Dreen card
on CAL Energy
has not
returned.

SENDER: Complete Items 1 and 2 when additional 3 and 4. Put your address in the "RETURN TO" Space on the rever card from being returned to you. The return receipt fee will properly to and the date of delivery. For additional service(s) request 1. Show to whom delivered, date, and addressee's additional service(s) request (Extra charge)	se side. Failure to do this will prevent this rovide you the name of the person delivered services are available. Consult postmaster ed.
3. Article Addressed to:	4. Article Number P. 572, 124, 935
Navis, Inc.	Type of Service:
P.O. Box 133	Registered Insured
Midland, TX 79702	
KA-Bird Creek NE/4NE/4	Express Mail Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent	
* Quine Mith	
7. Date of Delivery 3-2-9D	
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-	-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additions 3 and 4. Put your address in the "RETURN TO" Space on the reveard from being returned to you. The return receipt fee will to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) reques 1. Show to whom delivered, date, and addressee's a (Extra charge)	erse side. Failure to do this will prevent this provide you the name of the person delivered ng services are available. Consult postmaster isted. 2. Restricted Delivery
3. Article Addressed to:	(Extra charge) 4. Article Number
Ed E. Phillips P.O. Box 11313 Midland, TX 79702	P 572 124 936 Type of Service: Registered COD Cortified COD Express Mail Receipt for Merchandise
KA-Bird Creek NE/4NE/4	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Andress X DL Hully 6. Signature — Agent X 7. Date of Delivery MAR 0 6 1990	8. Addressee's Address (ONLY if requested and fee paid)
PS Form 3811, Mar. 1988 # U.S.G.P.O. 1988-21	2-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. (Extra charge)	
3. Article Addressed to:	4. Article Number P 572 124 938
T. Calder Ezzell P.O. Box 10 Roswell, NM 88201 KA-Bird Creek NE/4NE/4	Type of Service: Registered Insured Cod Express Mail Return Receipt for Merchandise
Mr Bild Gleen	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent	
7. Date of Delivery 3.2 - 90	
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1986-212	-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)	
3. Article Addressed to: C. Ray Allen P.O. Box 630 Midland, TX 79702	4. Article Number P 572 124 937
TA-Bird Creek NE/4NE/4 5. Signature - Address X	Always obtain signature of addressee or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid)
6. Signature Agent X 7. Date of Delivery	
PS Form 3811, Mar. 1988 * U.S.Q.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT	

SENDER: Complete items 1 and 2 when additional 3 and 4. Put your address in the "RETURN TO" Space on the reversard from being returned to you. The return receipt fee will to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) reques 1. Show to whom delivered, date, and addressee's a (Extra charge)	erse side. Failure to do this will prevent this provide you the name of the person delivered g services are available. Consult postmaster sted. ddress. 2. Restricted Delivery (Extra charge)
3. Article Addressed to:	4. Article Number
CHL Energy, Inc.	P 5/2 124 939
c/o Mr. Charles Hopkins	Type of Service:
407 N. Big Spring	Registered Linsured
Midland, TX 70701	COD Express Mail COD Return Receipt for Merchandise
KA-Bird Creek NE/4NE/4	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent	7
X	Some
7. Date of Delivery 3-5-90	
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212	2-865 DOMESTIC RETURN RECEIPT

Quinoco Consolidated Partnar P.O. Box 3/8111 Denver, CO 10237	Registered Insured
P.O. Box 3/8111 Denver, CO 00237	Registered Insured
ļ	Express Mail
5. Signature — Address X 6. Signature — Agent X 7. Date of Delivery	8. Addressee's Address (ONLY if requested and fee paid)

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)		
3. Article Addressed to:	4. Article Number	
Concise Oil & Gas	P 572 124 941	
P.O. Box 378111	Type of Service:	
Denver, CO 80237 KA-Bird Creek NE/4NE/4	Registered Insured Contified COD Express Mail Return Receipt for Merchandise	
NA BIIC Cleek NE/4NE/4	Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature — Address	8. Addressee's Address (ONLY if requested and fee paid)	
6. Signature — Agent X		
7. Date of Delivery 3-2-90		
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212	-865 DOMESTIC RETURN RECEIPT	

Put your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the follo for fees and check box(es) for additional service(s) rec	vill provide you the name of the person deliv wing services are available. Consult postma quested
3. Article Addressed to: Betsy Ann Stillwagon 11,711 Memorial #717 Houston, TX 77024 KA-Bird Creek NE/4NE/4	4. Article Number P 572 124 942 Type of Service: Registered Insured Certified CD Express Mail Return Receipt for Merchandis Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Address X 6. Signature - Agent/ X	8. Addressee's Address (ONLY if requested and fee paid)

for fees and check box(es) for additional service(s) reque 1. Show to whom delivered, date, and addressee's a (Extra charge)	g services are available. Consult posted. ddress. 2. Restricted Deliver (Extra charge)
3. Article Addressed to:	4. Article Number
James E. Kiehne	P 572 124 943 Type of Service:
201 W. Wall	Registered Insured
Hidland, TX 79701	Qertified COD Return Re for Merch
KA-Bird Creek NE/4NE/4	Always obtain signature of address or agent and <u>DATE DELIVERED</u> .
5. Signature - Address	8. Addressee's Address (ONL) requested and see paid)
X	Le No Base
6. Signature Agent	1 / "
X 4- / 00 000	4 <i>V</i>
7. Date of Delivery	i

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)	
3. Article Addressed to: Gary L. Kiehne [†] 201 W. Wall Midland, TX 79701 KA-Bird Creek NE/4NE/4	4. Article Number P 572 124 944 Type of Service: Registered Insured Cortified COD Express Mail Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X 6. Signature — Agent X D + O D D 7. Date of Pelivery 3 / 5 / 0 D PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212	som as riquestes

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3. Article Addressed to: R.F. Fort P.O. Box 1044 Midland, IX 175732 KA-Bird Crack NE/ANY/4	4. Article Number P 572 124 945 Type of Service: Registered Insured COD Express Mail Return Receipt for Merchandise Always obtain signature of addressee
5. Signature — Address X 6. Signature — Agent X 7. Date of Delivery PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-	or agent and DATE DELIVERED. 8. Addressee's Address (ONLY if requested and fee paid) -865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery (Extra charge)	
3. Article Addressed to: Westway Petro, Texas Joint Venture Lock Box 70 500 N. Akard Street Dallas, TX 75201 KA-Bird Creek NE/4NE/4	4. Article Number P 572 124 946 Type of Service: Registered Insured COD Express Mail Return Receipt for Merchandise Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X 6. Signature — Agent X 7. Date of Delivery () 6 1990 PS Form 3811, Mar. 1988 4. U.S.G.P.O. 1988—212	8. Addressee's Address (ONLY if requested and fee paid)

SENDER: Complete Items 1 and 2 when additional a 3 and 4. Put your address in the "RETURN TO" Space on the rever card from being returned to you. The return receipt fee will put to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) request 1X Show to whom delivered, date, and addressee's additional service(s) request the service of	se side. Failure to do this will prevent this rovide you the name of the person delivered services are available. Consult postmaster ed. dress. 2. Restricted Delivery (Extra charge)
3. Article Addressed to:	4. Article Number P 572 124 947
Harken Oil & Gas, Inc. P.O. Drawer 61200/ Dallas, Tx 75261	Type of Service: Registered Insured Certified COD Express Mail Receipt for Merchandise
KA-Bird Creek NE/4NE/4	Always ebtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent Leule C	
7. Date of Delivery MAR 0 5 1990	-885 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional 3 and 4. Put your address in the "RETURN TO" Space on the rever card from being returned to you. The return receipt fee will p to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) reques 1. Ex Show to whom delivered, date, and addressee's ad (Extra charge)	se side. Failure to do this will prevent this rovide you the name of the person delivered services are available. Consult postmaster led.
3. Article Addressed to: Santa Fe, Energy Operating Partners, L.P. 500 w. Illinois, 5th Floor Midland, TX 79702 KA-Bird Creek NE/4NE/4	4. Article Number P 5/2 124 948 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 — Address X 6. Signature — Agent X 7. Date of Delivery 3 - 5 - 7 PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212	8. Addressee's Address (ONLY if requested and fee paid) STATE OF THE PROPERTY

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3. Article Addressed to:	4. Article Number
Pogo Producing Company	P 572 124 949
P.O. Box 10340	Type of Services
Midland, TX /9702	Registered Insured
KA-Bird Creek NE/4NE/4	Certified COD Return Receipt for Merchandise
	Always obtain signature of addressee
	or agent and <u>DATE DELIVERED</u> .
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent	7
1x W. Mansa	}
7. Date of Delivery MAR 0 6 1990	
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-21	2-865 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional 3 and 4. Put your address in the "RETURN TO" Space on the rever card from being returned to you. The return receipt fee will pt to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) request 1. Show to whom delivered, date, and addressee's additional service(s) request 1.	se side. Failure to do this will prevent this rovide you the name of the person delivered services are available. Consult postmaster sed.
3. Article Addressed to:	4. Article Number
Amoco Production Co.	P 572 124 950
P.O. Box 3092 Houston, Tx 77253 KA-Bird Creek NE/4NE/4	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 — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature Agent	
x tty	an
7. Date of Delivery MAR 6 5 10	
PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-	-865 DOMESTIC RETURN RECEIPT

STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION

IN THE MATTER OF THE APPLICATION FOR BIRD CREEK RESOURCES, INC. FOR COMPULSORY POOLING, EDDY COUNTY, NEW MEXICO

CASE NO. 9890

CERTIFICATE OF MAILING

AND

COMPLIANCE WITH ORDER R-8054

In Accordance with Division Rule 1207 (Order R-8054) I hereby certify that on February 28, 1990, 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 March 21, 1990, to the parties shown in the Application as evidence by the attached copies of return receipt cards.

Karen Aubrev

SUBSCRIBED AND SWORN to before me this 20th day of March, 1990.

Notary Public

My Commission Expires:

7-6-91

CREEK EXHBIT NO. 7
9890 & 9891

8. Addresse's Address (ONLY if requested and fee paid) 8. Addresse's Address (ONLY if requested and fee paid) 8. Addresse's Address (ONLY if requested and fee paid) 8. Addresse's Address (ONLY if requested and fee paid) 8. Addressee's Address (ONLY if requested and fee paid) 8. Addressee's Address (ONLY if requested and fee paid)	988 * U.S.G.P.O. 1988-212-8 988 * U.S.G.P.O. 1988-212-8 98 * U.S.G.P.O. 1988-212-8
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	anā, TX 79702
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Type of Service: Creek NE/4NE/4 Creek NE/4NE/4 Always obtain signature of address (ONLY requested and fee paid) Gentified Return Receipt requested and fee paid) Figure 1988 * U.S.Q.P.O. 1988-212-865 DOMESTIC RETURN I TO' Space on the reverse side. Failure to do this will prevent led to you. The return receipt fee will provide you the name of the person delivery. For additional services on the reverse side. Failure to do this will prevent led to you. The return receipt fee will provide you the name of the person delivery. (Extra charge) I to: Type of Service: Type of Service: Registered Return Receipt fee will provide you then signature of addressee of egent and DATE DELIVERED. Always obtain signature of addressee or agent and DATE DELIVERED. B. Addressee's Address (ONLY if requested and fee paid)	Midland, ID-Bira Signature - Add
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-865 DOMESTIC RETURN RECEIPT	PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865
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Always obtain signature of addressee or agent and DATE DELIVERED.	
Express Mail Return Receipt for Merchandise	KA-Bird Creek NE/4NE/4
Registered Insured	Denver, CO (89237
Partnersp 572 124 943 Type of Service:	Quinoco Consolidated Partn P.O. Box 3/841
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3. Article Addressed to:

Betsy Ann Stillwagon

11,711 Memorial #717

HOUSton, TX 77024

Type of Service:

Registered

Registered

Round

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865	5. Signature - Address X 6. Signature - Agent X 7. Date of Delivery	1. Show to whom delivered, date, and addressee's ad 3. Article Addressed to: R.F. Fort P.O. Box 1044 Midland, FX 409 39 39 39 39 39 39 39 39 39 39 39 39 39		KA-Bird Creek NE/4NE/4 5. Signature - Address X 6. Signature Agent X 7. Date of Delivery MAD - 8 and	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 services are available. Consult postmaster for fees and check box(es) for additional services are available. Consult postmaster (Extra charge) 3. Article Addressed to: 4. Article Number P 572 124 943 Type of Service: Registered Registered Receipt fee will provide you the name of the person delivery (Extra charge) Registered Receipt fee will provide you the name of the person delivery (Extra charge) Registered Receipt fee will provide you the name of the person delivery (Extra charge) Registered Receipt fee will provide you the name of the person delivery (Extra charge) Registered Receipt fee will provide you the name of the person delivery (Extra charge) Registered Receipt fee will provide you the name of the person delivery (Extra charge) Registered Receipt fee will provide you the name of the person delivery (Extra charge)
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3811, Mar. 1988 * 1	MAR 0 6 1990	Agent MA	e - Address	ρ	, TX 7520	Akard Stree	Box 70	ure,	ressed to:	to whom delivered, (Extra	Put your address in the "HETURN TO". Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.	1: Complete items 1 and 2	PS Form 3811, Mar. 1988 *	18/6 9 July	B	re - Agent	re - Address		£	מייל אל . מייל אל .	land	E E	8	v to whom delivered, (Extra	Put your address in the "RETURN TO" Space on the reverse side. Failure to do this Will prevent the your address in the "RETURN TO" Space on the reverse side. Failure to do this Will prevent card from being returned to you. The return receipt fee will provide you the name of the person delivered card from being returned to and the date of delivery. For additional fees the following services are available. Consult postmaster to and the date of delivery. For additional services is requested.	SENDER: Complete items 1 and 2 when additional services are well as
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			8. Addressee's Address requested and fee paid)	or agent and DATE DELIVERED	Always obtain sig	Express Mail	Registered	ype of Serv	4. Article Number	eddress. 2. A	verse side. Failure to Il provide you the nan ing services are avail lested.	al services are desi	1988-212-886	令	<u> </u>	Merce	requested and fee paid		Always obtain s	Express Mail	Registered	Type of Service:	572	address. 2. Lit	werse side. Failure to the name to the nam	IN SOLAICOS GIO COS
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7. Da		MAR 0 6 1990
6. Sig		6. Signature — Agent
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K.P	Waii	KA-Bird Creek NE/4NE/4
HC P.		Midland, TX 79702
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3. Art	4. Article Number	3. Article Addressed to:
1 or 10 or	idress. 2. Restricted Delivery (Extra charge)	1. Show to whom delivered, date, and addressee's at (Extra charge)
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	8. Addressee's Address (ONI Y if	5. Signature — Address
	Always obtain signature of addressee	KA-Bird Creek NE/4NE/4
	Express Mail COD Return Receipt for Merchandise	Dallas, Tx 75261
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	P 572 124 947	Harken ()il & Gas Inc
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365 DOMESTIC RETURN RECEIPT	PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865
	7. Date of Delivery MAK U つ .
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8. Addressee's Address (ONLY if requested and fee paid)	5. Signature — Address X
Always obtain signature of addresses or agent and DATE DELIVERED.	
Express Mail for Merchandise	ton,
ice:	Amoco Production Co. P.U. Box 3092
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Franc	6. Signature — Agent
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or agent and DATE DELIVERED.	KA-Bird Creek NE/4NE/4
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3. Article Addressed to:	4. Article Number
Pogo Producing Company	P 572 124 934
9.0. Box 10345	Type of Service:
Midland, TK 73732	Registered Insured
KA-Bird Creek NE/4SE/4	COD Express Mail COD Return Receipt for Merchandise
	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X AA Choo	per not pe
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■ SENDER: Complete items 1 and 2 when additional 3 and 4. Put your address in the "RETURN TO" Space on the reversard from being returned to you. The return receipt fee will properly to and the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) requests. Show to whom delivered, date, and addressee's ac (Extra charge)	rse side. Failure to do this will prevent this rovide you the name of the person delivered services are available. Consult postmaster ted.
Oxy USA, Inc. P.O. Box 50250 Midland, TX 79710 KA-Bird Creek NE/4SE/4	4. Article Number P 572 124 932 Type of Service: Registered
5. Signature — Address X 8. Signature — Agent X 7. Date of Delivery 3. Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212	8. Addressee's Address (ONLY if requested and fee paid) -865 DOMESTIC RETURN RECEIP

Put your address in the "RETURN TO" Space on the card from being returned to you. The return receipt fee to and the date of delivery. For additional fees the follows:	Will provide you the hame of the person
for fees and check box(es) for additional service(s) re 1. > Show to whom delivered, date, and addressee (Extra charge)	quested. 's address. 2. Restricted Delive (Extra charge)
3. Article Addressed to:	4. Article Number
R.C. Roberts	P 572 124 931
P.O. Box 640	Type of Service:
Gilmer, TX 75644	Registered Insured
KA-Bird Creek NE/4SE/4	Certified COD Express Mail Return R
GILME	Always obtain signature of address or agent and DATE DELIVERED.
5. Signature - Address / Adversor	8. Addressee's Address (ONL requested and fee paid)
6. Signature – Agent X	

card from being returned to you. The return receipt fee will p to end the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) reques 1. Show to whom delivered, date, and addressee's ac (Extra charge)	ted.
3. Article Addressed to: Ruth D. Roberts	4. Article Number P 572 124 930 Type of Service:
P.O. Box 80/ Austin, TX 78767	Registered Insured Certified COD Express Mail Return Receipt for Merchandise
KA-Bird Creek NE/4SE/4	Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Address X 6. Signature — Agent X 7. Date of Deltarry 3 - 4 - 90	8. Addressee's Address (ONLY if requested and fee paid)

SENDER: Complete Items 1 and 2 when additions 3 and 4. Put your address in the "RETURN TO" Space on the reveard from being returned to you. The return receipt fee will to end the date of delivery. For additional fees the following for fees and check box(es) for additional service(s) reques 1. ☑ Show to whom delivered, date, and addressee's a (Extra charge)	erse side. Failure to do this will prevent to provide you the name of the person deliveng services are available. Consult postmasses
3. Article Addressed to:	4. Article Number
T. Calder Ezzéll P.O. Box 10 Roswell, NM 88201	P 5/2 124 928 Type of Service: Registered Insured Certified COD Express Mail Return Receipt for Merchandis
KA-Bird Creek NE/4SE/4	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature - Address	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature – Agent	
7. Date of Delivery 2-8-90	

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C. Ray Allen	P 572 124 927
P.O. Box 630	Type of Service:
Midland, TX 79701	Registered Insured COD Express Mail Receipt for Merchandise
KA-Bird Creek NE/4SE/4	Always obtain signature of addressee or agent and DATE DELIVERED.
5. Signature — Address X	8. Addressee's Address (ONLY if requested and fee paid)
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Date of Delivery	
PS Form 3811, Mar. 1988 * U.S.Q/P.O. 1988-212	-865 DOMESTIC RETURN RECEIPT

Put your address in the "RETURN TO" Space on the recard from being returned to you. The return receipt fee witto and the date of delivery. For additional fees the follow for fees and check box(es) for additional service(s) required. Show to whom delivered, date, and addressee's (Extra charge)	ill provide you the name of the person or ring services are available. Consult pos rested.
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Liberty National Bank P.O. Box 1627 Lovington, NM 88260 Attn: Mr. Mike Abbott	P 572 124 926 Type of Service: ☐ Registered ☐ Insured ☐ COD ☐ Express Mail ☐ Return Refor Merche
(KA-Bird Creek NE/4SE/4	Always obtain signature of address or agent and DATE DELIVERED.
5. Signature Address * Cró- N'acibles	8. Addressee's Address (ONL) requested and fee paid)
6. Signature Agent X	

Is your <u>RETURN ADDRESS</u> completed on the reverse side?

865 DOMESTIC RETURN RECEIPT	PS Form 3811, Mar. 1988 + U.S.G.P.O. 1986-212-865
	6. Signature – Agent X 7. Date of Delivery
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	6. Signature - Agent
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Always obtain signature of addressee or agent and DATE DELIVERED.	We bath crook NE/ 40E/ 4
Express Mail I for Merchandise	3
Certified COD	Midland, TX 79708
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services are desired, and complete items	SENDER: Complete items 1 and 2 when additional services are desired, and complete items

Thank you for using Retuine.

STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION

IN THE MATTER OF THE APPLICATION FOR BIRD CREEK RESOURCES, INC. FOR COMPULSORY POOLING, EDDY COUNTY, NEW MEXICO

CASE NO. 9891

CERTIFICATE OF MAILING

AND

COMPLIANCE WITH ORDER R-8054

In Accordance with Division Rule 1207 (Order R-8054) I hereby certify that on February 28, 1990, 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 March 21, 1990, to the parties shown in the Application as evidence by the attached copies of return receipt cards.

Karen Aubrey

SUBSCRIBED AND SWORN to before me this 20th day of March, 1990.

Notary Public

My Commission Expires:

7-6-91

CACARDO. 9890 & 9891

when additional services are desired, and complete items page on the everse side. Failure to do this will prevent this in receipt fee will provide you the name of the person delivered fees the following services are available. Consult postmaster service(s) requested. Service(s) requested. (Extra charge)	4. Article Number P 572 124 932		₩ ##	Always obtain signature of addressee or agent and DATE DELIVERED.	8. Addressee's Address (ONLY if requested and fee paid)		12-865 DOMESTIC RETURN RECEIPT	:	services are desired, and complete items are side. Failure to do this will prevent this provide you the name of the person delivered sted. Stevices are available. Consult postmaster sted. ddress. 2. Restricted Delivery	(Extra charge)		Type of Service:		Always obtain signature of addressee or agent and DATE DELIVERED.	8. Addressee's Address (ONLY if requested and fee paid)		-865 DOMESTIC RETURN RECEIPT
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when additional services are desired, and complete items	everse side. Failure to do this will prevent this will provide you the name of the person delivered wing services are available. Consult postmaster quested. s address. 2. ☐ Restricted Deliver y	4. Article Number	_	Type of Service:	Registered Insured		Always obtain signature of addressee	Addressee's Address (ONLY if requested and fee paid)	. S.		1988-212-885 DOMESTIC RETURN RECEIP		2 when additional services are desired, and complete items Space on the reverse side. Failure to do this will prevent this um receipt fee will provide you the name of the person delivered	ing services are evaliable. Consuit postmaster lested. address. 2. (Extra charge)	S 72	Type of Service:		Express Mail for Merchandise	Always potein agnature of addressee or agent and DATE DELIVERED.	8. Addresses's Address (ONLY if requested and fee paid)		1	12-865 DOMESTIC RETURN RECEIPT
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SENDER: Complete Items I and Z When additional 3 and 4. Shace on the rave	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 boxies for additional service(s) requested. 1. Solve to whom delivered date, and addressee's address. 2. Restricted Delivery (Extra charge)	3. Article Addressed to:	T. Calder Ezzell	.0. Box 10	Roswell, NM 88201	7 40 7 40 40 7 7 12 1 2 1	CI CI CI	Signature – Address	Signature - Agent	Date of Delivery	Form 3811, Mar. 1988 * U.S.Q.P.O. 1988-212-865	ER: Complete items 1 and		iess and check boxies) for additional service(s) reques 公司 Show to whom delivered, date, and addressee's ac (Extra charge)	Ardele Addressed to: Liberty National Bank	1	LOVINGTON, NM 88260 Attn: Mr. Mike Abbott	(KA-Bird Creek NE/4SE/4	72	March Wiechte	Signature — Agent	Date of Delivery $\mathcal{S} - \mathcal{A} \cdot \mathcal{S} O$	PS Form 3811 , Mar. 1988 * U.S.G.P.O. 1986-212-865

