

KELLAHIN AND KELLAHIN

ATTORNEYS AT LAW

EL PATIO BUILDING

117 NORTH GUADALUPE

POST OFFICE BOX 2265

SANTA FE, NEW MEXICO 87504-2265

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W. THOMAS KELLAHIN*

*NEW MEXICO BOARD OF LEGAL SPECIALIZATION
RECOGNIZED SPECIALIST IN THE AREA OF
NATURAL RESOURCES-OIL AND GAS LAW

JASON KELLAHIN (RETIRED 1991)

May 24, 2000

TO: NOTICE OF THE HEARING OF THE FOLLOWING
NEW MEXICO OIL CONSERVATION DIVISION CASE:

*Re: Application of Marathon Oil Company to amend
Order R-11112 for pool and lease commingling
(Buchanan Centralized Facility)
Eddy County, New Mexico.*

Marathon Oil Company ("Marathon") has applied to the New Mexico Oil Conservation Division ("Division") to amend Division Order R-11112 which previously approved Marathon's application for the surface commingling of production from the North Illinois Camp-Morrow Gas, Illinois Camp-Morrow Gas, North Turkey Track-Morrow Gas, Travis-Wolfcamp Gas and Travis Upper Pennsylvanian Gas Pool and the off-lease measurement and storage of that production for its Buchanan Consolidated Facility and Gathering Systems. See attached plat. This facility has the capability to satellite test and lease meter liquids sent to the battery located in the SE/4 of Section 33 and the gas sold from the individual leases.

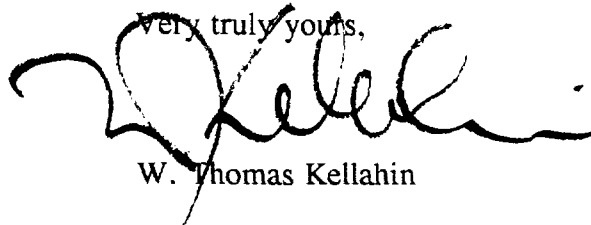
This amendment would allow Marathon to expand its prior approval to include an administrative procedure, without notice and hearing, to surface commingling of gas production from existing or future wells including Scanlon Draw "34" State Well No. 1 and the Jose Guerrero "34" State Well No 1, both located in Section 34, T18S, R28E, Eddy County, New Mexico.

This case has been set for hearing on the Division Examiner's docket now scheduled for June 15, 2000. The hearing will be held at the Division hearing room located at 2040 South Pacheco, Santa Fe, New Mexico.

Marathon believes that the proposed amendment will allow it to continue to operate this project in an efficient manner. If you, agree, then there is no need for you to take any action. If you object to the Division approving this application, then you need to follow the following procedure: You have the right to appear at the hearing and participate in this case, including the right to present evidence in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

Pursuant to the Division's Memorandum 2-90, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 4:00 PM on Friday, June 9 with a copy delivered to the undersigned.

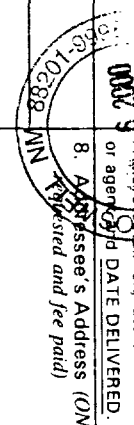
Very truly yours,



W. Thomas Kellahin

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.
 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
 Anderson-Malone Trust dtd. 12/5/91
 Baynard W. Malone/Marilou A. Malone
 P. O. Box 87
 Roswell, NM 88202-0087



5. Signature - Addressee
 X *[Signature]*
 6. Signature - Agent
 X
 7. Date of Delivery

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
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 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
 Roy G. Barton Sr. & Opal Barton, Re
 Roy G. Barton Jr., Trustee
 1919 N Turner St.
 Hobbs, NM 88240-2712

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature - Addressee
 X
 6. Signature - Agent
 X *[Signature]*
 7. Date of Delivery
 6-6-00

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
 Atlantic Richfield Company
 P. O. Box 910355
 Dallas, TX 75391-0355

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature - Addressee
 X
 6. Signature - Agent
 X *[Signature]*
 7. Date of Delivery
 JUN 2 1989

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

3. Article Addressed to:
 Bean Family Limited Company
 P. O. Box 1738
 Roswell, NM 88202-1738

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

5. Signature - Addressee
 X *[Signature]*
 6. Signature - Agent
 X
 7. Date of Delivery
 6/6/89

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

The Beverage Company
P. O. Box 993
Midland, TX 79702-0993

Signature - Addressee
[Signature]
Signature - Agent

Date of Delivery **APR 17 2000**

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

8. Addressee's Address (ONLY if requested and fee paid)
Always obtain signature of addressee or agent and DATE DELIVERED.

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Bravo Limited Liability Co.
P. O. Box 2160
Hobbs, NM 88241-2160

Signature - Addressee
[Signature]
Signature - Agent

Date of Delivery **6-8-00**

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

8. Addressee's Address (ONLY if requested and fee paid)
Always obtain signature of addressee or agent and DATE DELIVERED.

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Broughton Petroleum, Inc.
P. O. Box 1389
Sealy, TX 77474-1389

Signature - Addressee
[Signature]
Signature - Agent

Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

8. Addressee's Address (ONLY if requested and fee paid)
Always obtain signature of addressee or agent and DATE DELIVERED.

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Chobla Energy Corporation
P. O. Box 1668
Albuquerque, NM 87103-1668

Signature - Addressee
[Signature]
Signature - Agent

Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

8. Addressee's Address (ONLY if requested and fee paid)
Always obtain signature of addressee or agent and DATE DELIVERED.



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put ~~your~~ address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available: Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
Cheryl White Derrick
 6006 Balcones Ct. Apt 20
 El Paso, TX 79912-3340

Signature - Addressee	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Signature - Agent <i>[Signature]</i>	
Date of Delivery 6/7	Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)	

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put ~~your~~ address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available: Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
Elk Oil Company
 P. O. Box 310
 Roswell, NM 88202-0310

Signature - Addressee <i>[Signature]</i>	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Signature - Agent <i>[Signature]</i>	
Date of Delivery JUN 9 1989	Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)	

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available: Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
Gilbert J. Eaton
 461 Rittenhouse Blvd.
 Jeffersonville, PA 19403-3382

Signature - Addressee <i>[Signature]</i>	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Signature - Agent <i>[Signature]</i>	
Date of Delivery 6/13/89	Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)	

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available: Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
Enron Oil & Gas Company
 P. O. Box 4362
 Houston, TX 77210-4362

Signature - Addressee <i>[Signature]</i>	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
Signature - Agent <i>[Signature]</i>	
Date of Delivery JUN - 8 2000	Always obtain signature of addressee or agent and DATE DELIVERED.
8. Addressee's Address (ONLY if requested and fee paid)	

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
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 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
Exxon Corporation
P. O. Box 2024
Houston, TX 77252-2024

Signature - Addressee
 Signature - Agent **GEF**
 Date of Delivery **JUN - 9 2000**

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:
PA/CONER-
PO Box 7995
TYLER, TX
75711

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Shelley Suddarth 6-8-C:0** B. Date of Delivery
 C. Signature **Shelley Suddarth** Agent Addressee
 D. Is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

3. Service Type
 Certified Mail Express Mail
 Registered Return Receipt for Merchandise
 Insured Mail C.O.D.
 4. Restricted Delivery? (Extra Fee) Yes

Article Number (Copy from service label) **Z445047557**

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
L. R. French, Jr.
P. O. Box 11327
Midland, TX 79702-8327

Signature - Addressee
 Signature - Agent **George Ford**
 Date of Delivery **SUN 7 2000**

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
Hugh E. Hanagan
P. O. Box 329
Roswell, NM 88202-0329

3. Article Addressed to:
 4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise
 Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid)

5. Signature - Addressee
 Signature - Agent **Craig Hanagan**
 Date of Delivery **4-5-00**

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Harvard Petroleum Corporation
P. O. Box 936
Roswell, NM 88202-0936

1. Signature - Addressee
2. Signature - Agent
3. Date of Delivery

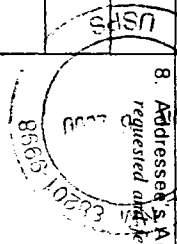
Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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



SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

S. J. Iverson, Jr.
2528 Sinclair
Midland, TX 79705-8422

1. Signature - Addressee
2. Signature - Agent
3. Date of Delivery

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

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Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Wendell W. Iverson, Ind./Tr. of th
PIP 1990 Trust et al
P. O. Box 10508
Midland, TX 79702-0508

1. Signature - Addressee
2. Signature - Agent
3. Date of Delivery

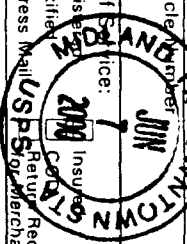
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4. Article Number

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Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Jalapeno Corporation
P. O. Box 1608
Albuquerque, NM 87103-1608

1. Signature - Addressee
2. Signature - Agent
3. Date of Delivery

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT



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Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

Esther L. Kelly
P. O. Box 310
Roswell, NM 88202-0310

4. Article Number

Type of Service: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee
Esther L. Kelly

Signature - Agent
[Signature]

Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

Joseph J. Kelly
P. O. Box 310
Roswell, NM 88202-0310

4. Article Number

Type of Service: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee
Joseph J. Kelly

Signature - Agent
[Signature]

Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

John M. Kelly
P. O. Box 310
Roswell, NM 88202-0310

4. Article Number

Type of Service: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee
John M. Kelly

Signature - Agent
[Signature]

Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

Patricia Kelly Kyle
1508 Wilmington Ave.
Richmond, VA 23227-4430

4. Article Number

Type of Service: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee
Patricia Kelly Kyle

Signature - Agent
LIZABETH WYKE

Date of Delivery
08-02

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

4. Article Number

Type of Service:

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee

Signature - Agent

Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

4. Article Number

Type of Service:

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee

Signature - Agent

Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

4. Article Number

Type of Service:

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee

Signature - Agent

Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

4. Article Number

Type of Service:

Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee

Signature - Agent

Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

Logro Corporation
 P. O. Box 261324
 Plano, TX 75026-1324

Signature - Agent
 Date of Delivery

Louis Dreyfus Gas Holdings, Inc.
 14000 Quail Springs Parkway #600
 Oklahoma City, OK 74134-2600

Signature - Agent
 Date of Delivery

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 1. Your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to: (Extra charge)

Low Partners LP
 Dept. 5
 P. O. Box 4887
 Houston, TX 77210-4887

Signature - Addressee

Signature - Agent
 Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to: (Extra charge)

LRW Corporation
 P. O. Box 168
 Midland, TX 79702-0168

Signature - Addressee

Signature - Agent
 Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to: (Extra charge)

Charles F. Malone Living Trust
 Charles F. Malone/M. T. Malone, Tr.
 P. O. Drawer 700
 Roswell, NM 88202-0700

Signature - Addressee

Signature - Agent
 Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to: (Extra charge)

EARL L. MALONE, MD
 310 W MESCALERO RD APT 11
 ROSWELL NM 88201-5830

Signature - Addressee

Signature - Agent
 Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

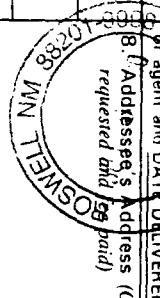
8. Addressee's Address (ONLY if requested and fee paid)

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes! For additional services! requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Elizabeth A. Malone Test. Tr.
 c/o Baynard W. Malone
 P. O. Box 87
 Roswell, NM 88202-0087

Signature - Addressee
Elizabeth A. Malone
 Signature - Agent
 Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT



4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise
 Always obtain signature of addressee or agent and DATE DELIVERED.

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes! For additional services! requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Ross L. Malone Test. Tr.
 c/o Baynard W. Malone
 P. O. Box 87
 Roswell, NM 88202-0087

Signature - Addressee
Ross L. Malone
 Signature - Agent
 Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT



4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise
 Always obtain signature of addressee or agent and DATE DELIVERED.

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes! For additional services! requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Marico Exploration, Inc.
 c/o Yates Petroleum Corporation
 105 South Fourth St.
 Artesia, NM 88210-2177

Signature - Addressee
JOANN GRIGGS
 Signature - Agent
Jo Ann Griggs
 Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise
 Always obtain signature of addressee or agent and DATE DELIVERED.

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes! For additional services! requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Marshall & Winston, Inc.
 P. O. Box 50880
 Midland, TX 79710-0880

Signature - Addressee
Marshall & Winston
 Signature - Agent
 Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise
 Always obtain signature of addressee or agent and DATE DELIVERED.

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Elizabeth White Nelson
 P. O. Box 874
 Roswell, NM 88202-0874

Signature - Addressee
Elizabeth White Nelson
 Signature - Agent

Date of Delivery
 6-7-00

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-236-815

DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

3. Signature - Addressee
Elizabeth White Nelson
 Signature - Agent

7. Date of Delivery
 6-6-00

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-236-815

DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 New Mexico Western Minerals, Inc
 P. O. Box 1738
 Roswell, NM 88202-1738

Signature - Addressee
Elizabeth White Nelson
 Signature - Agent

Date of Delivery
 6-6-00

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-236-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Patsy Iverson Page
 1155 Marlands Vista Way
 LaJolla, CA 92037-6210

Signature - Addressee
Patsy Iverson Page
 Signature - Agent

Date of Delivery
 6-6-00

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-236-815

DOMESTIC RETURN RECEIPT

4. Article Number
 1111 09 2000

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

3. Article Addressed to:
 Dorothy H. Peterson &
 John W. Peterson
 P. O. Box 915
 Roswell, NM 88202-0915

Signature - Addressee
Dorothy H. Peterson
 Signature - Agent

Date of Delivery
 6-6-00

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-236-815

DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

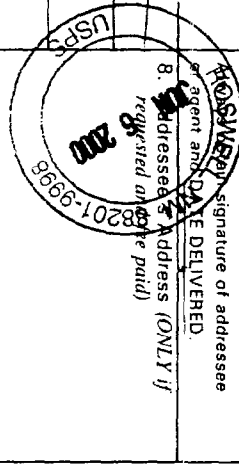
Always obtain signature of addressee or agent and DATE DELIVERED.

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes! For additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Read & Stevens, Inc.
 P. O. Box 1518
 Roswell, NM 88202-1518

Signature - Addressee
 Signature - Agent
 Date of Delivery



Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes! For additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Alvone Sater c/o Sater Enterprises
 P O Box 2509
 Evansville IN 47728-2509

Signature - Addressee
 Signature - Agent
 Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes! For additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 The Rudman Partnership
 4700 First City Center
 1700 Pacific Ave.
 Dallas TX 75201

Signature - Addressee
 Signature - Agent
 Date of Delivery

7099 3220 0005 11/3 5631

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes! For additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Seven W Resources, Inc.
 940 San Jacinto Tower
 2121 San Jacinto Street
 Dallas TX 75201

Signature - Addressee
 Signature - Agent
 Date of Delivery

6-7-00

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to, and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

DAVID SHATZER
 3505 Woodhaven Drive
 Midland, TX 79707-4537

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee
David Shatzer

Signature - Agent

Date of Delivery

6-6-89

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to, and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

Phoebé Shelton
 P. O. Box 430
 Amarillo, TX 79105-0430

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee
Phoebé Shelton

Signature - Agent

Date of Delivery

20 JUN 2000

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to, and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

Shartro Oil Ltd. Co.
 P. O. Box 840
 Artesia, NM < 88211-0840

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee
Melissa Bell

Signature - Agent

Date of Delivery

6-6-89

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to, and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:

Southwestern Energy Production Co.
 P. O. Box 1408
 Fayetteville, AR 72702-1408

4. Article Number

Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

Signature - Addressee
Tim Campbell

Signature - Agent

Date of Delivery

6-6-89

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to: Robert L. Spears
P. O. Box 293384
Kerrville, TX 78029-3384

Signature - Addressee: *Robert L. Spears*
Signature - Agent: _____

Date of Delivery: JUN 9 2000

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to: WESTERN RESERVES OIL CO.
P. O. Box 993
Midland, TX 79702-0993

Signature - Addressee: *[Signature]*
Signature - Agent: _____

Date of Delivery: JUN 0 7 2000

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to: Gretchen S. White
700 North Kentucky
Roswell, NM 88201-4822

Signature - Addressee: *Gretchen S. White*
Signature - Agent: _____

Date of Delivery: _____

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.

Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to: J. Phelps White, III
P. O. Box 874
Roswell, NM 88202-0874

Signature - Addressee: *J. Phelps White*
Signature - Agent: _____

Date of Delivery: 6-7-00

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service: Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 J. Phelps White, IV
 P. O. Box 1433
 Roswell, NM 88202-1433

4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Signature - Addressee
 Signature - Agent
 Date of Delivery
 Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid)
 9. Restricted Delivery (Extra charge)

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Yates Brothers A Partnership
 105 South 4th Street
 Artesia, NM 88210-2177

4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Signature - Addressee
 Signature - Agent
 Date of Delivery
 Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid)
 9. Restricted Delivery (Extra charge)

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional services requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Theodore P. White
 P. O. Box 533
 Roswell, NM 88202-0533

4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Signature - Addressee
 Signature - Agent
 Date of Delivery
 Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid)

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Yates Petroleum Corporation
 P. O. Box 1395
 Artesia, NM 88211-1395

4. Article Number
 Type of Service:
 Registered Insured
 Certified COD
 Express Mail Return Receipt for Merchandise

Signature - Addressee
 Signature - Agent
 Date of Delivery
 Always obtain signature of addressee or agent and DATE DELIVERED.
 8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Harvey E. Yates Company
 P. O. Box 1716
 Roswell, NM 88202-1716

Signature - Addressee
 Signature - Agent
 Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Richard M. Yates
 105 South Fourth St.
 Artesia, NM 88210-2177

Signature - Addressee
 Signature - Agent
 Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 Lillie M. Yates Estate
 Frank Yates, Jr., Executor
 P. O. Box 840
 Artesia, NM 88211-0840

Signature - Addressee
 Signature - Agent
 Date of Delivery

Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

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 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check boxes for additional service(s) requested.
 Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)

Article Addressed to:
 S. P. Yates
 105 S. Fourth St.
 Artesia, NM 88210-2177

Signature - Addressee
 Signature - Agent
 Date of Delivery

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

4. Article Number

Type of Service:

<input type="checkbox"/> Registered	<input type="checkbox"/> Insured
<input type="checkbox"/> Certified	<input type="checkbox"/> COD
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

4. Article Number

Type of Service:

<input type="checkbox"/> Registered	<input type="checkbox"/> Insured
<input type="checkbox"/> Certified	<input type="checkbox"/> COD
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Return Receipt for Merchandise

Always obtain signature of addressee or agent and DATE DELIVERED.

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to: SP & Estelle N. Yates 1976 Tst St Clair Peyton Yates, Jr., Ttee. 105 South Fourth St. Artesia, NM 88210-2177	4. Article Number
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X JOANN GRIGGS	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Jo Ann Griggs</i>	
7. Date of Delivery <i>6-6-00</i>	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to: St. Clair Yates, Jr. c/o Yates Petroleum Corp. 105 South Fourth St. Artesia, NM 88210-2177	4. Article Number
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Addressee X JOANN GRIGGS	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Jo Ann Griggs</i>	
7. Date of Delivery <i>6-6-00</i>	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

Z 445 047 552

Z 445 047 551

Z 445 047 540

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.
Do not use for International Mail.

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.

Elizabeth Eaton
2121 East Biscayne Court
Highland Ranch, CO 80126-4019

Lisa L. Durban
P. O. Box 400
Roswell, NM 88202-0400

Altura Energy Ltd.
P. O. Box 4294
Houston, TX 77210-4294

Postage	\$
Certified Fee	
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	\$
Postmark or Date	

PS Form 3800, April 1995	Certified Fee	
	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	\$
	Postmark or Date	

PS Form 3800, April 1995	Postage	\$
	Certified Fee	
	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	\$
	Postmark or Date	

Z 445 047 559

Z 445 047 561

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.

US Postal Service
Receipt for Certified Mail
No Insurance Coverage Provided.

Hanagan Properties
P. O. Box 1887
Santa Fe, NM 87504-1887

Robert G. Hanagan & Nancy S. Hanagan
P. O. Box 1887
Santa Fe, NM 87504-1887

PS Form 3800, April 1995	Postage	\$
	Certified Fee	
	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	\$
	Postmark or Date	

PS Form 3800, April 1995	Postage	\$
	Certified Fee	
	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	\$
	Postmark or Date	

receipt
not returned

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
 Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to: Mary Ann Twitty P. O. Box 836 Malibu, CA 90265-0836	4. Article Number
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to: Constance White 7007 Lawler Ridge Houston, TX 77055-7010	4. Article Number
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery	

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

Domestic Return Receipt
returned without signatures