

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

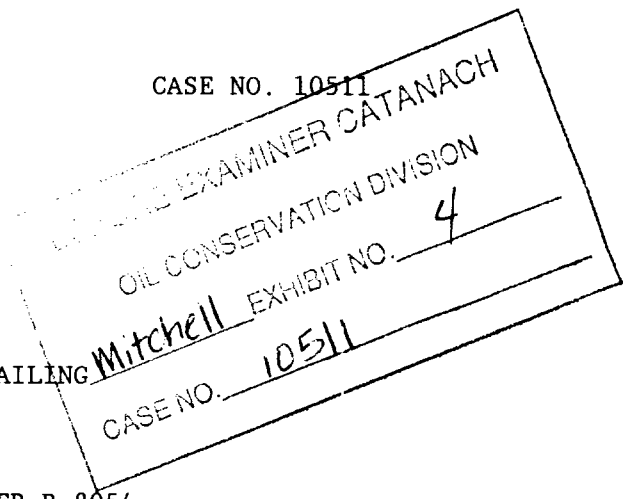
IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION
FOR THE PURPOSE OF CONSIDERING:

APPLICATION OF MITCHELL ENERGY
CORPORATION FOR AN UNORTHODOX
GAS WELL LOCATION AND FOR NON-
STANDARD PRORATION UNITS, LEA
COUNTY, NEW MEXICO

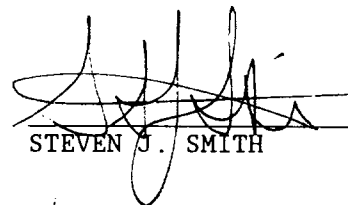
CERTIFICATE OF MAILING

AND

COMPLIANCE WITH ORDER R-8054



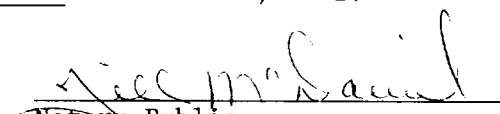
Steven J. Smith, authorized representative of Mitchell Energy Corporation, states that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on JULY 1, 1992, I caused to be mailed by certified mail return-receipt requested notice of this hearing and a copy of the application for the above referenced case along with the cover letter, at least twenty days prior to the hearing set for JULY 23, 1992, to the parties shown in the application as evidenced by the attached copies of return receipt cards, and that pursuant to Division Rule 1207, notice has been given at the correct addresses provided by such rule.


STEVEN J. SMITH

SUBSCRIBED AND SWORN TO BEFORE ME THIS 26th DAY OF JULY, 1992.

My Commission Expires:

9/6/93


Notary Public

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.

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

3. Article Addressed to: **ABO PETROLEUM CORP.**
105 SOUTH 4TH STREET
ARTESIA, NEW MEXICO 88210

4. Article Number: **P 355 201 930**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: _____

6. Signature - Agent: **W. E. B. Burt**

7. Date of Delivery: **7-2-92**

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 service(s) requested.

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

3. Article Addressed to: **Amox Oil & Gas, Inc.**
P.O. Box 44806
Houston, Texas 77044

4. Article Number: **P 355 201 851**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: _____

6. Signature - Agent: **W. E. B. Burt**

7. Date of Delivery: **7-4-92**

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 service(s) requested.

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

3. Article Addressed to: **Amity Oil Co., Inc.**
40 Robert Pulliam
4925 Greenville Avenue
Suite 700
Dallas, Texas 75206

4. Article Number: **P 355 201 852**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: _____

6. Signature - Agent: **W. E. B. Burt**

7. Date of Delivery: **7-6-92**

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 service(s) requested.

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

3. Article Addressed to: **Atlantic Richfield Company**
Raw Material Supply Division
P.O. Box 410355
Dallas, Texas 75391

4. Article Number: **P 355 201 853**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee: _____

6. Signature - Agent: **W. E. B. Burt**

7. Date of Delivery: **7-5-92**

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.

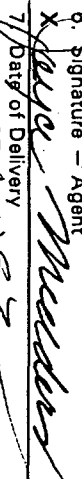
☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)


3. Article Addressed to: William P. Aycock & Associates
1007 W. Wall
Midland, Texas 79701

4. Article Number P 355 201 854

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee X 

6. Signature - Agent X 

7. Date of Delivery 7-29-92

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.

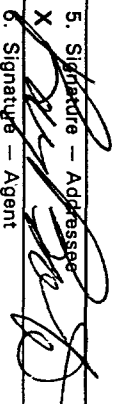
☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)


3. Article Addressed to: Roy G. Barton Jr., Trustee
P.O. Box 978
Hobbs, New Mexico 88240

4. Article Number P 355 201 856

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee X 

6. Signature - Agent X 

7. Date of Delivery 7-29-92

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.

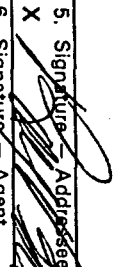
☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)


3. Article Addressed to: Roy G. Barton and Opal Barton
P.O. Box 978
Hobbs, New Mexico 88240

4. Article Number P 355 201 855

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee X 

6. Signature - Agent X 

7. Date of Delivery 7-29-92

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)

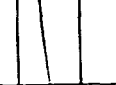
3. Article Addressed to: Roy G. Barton, Jr.
P.O. Box 978
Hobbs, New Mexico 88241

4. Article Number P 355 201 857

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee X 

6. Signature - Agent X 

7. Date of Delivery 7-29-92

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

3. Article Addressed to: Mary L. Boling
 Box 768
 Artesia, New Mexico 88210

4. Article Number: P 355 201 858

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

6. Signature - Agent

7. Date of Delivery 7-2-82

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

3. Article Addressed to: Robert E. Boling
 305 South 5th Street
 Artesia, New Mexico 88210

4. Article Number: P 355 201 860

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

6. Signature - Agent

7. Date of Delivery 7-2-82

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

3. Article Addressed to: Braille Institute of America
 Agency # 631-00
 40 Nations Bank of Texas, N.A.
 P.O. Box 840049
 Dallas, Texas 75284-0049

4. Article Number: P 355 201 861

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

6. Signature - Agent

7. Date of Delivery JUL 03 1982

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

3. Article Addressed to: T.E. Brown, Jr.
 2407 Cero Road, Box 68
 Artesia, New Mexico 88210

4. Article Number: P 355 201 862

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

6. Signature - Agent

7. Date of Delivery 7-2-82

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:

3. Article Addressed to: BTA OIL PRODUCERS
104 SOUTH PECOS
MIDLAND, TEXAS 79701

4. Article Number: P 355 201 931

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

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

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery JUL - 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:

3. Article Addressed to: Canyon Resources, Inc.
5310 Harvest Hill Road
Suite 180
Dallas, Texas 75230-5805
JUL 0 8 1989

4. Article Number: P 355 201 863

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

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

5. Signature - Addressee

6. Signature - Agent

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. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

3. Article Addressed to: Edna Carper
611 W. Quay
Artesia, New Mexico 88210

4. Article Number: P 355 201 864

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

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

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery JUL - 2 1989

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:

3. Article Addressed to: Suzanne M. Chambers
1341 Squires
Abilene, Texas 79602

4. Article Number: P 355 201 865

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

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

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery JUL 3 92

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:

CHEVRON U.S.A. INC.
15 SMITH ROAD
MIDLAND, TEXAS 79701

4. Article Number: P 355 201 932

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

5. Signature - Addressee X

6. Signature - Agent X *John Jones*

7. Date of Delivery 7-21

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:

DOLLINS & WARE INC.
303 WEST WAL
SUITE 2200
MIDLAND, TEXAS 79701

4. Article Number: P 355 201 933

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

5. Signature - Addressee

6. Signature - Agent *John Jones*

7. Date of Delivery 7-21

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:

Robert L. Collins, Jr.
2004 Brentwood Drive
Auburndale, Florida 33823

4. Article Number: P 355 201 826

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

5. Signature - Addressee X *Robert L. Collins, Jr.*

6. Signature - Agent X *John Jones*

7. Date of Delivery 7-21

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:

Conoco, Inc.
P. O. Box 1959
Midland, Texas 79702

4. Article Number: P 355 201 827

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

5. Signature - Addressee X

6. Signature - Agent *John Jones*

7. Date of Delivery 7-21

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

3. Article Addressed to:
Barbara L. Coontz
P.O. Box 2094
Fort Worth, Texas 76101

4. Article Number
P 355 201 867

Type of Service:
☐ Registered
☒ Certified
☐ Insured
☐ 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
X
7. Date of Delivery
JUL 08 1992

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:
Jimmie Cravens
4711 Lafayette
Fort Worth, Texas 76107

4. Article Number
P 355 201 867

Type of Service:
☐ Registered
☒ Certified
☐ Insured
☐ 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
X
7. Date of Delivery
7-3-92

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:
Lelah P. Craig, Trustee of
the Craig Mineral Trust
P.O. Box 20709
Oklahoma City, Oklahoma 73155

4. Article Number
P 355 201 868

Type of Service:
☐ Registered
☒ Certified
☐ Insured
☐ 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
X
6. Signature - Agent
X
7. 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.
1. ☐ Show to whom delivered, date, and addressee's address. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
Tom Cravens & Mary Watson
Trustees of Caliste Cravens
P.O. Box 449
Arlington, Texas 76010

4. Article Number
P 355 201 870

Type of Service:
☐ Registered
☒ Certified
☐ Insured
☐ 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
X
6. Signature - Agent
X
7. Date of Delivery
7-3-92

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)

3. Article Addressed to: Marion Culbertson, Trustee W/ldo E. A. Culbertson P.O. Box 2918 Midland, Texas 79702		4. Article Number P 355 401 871	
5. Signature - Addressee X		Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature - Agent X <i>Michael Wallace</i>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery 7-2-92			

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)

3. Article Addressed to: Marion Culbertson, Trustee and Shirley C. Wallace Co., Trustee P.O. Box 2918 Midland, Texas 79702		4. Article Number P 355 401 872	
5. Signature - Addressee X		Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature - Agent X <i>Michael Wallace</i>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery 7-2-92			

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)

3. Article Addressed to: DAPCO, Inc. 6601 W. I-40, Bldg. #2 Amarillo, Texas 79106-3428		4. Article Number P 355 401 873	
5. Signature - Addressee X		Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature - Agent X <i>Michael Wallace</i>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery 7-6-92			

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)

3. Article Addressed to: TONY MANCUSO, TRUSTEE OF THE THOMAS CULLEN DAUS TRUST 1222 COMMERCE STREET SUITE 500 DALLAS TEXAS 75202		4. Article Number P 355 201 901	
5. Signature - Addressee X		Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
6. Signature - Agent X <i>Michael Wallace</i>		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery JUL 06 1992			

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: William S. Davis P.O. Box 122269 Fort Worth, Texas 76121	4. Article Number P355 201 874
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" 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	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery X	

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)

3. Article Addressed to: William Seldon Davis, Testimony Trust P.O. Box 122269 Fort Worth, Texas 76121	4. Article Number P355 201 949
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" 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	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery X	

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)

3. Article Addressed to: Department of Interior - MHS Royalty Management Program P.O. Box 5810 T.A. CHAMPION MESSENGER P.O. Box 5810 DENVER, CO 80206	4. Article Number P355 201 875
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" 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	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery X	

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)

3. Article Addressed to: Dorchester Gas Corporation P.O. Box 100622 Houston, Texas 77012	4. Article Number P355 201 877
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" 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	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery X	

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.

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

3. Article Addressed to: **Dorchester Master Limited Partnership**
c/o Parker & Parsley Dev. Co.
P.O. Box 3178
Midland, Texas 79702-3178

4. Article Number: **P 355 201 877**

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

5. Signature - Addressee: **W. Parker**

6. Signature - Agent: **W. Parker**

7. Date of Delivery: **JUL 2 1989**

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: **Hiram M. Dow Trust**
United New Mexico Trust Co., Trustee
Attn: Trust Department
P.O. Box 5414
Albuquerque, New Mexico 88241

4. Article Number: **P 355 201 878**

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

5. Signature - Addressee: **H. M. Dow**

6. Signature - Agent: **H. M. Dow**

7. Date of Delivery: **JUL 2 1989**

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

3. Article Addressed to: **Leroy English, Trustee**
15648 CR 250
Durango, Colorado 81304

4. Article Number: **P 355 201 879**

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

5. Signature - Addressee: **L. English**

6. Signature - Agent: **L. English**

7. Date of Delivery: **JUL 2 1989**

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: **William B. English**
P.O. Box 1328
Artec, New Mexico 87410

4. Article Number: **P 355 201 880**

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

5. Signature - Addressee: **W. B. English**

6. Signature - Agent: **W. B. English**

7. Date of Delivery: **JUL 2 1989**

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

3. Article Addressed to:
FINA OIL AND CHEMICAL COMPANY
P.O. Box 299D
MIDLAND, TEXAS 79702

5. Signature - Addressee
X

6. Signature - Agent
X *John Leon*

7. Date of Delivery
7-7-92

S Form 3811, Apr. 1989

* U.S.G.P.O. 1989-236-815

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:
James B. Francis
500 W. Lovers Lane
Suite 313
Dallas, Texas 75209

5. Signature - Addressee
X

6. Signature - Agent
X *John Leon*

7. Date of Delivery
7/6/92

S Form 3811, Apr. 1989

* U.S.G.P.O. 1989-236-815

DOMESTIC RETURN RECEIPT

4. Article Number
P 355 201 938

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

Always obtain signature of addressee or agent and DATE DELIVERED or agent and DATE DELIVERED requested and fee paid

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

USPS 1992

● **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:
Sidney H. Gottlieb
5310 Harvest Hill Road
Suite 180
Dallas, Texas 75238

5. Signature - Addressee
X

6. Signature - Agent
X *John D. RT. #3040*

7. Date of Delivery
7/3/92

PS Form 3811, Apr. 1989

* U.S.G.P.O. 1989-236-815

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:
Patricia Eileen Beck Griffin
2510 Fitzgeralds Circle
College Station, Texas 77840

5. Signature - Addressee
X

6. Signature - Agent
X *John D. RT. #3040*

7. Date of Delivery
7/3/92

PS Form 3811, Apr. 1989

* U.S.G.P.O. 1989-236-815

DOMESTIC RETURN RECEIPT

4. Article Number
P 355 201 883

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

Always obtain signature of addressee or agent and DATE DELIVERED or agent and DATE DELIVERED requested and fee paid

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. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Jane Ann Hudson P.O. Box T Artesia, New Mexico 88310	4. Article Number P 355 201 886 Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" 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 <i>Jane Ann Hudson</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent <i>[Signature]</i>	
7. Date of Delivery JUL 13 1992	JUL 20 1992

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: Higgins Trust, Inc.
P.O. Box 2421
Gainesville, Georgia 30503

4. Article Number: P 355 201 885

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: Kathleen Shurenda

6. Signature - Agent: X

7. Date of Delivery: 7/6/92

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: Kathleen Irwin
1911 W. Missouri Ave.
Midland, Texas 79701-6520

4. Article Number: P 355 201 887

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: Kathleen Irwin

6. Signature - Agent: X

7. Date of Delivery: 7/2/92

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: WALLACE W. IRWIN, TESTAMENTARY TRUST
1911 W. MISSOURI AVE.
MIDLAND, TEXAS 79701-6520

4. Article Number: P 355 201 888

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

7. Date of Delivery: 7/2/92

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.

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

3. Article Addressed to: KERR MCGEE CORPORATION
P.O. Box 25861
OKLAHOMA CITY, OK. 73125

4. Article Number: P 355 201 891

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

7. Date of Delivery: JUL - 6 1992

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

Article Addressed to:

LLANO, INC.
P.O. DRAWER 1320
TOGAS, NEW MEXICO 88240

Article Number

P 355 201 892

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

PS Form 3811, Apr. 1989

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

DOMESTIC RETURN RECEIPT

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Article Addressed to:

A.J. LOSEE
P.O. DRAWER 239
ARTESIA, NEW MEXICO 88210

Article Number

P 355 201 893

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

PS Form 3811, Apr. 1989

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

DOMESTIC RETURN RECEIPT

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Article Addressed to:

PEGGY RUTH MCGAW MAW
801 W. QUAY
ARTESIA, NEW MEXICO 88210

Article Number

P 355 201 902

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

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

Article Addressed to:

THE MAPLE CORPORATION
2626 COLE AVENUE
SUITE 300
HOUSTON, TEXAS 75204-1072

Article Number

P 355 201 903

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

PS Form 3811, Apr. 1989

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

DOMESTIC RETURN RECEIPT

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.

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

3. Article Addressed to:

MARATHON OIL COMPANY
P.O. Box 730366
DALLAS, TEXAS 75373-0366

4. Article Number

P 355 201 904

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

7. Date of Delivery

JUL 03 1992

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.

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

3. Article Addressed to:

MARBOB ENERGY CORP.
P.O. DRAWER 217
ARTESIA, NEW MEXICO 88210

4. Article Number

P 355 201 941

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

7. Date of Delivery

7-2-92

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:

Jack Hagin McCaw
HC 54, Box 114
Rye, Colorado 81069

4. Article Number

P 355 201 950

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

7. Date of Delivery

7-7-92

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:

JACK W. McCaw
P.O. Box 127
ARTESIA, NEW MEXICO 88211

4. Article Number

P 355 201 895

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

7. Date of Delivery

7-2-92

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:
LURA G. McCAW
3623 E. SANTA ANA
FRESNO, CALIFORNIA 93726

4. Article Number
P 355 201 896

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

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

5. Signature - Addressee
X *Laura G. McCAW*

6. Signature - Agent

7. Date of Delivery
7/8/92

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:
ROBERT S. McCAW
210 CROSSBOW ROAD
ARTESIA, NEW MEXICO 88210

4. Article Number
P 355 201 897

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

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

5. Signature - Addressee
X *Robert S. McCAW*

6. Signature - Agent

7. Date of Delivery
7-2-92

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:
THOMAS M. McCAW
P.O. Box 7383
PUEBLO WEST, COLORADO 81007

4. Article Number
P 355 201 898

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

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

5. Signature - Addressee
X *Thomas M. McCAW*

6. Signature - Agent

7. Date of Delivery
7-6-92

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

3. Article Addressed to:
WILLIAM REED McCAW, JR.
1213 TUMBLEWEED
NEW BRAUNFELS, TX. 78130-5942

4. Article Number
P 355 201 899

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

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

5. Signature - Addressee
X *William Reed McCAW, JR.*

6. Signature - Agent
X *Debra McCAW*

7. Date of Delivery
7-6-92

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:	4. Article Number P 355 201 900
JOHN WILLIAM McDONALD 1301 SUNNY HILL CT. BETTENDORF, IOWA 52722 <i>John W. McDonald</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 Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Addressee <i>John W. McDonald</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery 7-6-92	
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:	4. Article Number P 355 201 942
MYCO INDUSTRIES, INC. 105 SOUTH 4TH STREET ARTESIA, NEW MEXICO 88210	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" 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	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X <i>Mike Beck</i>	
7. Date of Delivery 7-2-92	
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:	4. Article Number P 355 201 940
ROY L. MCKAY P.O. Box 2014 ROSSELL, NEW MEXICO 88201	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" 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	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X <i>Mike Beck</i>	
7. Date of Delivery 7-2-92	
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:	4. Article Number P 355 201 906
NMESCO FUELS, INC. P.O. Box 920 HOOBS, NEW MEXICO 88240	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" 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	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X <i>Mike Beck</i>	
7. Date of Delivery 7-2-92	
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)

3. Article Addressed to: **NATIONSBANK of TEXAS, N.A., IND. EX. w/o SELMA E. ANDREWS TRUST #5188 P.O. Box 842029 DALLAS, TEXAS 75284-2029**

4. Article Number: **P 355 201 907**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee ☒

6. Signature - Agent ☒

7. Date of Delivery **JUL 03 1992**

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

S 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)

3. Article Addressed to: **JURETTA ENGLISH OLSEN, TRUSTEE for STANLEY G. ENGLISH 3821 NANCY LOPEZ DR. CLOVIS, NEW MEXICO 88101**

4. Article Number: **P 355 201 909**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee ☒

6. Signature - Agent ☒

7. Date of Delivery **7-2-92**

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

S 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)

3. Article Addressed to: **PARKER & PARSLEY DEVT. Co. P.O. DRAWER 3178 MIDLAND, TEXAS 79702-3178**

4. Article Number: **P 355 201 910**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee ☒

6. Signature - Agent ☒

7. Date of Delivery **JUL - 2 1992**

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

S 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)

3. Article Addressed to: **PHILLIPS PETROLEUM Co. 4001 PENBROOK ODESSA, TEXAS 79762**

4. Article Number: **P 355 201 911**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee ☒

6. Signature - Agent ☒

7. Date of Delivery **7-2-92**

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

S 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.

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

3. Article Addressed to:

ELMIRA WELCH POPE
603 W. CHURCH
ROSSELL, NEW MEXICO 88201

4. Article Number
P 355 201 842

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

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

5. Signature - Addressee
X *Elmira W. Pope*

6. Signature - Agent
X

7. Date of Delivery
7-8-92

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.

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

3. Article Addressed to:

J. H. RHEA, INC.
1219 HEATHWOOD DRIVE
HOUSTON, TEXAS 77077

4. Article Number
P 355 201 943

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

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

5. Signature - Addressee
X *J. H. Rhea*

6. Signature - Agent
X

7. Date of Delivery
7-6-92

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.

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

3. Article Addressed to:

A. M. ROUTH
Box 2004
MIDLAND, TEXAS 79701

4. Article Number
P 355 201 843

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

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

5. Signature - Addressee
X *A. M. Routh*

6. Signature - Agent
X

7. Date of Delivery
7-2-92

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.

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

3. Article Addressed to:

JACK L. RUSSELL
Box 1604
MIDLAND, TEXAS 79701

4. Article Number
P 355 201 844

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

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

5. Signature - Addressee
X *Jack L. Russell*

6. Signature - Agent
X

7. Date of Delivery
7-2-92

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.

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

3. Article Addressed to:

SCOPE INDUSTRIES
233 WILSHIRE BLVD.
SUITE 790
SANTA MONICA, CALIF. 90401

4. Article Number: **P 355 201 845**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery: **7/7/92**

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

PS 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.

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

3. Article Addressed to:

SHIRLEN SHABAREH
3110 WEST HICKORY PARK
SUGARLAND, TEXAS 77479

4. Article Number: **P 355 201 944**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery: **7-10-92**

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

PS 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.

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

3. Article Addressed to:

DON SHACKELFORD
1214 NORTH SLOPE
CARROLLTON, TEXAS 75007

4. Article Number: **P 355 201 846**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery: **7/3/92**

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

PS 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.

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

3. Article Addressed to:

BONNIE J. SORENSON
2010 FULKERSON DRIVE
ROSWELL, NEW MEXICO 88201

4. Article Number: **P 355 201 912**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery: **7-3-92**

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

PS 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 service(s) requested.

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

3. Article Addressed to:

TCU DR II ROYALTY PARTNERSHIP
400 SOUTH HOPE STREET
SUITE 500
LOS ANGELES, CALIF. 90071

4. Article Number: P 355 201 913

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

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.

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)

3. Article Addressed to:

JULIA S. TERRY
3605 PATTERSON
AMARILLO, TEXAS 79109
Julia S. Terry

4. Article Number: P 355 201 915

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

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.

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)

3. Article Addressed to:

SAUNDRA LEIGH TERRY
P.O. Box 12617
EL PASO, TEXAS 79912

4. Article Number: P 355 201 916

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

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.

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)

3. Article Addressed to:

TEXACO INC.
TEXAS COMMERCE BANK
P.O. Box 201665
HOUSTON, TEXAS 77216-1665

4. Article Number: P 355 201 923

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

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.

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)

3. Article Addressed to: **TEX STAR NORTH AMERICA, INC.**
1200 TRAVIS
SUITE 700
HOUSTON, TEXAS 77002

4. Article Number **P 355 201 945**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee _____

6. Signature - Agent *Paula Bryant*

7. Date of Delivery *07-06-92*

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.

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

3. Article Addressed to: **JACQUELINE McLAU THOMAS**
11438 LOVINGTON HIGHWAY
ARTESIA, NEW MEXICO 88210-9634

4. Article Number **P 355 201 924**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee *Jacqueline McLau Thomas*

6. Signature - Agent _____

7. Date of Delivery *7-2-92*

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.

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

3. Article Addressed to: **D.E. THORNTON**
2311 STUTZ PLACE
MIDLAND, TEXAS 79705

4. Article Number **P 355 201 925**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee *D.E. Thornton*

6. Signature - Agent _____

7. Date of Delivery *7/3*

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.

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

3. Article Addressed to: **TOC-GULF COAST, INC.**
c/o FINA OIL & CHEMICAL Co.
P.O. Box 651339
DALLAS, TEXAS 75265

4. Article Number **P 355 201 914**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee _____

6. Signature - Agent *John Taylor*

7. Date of Delivery *JUL 05 1992*

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.

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

3. Article Addressed to:

ULTRAMAR PRODUCTION Co.
16825 NORTHCHASE DRIVE
SUITE 1200
HOUSTON, TEXAS 77060-6031

4. Article Number
P 355 201 947

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery 7-7-92

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.

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

3. Article Addressed to:

JEWEL G. WELLMAN
2720 55th ST.
LUBBOCK, TEXAS 79413-4910

4. Article Number
P 355 201 927

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery 7-8-92

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.

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

3. Article Addressed to:

M.B. WILSON
4100 GREENBRIAR # 233
HOUSTON, TEXAS 77098

4. Article Number
P 355 201 928

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery JUL 6 1992

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.

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

3. Article Addressed to:

WIN INC.
6601 W. I-40 #2
AMARILLO, TEXAS 79106-2628

4. Article Number
P 355 201 926

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee

6. Signature - Agent

7. Date of Delivery 7-6-92

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

3 and 4. **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)

3. Article Addressed to: **WISER OIL COMPANY**
P.O. Box 640454
PITTSBURGH, PENNSYLVANIA 15224

4. Article Number **P 355 201 929**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee **PITTSBURGH NATL BANK**

6. Signature — Agent **IM - 6 1992**

7. Date of Delivery

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

3. Article Addressed to: **Evelyn Ann English Woods**
P.O. Box 37
Kirtland, New Mexico 87417

4. Article Number **P 355 201 917**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee **Evelyn A.E. Woods**

6. Signature — Agent

7. Date of Delivery

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

3 and 4. **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)

3. Article Addressed to: **Lillie M. Yates**
901 South 4th Street
Artesia, New Mexico 88210

4. Article Number **P 355 201 920**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

6. Signature — Agent **Mike Bul**

7. Date of Delivery **7-2-92**

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

3. Article Addressed to: **Lillie M. & S.P. Yates, as**
Personal Representatives
907 South 4th Street
Artesia, New Mexico 88210

4. Article Number **P 355 201 941**

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

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature — Addressee

6. Signature — Agent **Mike Bul**

7. Date of Delivery **7-2-92**

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

3. Article Addressed to: Yates Drilling Company 105 South 4th Street Artesia, New Mexico 88210		4. Article Number P 355 201 919
5. Signature - Addressee X		Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X Mike Paul		8. Addressee's Address (ONLY if requested and fee paid)
7. Date of Delivery 7-2-92		

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-615

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

3. Article Addressed to: YATES PETROLEUM CORP. 105 SOUTH 4th STREET ARTESIA, NEW MEXICO 88210		4. Article Number P 355 201 948
5. Signature - Addressee X		Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X Mike Paul		8. Addressee's Address (ONLY if requested and fee paid)
7. Date of Delivery 7-2-92		

PS Form 3811, Apr. 1989

*U.S.G.P.O. 1989-238-615

DOMESTIC RETURN RECEIPT

P 355 201 632
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to <i>Gas Royalty</i>	
Street and No. <i>1409 S. Devonshire Drive</i>	
P.O., State and ZIP Code <i>Salt Lake City, Utah 84108</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date <i>7/8/92</i>	

P 355 201 935
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to <i>DOW CHEMICAL COMPANY</i>	
Street and No. <i>Box 22468</i>	
P.O., State and ZIP Code <i>HOUSTON, TEXAS 77027</i>	
Postage	\$ <i>.98</i>
Certified Fee	<i>1.00</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	<i>1.00</i>
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.98</i>
Postmark or Date	

P 355 201 889
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to <i>G.W. JACKSON, JR.</i>	
Street and No. <i>2608 RACQUET CLUB DRIVE</i>	
P.O., State and ZIP Code <i>MIDLAND, TEXAS 79701</i>	
Postage	\$ <i>.58</i>
Certified Fee	<i>1.00</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	<i>1.00</i>
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.98</i>
Postmark or Date	

P 355 201 886
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to <i>Jane Ann Hudson</i>	
Street and No.	
P.O., State and ZIP Code <i>Box T, Artesia, N.M. 88210</i>	
Postage	\$ <i>.98</i>
Certified Fee	<i>1.00</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	<i>1.00</i>
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ <i>2.98</i>
Postmark or Date	

P 355 201 946
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to P.B. TOMLINSON, JR.	
Street and No. Box 61268	
P.O., State and ZIP Code HOUSTON, TEXAS 77208	
Postage	\$.98
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	1.00
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.98
Postmark or Date	

P 355 201 922
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to SUSAN LYNN TERRY	
Street and No. P.O. Box 1167	
P.O., State and ZIP Code SANTA TERESA, N.M. 88008	
Postage	\$.98
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	1.00
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.98
Postmark or Date	

P 355 201 953
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to Ms. Evelyn Ann English	
Street and No. Box 27	
P.O., State and ZIP Code Kirtland, N.M. 87417	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date	

P 355 201 952
RECEIPT FOR CERTIFIED MAIL
 NO INSURANCE COVERAGE PROVIDED
 NOT FOR INTERNATIONAL MAIL
 (See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to Ms. Evelyn English Marquy Ninos	
Street and No. #40 Road 5107	
P.O., State and ZIP Code Farmington, N.M. 87401	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date 7/16/92	

P 355 201 951

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

U.S.G.P.O. 1989-234-555

PS Form 3800, June 1985

Sent to <i>Ms. Nuratta Engle Olson</i>	
Street and No. <i>#40 Road 5109</i>	
P.O., State and ZIP Code <i>Farmington, N.M. 87401</i>	
Postage	\$
Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$
Postmark or Date <i>7/16/92</i>	

CERTIFIED MAIL
P 355 201 890



REASON CHECKED
☒ Insufficient Address
☐ Refused
 Addressee unknown
 Insufficient address
 No such street number
 No such office in state
 Do not return in this envelope
 GSERX No. 38-2

**LOOK BOX CLOSED
RETURN TO SENDER
#1**

**P 355 201 890
RECEIPT FOR CERTIFIED MAIL**
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Kaneb Operating Company, Ltd.
P.O. Box [REDACTED]
Houston, Texas

PS Form 3800, June 1985 U.S.G.P.O. 1989-234-555

Sent to	
KANEB OPERATING Co, LTD	
Street and No.	P.O. Box 297827
P.O., State and ZIP Code	HOUSTON, TEXAS 77297
Postage	\$ 91
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and date delivered	1.00
Return Receipt showing date, address, and delivery	
TOTAL Postage and Fees	\$ 8.98
Postmark Date	

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

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. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

KANEB OPERATING COMPANY, LTD
P.O. Box 297827
HOUSTON, TEXAS 77297

4. Article Number: P 355 201 890

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

5. Signature - Addressee
☒ Signature - Addressee
☒ Signature - Addressee

6. Signature - Addressee
☒ Signature - Addressee

7. Date of Delivery: JUL 6 - 1992

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

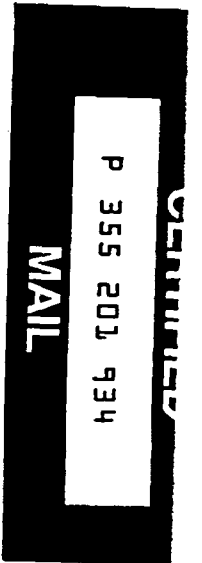
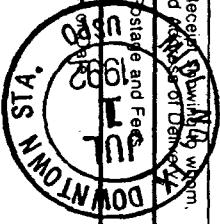
DOMESTIC RETURN RECEIPT

P 355 201 934

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sender CONOCO INC.	
Street and No. P.O. Box 10369	
City, State and ZIP Code MIDLAND, TEXAS 79702	
Postage	\$.98
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	1.00
Return Receipt showing Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 2.98
Postmark 8/10/92	



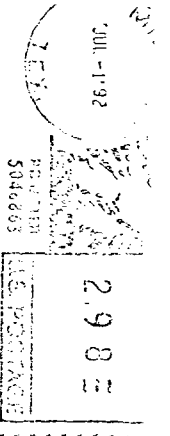
TO:

MITCHELL ENERGY CORPORATION
1000 INDEPENDENCE PLAZA 400 W. ILLINOIS, MIDLAND, TEXAS 79701

Conoco Inc.
P.O. Box 10369
Midland, Texas 79702

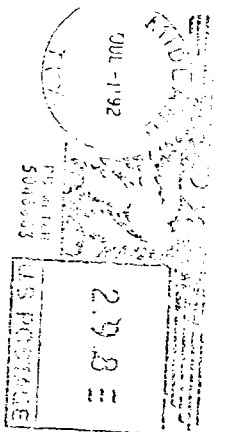
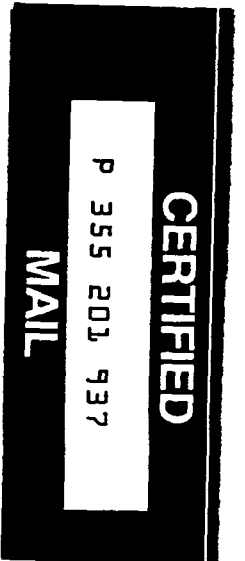
RETURN POSTAGE GUARANTEED

NAME
1st Notice **22**
2nd Notice
Return



10369

JUL 17 1992



Moved, left no address
No such number
Address not known

MITCHELL ENERGY CORPORATION
1000 INDEPENDENCE PLAZA 400 W. ILLINOIS, MIDLAND, TEXAS 79701

TO:
Energy Reserves Group, Inc.
Box 1407
Denver, Colorado 80201



P 355 201 937
RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

RETURN POSTAGE GUARANTEED

Sent to ENERGY RESERVES GROUP, INC.	
Street and No. Box 1407	
Postage \$.98	
Certified Fee \$ 1.00	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing Date Delivered	1.00
Return Receipt Showing to whom Delivered	
Date, and Address of Deliverer	
TOTAL POSTAGE	\$ 2.98
Postmark or Date	

Return to sender # unmarked
P.O. Box

JUL 17 1992
JUL 17 1992

P 355 201 939
RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to GAS ROYALTY, INC.	
Street and No. 3 MOUNTAINWOOD LANE	
PO, State and ZIP Code SANDY, UTAH 84092	
Postage	\$.98
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt (if required)	1.00
Return Receipt (if required) whom, date, and address of delivery	
Total postage and fees	\$ 2.98
Postmark or date	



CERTIFIED
P 355 201 939
MAIL

Handwritten signature/initials

MITCHELL ENERGY CORPORATION
1000 INDEPENDENCE PLAZA 400 W. ILLINOIS, MIDLAND, TEXAS 79701

TO:

Gas Royalty, Inc.
3 Mountainwood Lane
Sandy, Utah 84092

RETURN POSTAGE GUARANTEED

MOVED LEFT NO ADDRESS
FORWARDING ORDER EXPIRED

JUL 08 1992

100-1192
2.98
U.S. POSTAGE

July 13, 1992

VIA FAX

Mr. Stanley G. English
3821 Nancy Lopex Drive
Clovis, New Mexico 88101

RE: Updated Address List
Application for an Orthodox
Gas Well Location and Non-Standard
Proration and Spacing Units
Crazy Horse "18" Federal #1 Well
Lea County, New Mexico



Dear Mr. English:

In connection with the captioned and pursuant to our conversation of this date, the following are individuals to whom Mitchell Energy Corporation mailed notice of the captioned application whose notices were returned undeliverable:

Evelyn Ann English Woods, Guardian
for Linda Sueann English
6012 Pojogue NE
Albuquerque, New Mexico 87110

Juretta English Olsen, Guardian
for J. Kathleen English
1213 East 16th
Farmington, New Mexico 87401

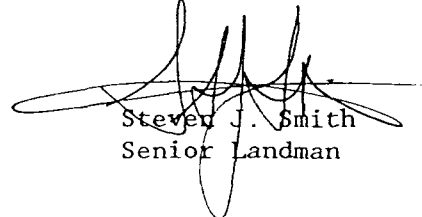
Joy English Marquez Miners
1401 North Tucker
Farmington, New Mexico 87401

If you have current addresses for any of the above parties, please fax them to my attention at (915) 682-6439.

Thank you for your assistance in this matter.

Sincerely,

MITCHELL ENERGY CORPORATION



Steven J. Smith
Senior Landman

SJS/jm

P 355 201 91A

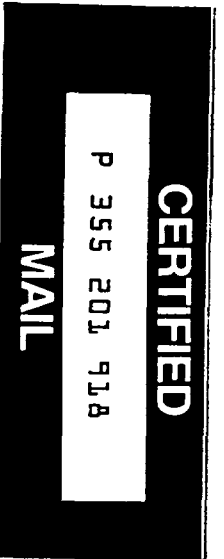
RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

PS Form 3800, June 1985

U.S.G.P.O. 1989-234-555

Sent to	
Evelyn Ann English Woods, Gb.	
Street and No.	6012 Pojoaque NE
P.O. State and ZIP Code	Albuquerque, N.M. 87110
Postage	\$.98
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	1.00
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$ 9.98
Postmark	DOWN TOWN N.M. 87102



Address



MITCHELL ENERGY CORPORATION
1000 INDEPENDENCE PLAZA 400 W. ILLINOIS, MIDLAND, TEXAS 79701

TO:

Evelyn Ann English Woods Guardian
for Linda Sueann English
6012 Pojoaque NE
Albuquerque, New Mexico 87110

RETURN POSTAGE GUARANTEED

No in
Temporary only
Return
Refused

P 355 201 908

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, June 1985

U.S.G.P.O. 1989-234-555

Sent to JUNETTA ENGLISH OLSEN	
Cdn. for J. KATHLEEN ENGLISH	
Serial and No.	1213 E 16th
P.O., State and ZIP Code	FARMINGTON, NEW MEXICO 87401
Postage	\$.98
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and how delivered	1.00
Return Receipt showing to whom, Date, and address of delivery	
TOTAL Postage and Fee	\$ 2.98
Postage paid	



MITCHELL ENERGY CORPORATION
1000 INDEPENDENCE PLAZA 400 W. ILLINOIS, MIDLAND, TEXAS 79701

Junetta English Olsen Guardian for
J. Kathleen English
1213 E. 16th
Farmington, New Mexico 87401

RETURN POSTAGE GUARANTEED

UNDELIVERABLE AS ADDRESSED
FORWARDING ORDER EXPIRED



NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL
(See Reverse)

Sent to JOY ENGLISH MARQUEZ MINERS	
Street and No. 1401 N. TUCKER	
P.O. State and ZIP Code FARMINGTON, New Mexico 87401	
Postage	\$.98
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and date shipped	1.00
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL POSTAGE & FEE	\$ 2.98
Postman or Date	



P 355 201 905

1000 INDEPENDENCE PLAZA 400 W. ILLINOIS, MIDLAND, TEXAS 79701

Joy English Marquez Miners
1401 N. Tucker
Farmington, New Mexico 87401

RETURN POSTAGE GUARANTEED

