

BEFORE THE NEW MEXICO OIL CONSERVATION DIVISION

APPLICATION OF NM&O OPERATING
COMPANY FOR COMPULSORY POOLING,
RIO ARRIBA COUNTY, NEW MEXICO.

Case No. 12467

AFFIDAVIT REGARDING NOTICE

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

James Bruce, being duly sworn upon his oath, deposes and states:

1. I am over the age of 18, and have personal knowledge of the matters set forth herein.

2. I am an attorney for Applicant.

3. Applicant has conducted a good faith, diligent effort to find the names and correct addresses of the interest owners entitled to receive notice of the Application filed herein.

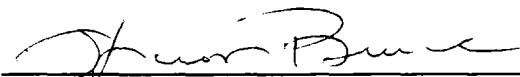
4. Notice of the Application was provided to the interest owners at their correct addresses by mailing each of them, by certified mail, a copy of the Application. Copies of the notice letter and certified return receipts are attached hereto as Exhibit A.

5. Applicant has complied with the notice provisions of Division Rule 1207.



James Bruce

SUBSCRIBED AND SWORN TO before me this 8th day of August, 2000, by James Bruce.



Notary Public

My Commission Expires:
3/14/2001

NEW MEXICO
OIL CONSERVATION DIVISION

EXHIBIT 3

CASE NO.

JAMES BRUCE

ATTORNEY AT LAW

POST OFFICE BOX 1056
SANTA FE, NEW MEXICO 87504

3304 CAMINO LISA
HYDE PARK ESTATES
SANTA FE, NEW MEXICO 87501

(505) 982-2043
(505) 982-2151 (FAX)

July 19, 2000

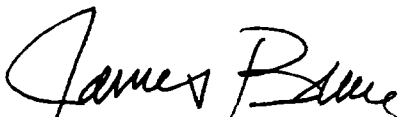
**CERTIFIED MAIL
RETURN RECEIPT REQUESTED**

To: Persons on Exhibit A

Ladies and Gentlemen:

Enclosed is a copy of an application for compulsory pooling, filed by NM&O Operating Company with the New Mexico Oil Conservation Division, regarding the E½ of Section 4, Township 25 North, Range 2 West, NMPM, Rio Arriba County, New Mexico. This application will be heard at 8:15 a.m. on Thursday, August 10, 2000 at the Division's offices at 2040 South Pacheco Street, Santa Fe, New Mexico 87505. As an interest owner in the well unit, you have the right to appear at the hearing and participate in the case. Failure to appear at the hearing will preclude you from contesting this matter at a later date.

Very truly yours,



James Bruce

Attorney for NM&O Operating Company

EXHIBIT A

EXHIBIT A

Dennis Hopper, as his separate propty.
c/o Spencer Cross
Dharma Properties, Inc. 8018 NDCBU
Taos, New Mexico 87571

Grove Burnett, Attorney at Law
Post Office Box 386
Taos, New Mexico 87571

Cougar Capital, L.L.C.
5862 Cromo Drive, Suite 139
El Paso, Texas 79912-5510

James M. Raymond, a married man
dealing in his separate property
Post Office Box 291445
Kerrville, Texas 78028

Pena Blanca Corporation
c/o McElvain Oil & Gas Properties
1050 17th Street, Suite 1800
Denver, Colorado 80265

Big Snowy Exploration, Ltd. Ptrnship
c/o McElvain Oil & Gas Properties
1050 17th Street, Suite 1800
Denver, Colorado 80265

Joe Elledge, a married man dealing
in his separate property
Post Office Box 111
Farmington, New Mexico 87499

Noseco Corporation, a Nevada
corporation
7400 Lakeside Drive
Reno, Nevada 89511

Neumann Family Trust and/or
Peter and Renate Neumann, individually
c/o Peter C. Neumann
136 Ridge Street
Reno, Nevada 89501

Gavilan Dome Properties, a California
Limited Partnership
1180 Cedarwood Drive
Moraga, California 94556

Mesa Grande Resources, Inc. an
Oklahoma Corporation
1200 Philtower Building
Tulsa, Oklahoma 74103

Hunnington T. Walker, et ux.
2961 S. Filmore Way
Denver, Colorado 80210

Johansen Energy Partnership
Post Office Box 1773
Whitefish, Montana 59937

T.H. McElvain Oil & Gas
Limited Partnership
Suite 1800
1050 17th Street
Denver, CO 80265

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:

Joe Elledge, a married man dealing in his separate property
P. O. Box 111
Farmington, New Mexico 87504

2. Article Number (Copy from service label)
1000 0520 0019 0382 3275

PS Form 3811, July 1999

Domestic Return Receipt NM 40

102595-99-M-1789

Postage	\$ 1.50
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 3.20

Recip: **Big Snowy Exploration Limited Partnership**
c/o McElvain Oil & Gas Properties, Inc.
1050 17th Street, Suite 1800
Denver, CO 80265

Postmark: **SANTA FE NM**
JUL 19 2000
10517501

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.

1. Article Addressed to:

Joe Elledge, a married man dealing in his separate property
P. O. Box 111
Farmington, New Mexico 87504

2. Article Number (Copy from service label)

1000 0520 0019 0382 3275

PS Form 3811, July 1999

Domestic Return Receipt

NM 40

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) **Joe Elledge** B. Date of Delivery

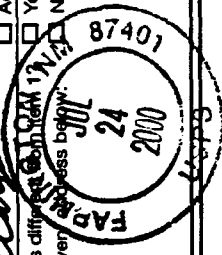
C. Signature *Joe Elledge*

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 No



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.

1. Article Addressed to:

Big Snowy Exploration Limited Partnership
c/o McElvain Oil & Gas Properties, Inc.
1050 17th Street, Suite 1800
Denver, CO 80265

2. Article Number (Copy from service label)

1000 0520 0019 0382 3268

PS Form 3811, July 1999

Domestic Return Receipt

NM 40

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

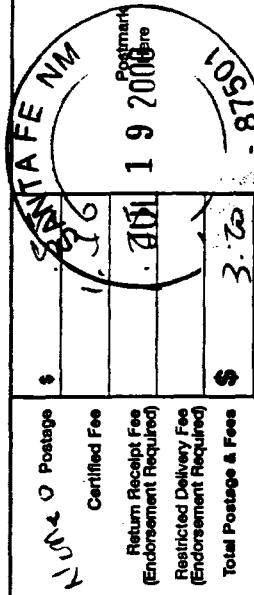
C. Signature *Joe Elledge*

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 No



U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:

Joe Elledge, a married man dealing in his separate property
P. O. Box 111
Farmington, New Mexico 87504

2. Article Number (Copy from service label)
1000 0520 0019 0382 3275

PS Form 3811, July 1999

Domestic Return Receipt NM 40

102595-99-M-1789

Postage	\$ 1.50
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 3.20

Recip: **Joe Elledge, a married man dealing in his separate property**
P. O. Box 111
Farmington, New Mexico 87504

See Reverse for Instructions

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:
 James M. Raymond, a married man dealing
 in his separate property
 P. O. Box 291445
 Kerrville, Texas 78028

2. Article Number (Copy from service label)
 1000052001903823244

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

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0019 0382 3244

U.S. POSTAL SERVICE
 1050 17th Street, Suite 1800
 Denver, CO 80265

Postage \$ 3.20
 Certified Fee 1.25
 Return Receipt Fee (Endorsement Required) 1.25
 Restricted Delivery Fee (Endorsement Required) 3.20
 Total Postage & Fees \$ 7.90

Stamp: DENVER NM JUL 25 1999 1050

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 T.H. McElvain Oil & Gas Limited Partnership
 1050 17th Street, Suite 1800
 Denver, CO 80265

2. Article Number (Copy from service label)
 1000052001903823220

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

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 1999 Domestic Return Receipt

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____ B. Date of Delivery _____

C. Signature _____
 Agent
 Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3800, February 2000

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
 James M. Raymond, a married man dealing
 in his separate property
 P. O. Box 291445
 Kerrville, Texas 78028

2. Article Number (Copy from service label)
 1000052001903823244

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

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3811, July 1999 Domestic Return Receipt

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____ B. Date of Delivery _____

C. Signature _____
 Agent
 Addressee

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

PS Form 3800, February 2000

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:
 T.H. McElvain Oil & Gas Limited Partnership
 1050 17th Street, Suite 1800
 Denver, CO 80265

2. Article Number (Copy from service label)
 1000052001903823220

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

4. Restricted Delivery? (Extra Fee) Yes

PS Form 3800, February 2000 See Reverse for Instructions

7000 0520 0019 0382 3220

U.S. POSTAL SERVICE
 1050 17th Street, Suite 1800
 Denver, CO 80265

Postage \$ 3.20
 Certified Fee 1.25
 Return Receipt Fee (Endorsement Required) 1.25
 Restricted Delivery Fee (Endorsement Required) 3.20
 Total Postage & Fees \$ 7.90

Stamp: DENVER NM JUL 25 1999 1050

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:

2. Article Number (Copy from service label): 1000 0520 0019 0382 3299

PS Form 3811, July 1999

Postage \$ 1.55

Certified Fee \$ 1.50

Return Receipt Fee (Endorsement Required) \$ 1.75

Restricted Delivery Fee (Endorsement Required) \$ 3.20

Total Postage & Fees \$ 6.00

Postmark Here

Stamp: **ALBUQUERQUE NM 19 7000**

Recipient's Name: **Neumann Family Trust and/or Peter and Renate Neumann, Inc.**

Street, Apt. No.: **c/o Peter C. Neumann**

City, State, ZIP+: **136 Ridge Street Reno, NV 89501-1982**

PS Form 3800, February 2000

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.

1. Article Addressed to:

xc: **Grove Burnett, Attorney at Law
P.O. Box 386
Tusas, New Mexico 87571**

2. Article Number (Copy from service label): 1000 0520 0019 0382 4036

PS Form 3811, July 1999

Domestic Return Receipt U M + 0

102595-99-M-1789

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.

1. Article Addressed to:

**Neumann Family Trust and/or Peter and Renate Neumann, Inc
c/o Peter C. Neumann**

**136 Ridge Street
Reno, NV 89501-1982**

2. Article Number (Copy from service label): 1000 0520 0019 0382 3299

PS Form 3811, July 1999

Domestic Return Receipt U M + 0

102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) Kirsten M. Bava B. Date of Delivery 7/21/00

C. Signature [Signature] 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 No

**U.S. Postal Service
CERTIFIED MAIL RECEIPT**
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:

2. Article Number (Copy from service label): 1000 0520 0019 0382 4036

PS Form 3811, July 1999

Postage \$ 3.20

Certified Fee \$ 1.50

Return Receipt Fee (Endorsement Required) \$ 1.75

Restricted Delivery Fee (Endorsement Required) \$ 3.20

Total Postage & Fees \$ 9.65

Postmark Here

Stamp: **ALBUQUERQUE NM 19 7000**

Recipient's Name (Please Print Clearly) (To be completed by mailer): **Grove Burnett, Attorney at Law**

Street: **P.O. Box 386**

City, St: **Tusas, New Mexico 87571**

PS Form 3800, February 2000

See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:

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.

2. Article Number (Copy from service label)
 7000 0520 0019 0382 3231

PS Form 3811, July 1999

Domestic Return Receipt N M C O 102595-99-M-1789

See Reverse for Instructions

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Express Mail
 Return Receipt for Merchandise
 C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

5. Recipient: **Cougar Capital, LLC**
 5862 Cromo Drive, Suite 199
 Street, Apt El Paso, Texas 79912
 City, State, ZIP+4

6. Signature: *William Deming* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

7. Date of Delivery: 7-21

8. Postage: \$ 1.410
 Certified Fee: \$ 1.725
 Return Receipt Fee (Endorsement Required): \$ 3.75
 Restricted Delivery Fee (Endorsement Required): \$ 3.75
 Total Postage & Fees: \$ 10.640

9. Recipient: **Pena Blanca Corporation**
 c/o McElvain Oil & Gas Properties, Inc.
 1050 17th Street, Suite 1800
 Denver, CO 80265

10. Signature: *[Signature]* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

11. Date of Delivery: 7-19

12. Postage: \$ 1.410
 Certified Fee: \$ 1.725
 Return Receipt Fee (Endorsement Required): \$ 3.75
 Restricted Delivery Fee (Endorsement Required): \$ 3.75
 Total Postage & Fees: \$ 10.640

13. Recipient: **Pena Blanca Corporation**
 c/o McElvain Oil & Gas Properties,
 Street, Apt 1050 17th Street, Suite 1800
 City, State Denver, CO 80265

14. Signature: *[Signature]* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:

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.

2. Article Number (Copy from service label)
 7000 0520 0019 0382 3231

PS Form 3811, July 1999

Domestic Return Receipt N M C O 102595-99-M-1789

See Reverse for Instructions

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Express Mail
 Return Receipt for Merchandise
 C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

5. Recipient: **Cougar Capital, LLC**
 5862 Cromo Drive, Suite 199
 El Paso, Texas 79912

6. Signature: *William Deming* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

7. Date of Delivery: 7-21

8. Postage: \$ 1.410
 Certified Fee: \$ 1.725
 Return Receipt Fee (Endorsement Required): \$ 3.75
 Restricted Delivery Fee (Endorsement Required): \$ 3.75
 Total Postage & Fees: \$ 10.640

9. Recipient: **Pena Blanca Corporation**
 c/o McElvain Oil & Gas Properties,
 Street, Apt 1050 17th Street, Suite 1800
 City, State Denver, CO 80265

10. Signature: *[Signature]* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:

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.

2. Article Number (Copy from service label)
 7000 0520 0019 0382 3231

PS Form 3811, July 1999

Domestic Return Receipt N M C O 102595-99-M-1789

See Reverse for Instructions

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Express Mail
 Return Receipt for Merchandise
 C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

5. Recipient: **Cougar Capital, LLC**
 5862 Cromo Drive, Suite 199
 Street, Apt El Paso, Texas 79912
 City, State, ZIP+4

6. Signature: *William Deming* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

7. Date of Delivery: 7-21

8. Postage: \$ 1.410
 Certified Fee: \$ 1.725
 Return Receipt Fee (Endorsement Required): \$ 3.75
 Restricted Delivery Fee (Endorsement Required): \$ 3.75
 Total Postage & Fees: \$ 10.640

9. Recipient: **Pena Blanca Corporation**
 c/o McElvain Oil & Gas Properties,
 Street, Apt 1050 17th Street, Suite 1800
 City, State Denver, CO 80265

10. Signature: *[Signature]* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:

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.

2. Article Number (Copy from service label)
 7000 0520 0019 0382 3231

PS Form 3811, July 1999

Domestic Return Receipt N M C O 102595-99-M-1789

See Reverse for Instructions

3. Service Type
 Certified Mail
 Registered
 Insured Mail
 Express Mail
 Return Receipt for Merchandise
 C.O.D.

4. Restricted Delivery? (Extra Fee) Yes No

5. Recipient: **Cougar Capital, LLC**
 5862 Cromo Drive, Suite 199
 El Paso, Texas 79912

6. Signature: *William Deming* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

7. Date of Delivery: 7-21

8. Postage: \$ 1.410
 Certified Fee: \$ 1.725
 Return Receipt Fee (Endorsement Required): \$ 3.75
 Restricted Delivery Fee (Endorsement Required): \$ 3.75
 Total Postage & Fees: \$ 10.640

9. Recipient: **Pena Blanca Corporation**
 c/o McElvain Oil & Gas Properties,
 Street, Apt 1050 17th Street, Suite 1800
 City, State Denver, CO 80265

10. Signature: *[Signature]* Agent Addressee
 D. is delivery address different from item 1? Yes No
 If YES, enter delivery address below:

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

1. Article Addressed to:
**Novoco Corporation,
 7400 Lakeside Drive
 Reno, NV 89511**

2. Article Number (Copy from service label)
10000520001903823282

PS Form 3811, July 1999 Domestic Return Receipt **NM 0**
 See Reverse for Instructions

Postage \$	SS
Certified Fee	1.25
Return Receipt Fee (Endorsement Required)	1.25
Restricted Delivery Fee (Endorsement Required)	0.00
Total Postage & Fees \$	2.50

Stamp: SAN RAFALE NV JUL 19 2000

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.

1. Article Addressed to:
**Novoco Corporation,
 7400 Lakeside Drive
 Reno, NV 89511**

2. Article Number (Copy from service label)
10000520001903823282

PS Form 3811, July 1999 Domestic Return Receipt **NM 0**
 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

A. Received by (Please Print Clearly) **Novoco** B. Date of Delivery **7-21-00**

C. Signature **[Signature]** 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 No

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.

1. Article Addressed to:
**Dennis Hopper, as his separate property
 c/o Spencer Cross
 Pharma Properties, Inc.
 8018 NDCBU
 Taos, New Mexico 87571**

2. Article Number (Copy from service label)
10000520001903834561

PS Form 3811, July 1999 Domestic Return Receipt **NM 0**
 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

A. Received by (Please Print Clearly) **SPENCER CROSS** B. Date of Delivery **7-21-00**

C. Signature **[Signature]** 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 No

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

A. Received by (Please Print Clearly) **Novoco** B. Date of Delivery **7-21-00**

C. Signature **[Signature]** 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 No

Postage \$ **1.25**
 Certified Fee **1.25**
 Return Receipt Fee (Endorsement Required) **1.25**
 Restricted Delivery Fee (Endorsement Required) **0.00**
 Total Postage & Fees \$ **3.75**

Stamp: SAN RAFALE NV JUL 19 2000

Recipient: **Dennis Hopper, as his separate property (iler)**
 c/o Spencer Cross
 Pharma Properties, Inc.
 8018 NDCBU
 Taos, New Mexico 87571

PS Form 3811, July 1999 Domestic Return Receipt **NM 0**
 See Reverse for Instructions

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

Postage	\$ 5.50
Certified Fee	1.25
Return Receipt Fee (Endorsement Required)	1.25
Restricted Delivery Fee (Endorsement Required)	3.20
Total Postage & Fees	\$ 11.20

Postmark: SANTA FE NM JUL 19 2000

Recipient's Name: **Johansen Energy Partnership**
 Street, Apt. No.: **P.O. Box 1773**
 City, State, Zip: **Whitefish, MT 59937**

SENDER: COMPLETE THIS SECTION

1. Article Addressed to:
Huntington T. Walker, et ux.
2961 S. Fillmore Way
Denver, CO 80210

2. Article Number (Copy from service label)
7000 0520 0019 0383 4547

PS Form 3811, July 1999 Domestic Return Receipt **NM+0** 102595-99-M-1789

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) _____ B. Date of Delivery _____

C. Signature: **X Walker** 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 No

U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only: No Insurance Coverage Provided)

Postage	\$ 3.20
Certified Fee	1.25
Return Receipt Fee (Endorsement Required)	1.25
Restricted Delivery Fee (Endorsement Required)	3.20
Total Postage & Fees	\$ 9.90

Postmark: SANTA FE NM JUL 19 2000

Recipient's Name: **Huntington T. Walker, et ux.**
 Street, Apt. No.: **2961 S. Fillmore Way**
 City, State, Zip: **Denver, CO 80210**

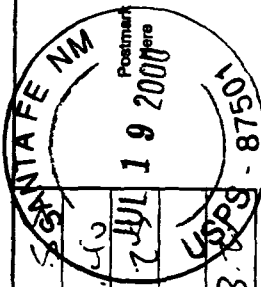
7000 0520 0019 0383 4547

7000 0520 0019 0383 4547

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only: No Insurance Coverage Provided)

7000 0520 0019 0383 4554

Postage \$	5.00
Certified Fee	1.40
Return Receipt Fee (Endorsement Required)	1.20
Restricted Delivery Fee (Endorsement Required)	0.00
Total Postage & Fees	\$ 3.80



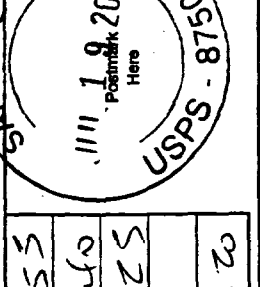
Recipient's Name _____
 Street, Apt. No., P.O. Box, etc. _____
 City, State, ZIP+4[®] _____
 PS Form 3800, February 2000 See Reverse for Instructions

Mesa Grande Resources, Inc.,
 1200 Philtower Bldg.,
 Tulsa, Oklahoma 74114

U.S. Postal Service
CERTIFIED MAIL RECEIPT
 (Domestic Mail Only: No Insurance Coverage Provided)

7000 0520 0019 0382 3305

Postage \$	5.50
Certified Fee	1.40
Return Receipt Fee (Endorsement Required)	1.25
Restricted Delivery Fee (Endorsement Required)	0.00
Total Postage & Fees	\$ 3.20



Recipient's Name _____
 Street, Apt. No., P.O. Box, etc. _____
 City, State, ZIP+4[®] _____
 PS Form 3800, February 2000 See Reverse for Instructions

Gavilan Dome Properties
 1180 Cedarwood Drive
 Moraga, CA 94556