 391

US Postal Service

Receipt for Certified Mail

Ignacio Arciniega or
 Apolonia Arciniega
 Post Office Box 1845
 Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date, & Addressee's Address	1.10
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	NOV 12 1998

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or 2 for additional services
- ☐ Complete items 3, 4a, and 4b.
- ☐ 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:

Julio Espinoza &
Jesus Espinoza
Post Office Box 1763
Lovington, NM 88260

4a. Article Number
Z 559 541 392

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ COD
- ☒ Certified
- ☐ Insured

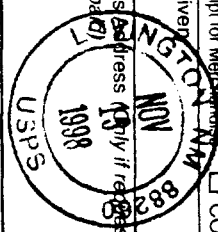
7. Date of Delivery

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

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Maria Espinoza*



PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 392

US Postal Service
Receipt for Certified Mail

Julio Espinoza &
Jesus Espinoza
Post Office Box 1763
Lovington, NM 88260

Postage	\$.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	
Postmark or Date	NOV 12 1998

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or 2 for additional services.
- ☐ Complete items 3, 4a, and 4b.
- ☐ 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 behind 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:

Gary L. Prince
905 West Aspen
Lovington, NM 88260

4a. Article Number
Z 559 541 393

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ COD
- ☒ Certified
- ☐ Insured

7. Date of Delivery
11-14-98

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

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

PS Form 3800, April 1995
December 1, 1994

102595-99-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 393

US Postal Service

Receipt for Certified Mail

Gary L. Prince
905 West Aspen
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	4.77
Postmark or Date	NOV 12 1998

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or 2 for additional services
- ☐ Complete items 3, 4a, and 4b
- ☐ 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. Do not place it in the back of the mailpiece.
- ☐ While "Return Receipt Requested" on the mailpiece, this article number and the date delivered.
- ☐ 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):

- ☐ Addressed to Addressee's Address
- ☐ Restricted Delivery
- ☐ Consult postmaster for fee.

3. Article Addressed to:

Estate of Willie James Taylor
c/o Willie Herbert Jackson
717 W. Tyler
Lovington, NM 88260

4a. Article Number
Z 559 541 394

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ COD

7. Date of Delivery
11/4/98

5. Received By (Print Name)

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

6. Signature (Addressee or Agent)

X Willie Jackson

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 394

US Postal Service

Receipt for Certified Mail

Estate of Willie James Taylor
c/o Willie Herbert Jackson
717 W. Tyler
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom & Addressee's Address	
TOTAL Postage & Fees	2.77
Postmark or Date	

PS Form 3800, April 1995

Z 559 541 395

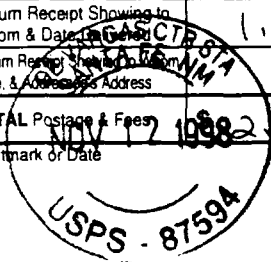
US Postal Service

Receipt for Certified Mail

Neal Eugene Hunter and
Betty Earline Hunter
Post Office Box 365
Lovington, NM 88260

Postage	\$.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date	1.10
Return Receipt Showing to Whom Date, & Addressee's Address	
TOTAL Postage & Fees	2.77
Postmark or Date	

PS Form 3800, April 1995



Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or 2 for additional services.
- ☐ Complete items 3, 4a, and 4b.
- ☐ 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:

Margie Marie Sanders Lavow
Post Office Box 1281
Lovington, NM 88260

4a. Article Number
Z 559 541 396

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

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)

X *M. Sanders*

PS Form 3811, December 1994

107595-96-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 396

US Postal Service
Receipt for Certified Mail

Margie Marie Sanders Lavow
Post Office Box 1281
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.77
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, 4a, and 4b
- ☐ 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:

Estate of Lula Parks
 c/o Margie Marie Sanders Lavow
 Post Office Box 1281
 Lovington, NM 88260

4a. Article Number

Z 559 541 397

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☒ Certified
- ☐ Insured
- ☐ COD

7. Date of Delivery

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

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

X Linda Ellwood

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt

Z 559 541 397

US Postal Service

Receipt for Certified Mail

Estate of Lula Parks
 c/o Margie Marie Sanders Lavow
 Post Office Box 1281
 Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.67
Postmark or Date	LOVINGTON, NM 12 1998

PS Form 3800 April 1995

Z 559 541 398

US Postal Service

Receipt for Certified Mail

Charlie Lewis and Elsa Lewis
Post Office Box 215
Lovington, NM 88260

Postage	\$.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Shown to Whom & Date Delivered	URS 10
Return Receipt Shown to Whom, Date, & Addressee's Address	STANLEY
TOTAL Postage & Fees	\$1.67
Postmark or Date	PS-81-

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b
- 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:

Waldo Licano
Post Office Box 31
Lovington, NM 88260

4a. Article Number
Z 559 541 399

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

5. Received By: (Print Name)

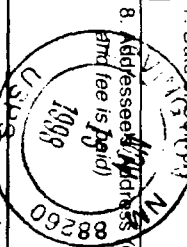
8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-98-8-0220

Domestic Return Receipt



7 559 541 399

US Postal Service
Receipt for Certified Mail

Waldo Licano
Post Office Box 31
Lovington, NM 88260

Postage	\$ 32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.10
Return Receipt Showing to Whom Date, & Addressee's Address	
TOTAL Postage & Fees	NOV 12 1998 2.77
Postmark of Date	

PS Form 3800 April 1995

USPS - 87594

Thank you for using Return Receipt Service.

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.

LAWYERS

POST OFFICE BOX 2208

SANTA FE, NEW MEXICO 87504-2208

CERTIFIED

Z 559 541 400

MAIL

RECEIVED

DEC - 1 1998

CAMPBELL, CARR, et. al.

Sammie D. Thomas and
Versie Ann Thomas
Post Office Box 641
Lovington, NM 88260

NAME
1st Notice 11-18
2nd Notice 11-25
Return 11-27

Z 559 541 400

US Postal Service

Receipt for Certified Mail

Sammie D. Thomas and
Versie Ann Thomas
Post Office Box 641
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom, Date, & Addressee's Address	1.10
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	NOV 17 1998

PS Form 3800 April 1995

11/14

11/14

Z 559 541 401

US Postal Service
Receipt for Certified Mail

Heirs of J.W. Wallrich
c/o John W. Wallrich
416 Elm Hurst Ave.
Mt. Prospect, IL 60065

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom, Date, & Addressee's Address	NOV 12 1998
TOTAL Postage & Fees	2.67
Postmark or Date	NOV 12 1998

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER: <input type="checkbox"/> Complete items 1 and/or 2 for additional services. <input type="checkbox"/> Complete items 3, 4a, and 4b. <input type="checkbox"/> Print your name and address on the reverse of this form so that we can return this card to you. <input type="checkbox"/> Attach this form to the front of the mailpiece, or on the back if space does not permit. <input type="checkbox"/> Write "Return Receipt Requested" on the mailpiece below the article number. <input type="checkbox"/> 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Heirs of J.W. Wallrich c/o John W. Wallrich 416 Elm Hurst Ave. Mt. Prospect, IL 60065		4a. Article Number Z 559 541 401	
5. Received By: (Print Name) [Signature]		4b. Service type <input type="checkbox"/> Registered <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
6. Signature: (Addressee or Agent) [Signature]		7. Date of Delivery 11/12	
PS Form 3811, December 1994		8. Addressee's Address (Only if requested and fee is paid) [Blank]	

102595-98-B-0229

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, 4a, and 4b
- 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:

Francisco Navarrette
450 Williams
Buffalo, WY 82834

4a. Article Number
Z 559 541 402

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

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

PS Form 3811, December 1994

102595-96-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Z 559 541 402

US Postal Service
Receipt for Certified Mail

Francisco Navarrette
450 Williams
Buffalo, WY 82834

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom, Date, & Addressee's Address	1.10
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	NOV 17 1998

PS Form 3800, April 1995

Is your **RETURN ADDRESS** completed on the reverse side?

SENDER:

- ☐ Complete items 1 and/or 2 for additional services.
- ☐ Complete items 3, 4a, and 4b.
- ☐ 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:

Rafael Navarrette
450 Williams
Buffalo, WY 82834

4a. Article Number
Z 559 541 403

4b. Service type

- ☐ Registered
- ☐ Express Mail
- ☐ Return Receipt for Merchandise
- ☐ COD
- ☒ Certified
- ☐ Insured

7. Date of Delivery

11-16-98

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

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

X Rafael Navarrette

PS Form 3811, December 1994

102595 98-B-0229

Domestic Return Receipt

Z 559 541 403

US Postal Service

Receipt for Certified Mail

Rafael Navarrette
450 Williams
Buffalo, WY 82834

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing Whom & Date Delivered	
Return Receipt Showing Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	1 1998 7
Postmark or Date	

PS Form 3800, April 1995

Thank you for using Return Receipt Service.

CAMPBELL, CARR, BERGE & SHERIDAN, P.A.
LAWYERS

POST OFFICE BOX 2208
SANTA FE, NEW MEXICO 87504-2208

CERTIFIED

Z 559 541 404

MAIL

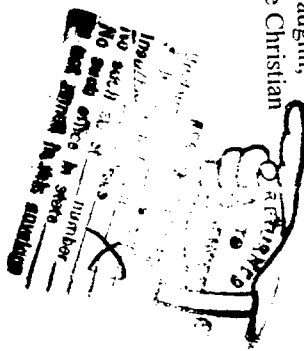
RECEIVED

NOV 20 1998

CAMPBELL, CARR, et. al.

11-19

Robert Mitchell, Sylvester Vaughn,
Willie Graham, Trustees The Christian
Methodist Episcopal Church
of Lovington, New Mexico
c/o Sylvester Bond
Lovington, NM 88260



Z 559 541 404

US Postal Service

Receipt for Certified Mail

Robert Mitchell, Sylvester Vaughn,
Willie Graham, Trustees The Christian
Methodist Episcopal Church
of Lovington, New Mexico
c/o Sylvester Bond
Lovington, NM 88260

Postage	\$ 1.32
Certified Fee	1.35
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom & Date, & Addressee's Address	
TOTAL Postage & Fees	\$ 2.77
Postmark or Date	NOV 12 1998

**BEFORE THE
OIL CONSERVATION COMMISSION**
Santa Fe, New Mexico

Case No. 12094 Exhibit No. 5

Submitted by: Manzano Oil Corporation

Hearing Date: December 3, 1998