

CAMPBELL & BLACK, P.A.

LAWYERS

JACK M. CAMPBELL
BRUCE D. BLACK
MICHAEL B. CAMPBELL
WILLIAM F. CARR
BRADFORD C. BERGE
J. SCOTT HALL
PETER N. IVES
JOHN H. BEMIS
MARTE D. LIGHTSTONE

GUADALUPE PLACE
SUITE 1 - 110 NORTH GUADALUPE
POST OFFICE BOX 2208
SANTA FE, NEW MEXICO 87504-2208
TELEPHONE: (505) 988-4421
TELECOPIER: (505) 983-6043

May 11, 1987

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

John L. Cox
400 West Wall Street
Midland, Texas 79701

Attention: John L. Cox

BEFORE THE OIL CONSERVATION COMMISSION Santa Fe, New Mexico	
Case No. <u>9143</u>	Exhibit No. <u>5</u>
Submitted by <u>AMERIND</u>	
Hearing Date <u>JULY 16, 1987</u>	

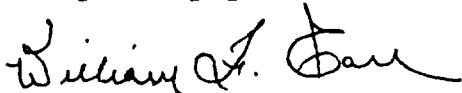
Re: Application of Amerind Oil Co. for an
Unorthodox Well Location,
Lea County, New Mexico.

Dear Sir:

This letter is to advise you that Amerind Oil Co. has filed an application with the New Mexico Oil Conservation Division seeking approval of an unorthodox well location for a well to be drilled at a location 330 feet from the South line and 1980 feet from the West Line of Section 33, Township 16 South, Range 37 East, N.M.P.M., Lea County, New Mexico. This well will be drilled in the Shipp Strawn Field, and the E/2 SW/4 of said Section 33 will be dedicated to the well.

This application has been set for hearing before a Division Examiner on June 3, 1987. You are not required to attend this hearing, but as an offsetting interest owner, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

Very truly yours,



WILLIAM F. CARR
ATTORNEY FOR AMERIND OIL CO.

WFC/ab

● **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.

3. Article Addressed to:

*John L. Cox
400 West Wall Street
Midland, Texas 79701*

4. Article Number

P 456 360 109

Type of Service:

☒ Registered
☒ Certified
☐ Insured
☐ Express Mail
☐ COD

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

5-13-87

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 456 360 109
RECEIPT FOR CERTIFIED MAIL

NO CANCELS ARE PROVIDED FOR INTERNATIONAL MAIL

Postage

*John L. Cox
400 W Wall Street
Midland, Texas 79701*

Postage *.22*

Certified Fee *.75*

Special Delivery Fee

Return Receipt Fee

Postage Receipt Showing

to whom and Date Delivered

Postage Receipt Showing

to whom and Date Delivered

TOTAL Postage and Fees *1.67*

Postmark or Date

5/11/87

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TELEPHONE: (505) 988-4421
TELECOPIER: (505) 983-6043

May 11, 1987

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mobil Producing Texas and New Mexico, Inc.
Post Office Box 633
Midland, Texas 79702

Attention: Kent Johnston

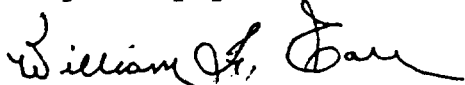
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Very truly yours,



WILLIAM F. CARR
ATTORNEY FOR AMERIND OIL CO.

WFC/ab

P 456 360 110 RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED—
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to <i>Mobile Producing Tax & N.M.</i>	
Street and No. <i>P. O. Box 633</i>	
P.O., State and ZIP Code <i>Midland, Tex. 79702</i>	
Postage	\$ <i>.22</i>
Certified Fee	<i>.75</i>
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom and Date Delivered	<i>.70</i>
Return Receipt Showing to Whom Date and Address of Delivery	
TOTAL Postage and Fees	\$ <i>1.67</i>
Postmark & Date <i>5/11/87</i>	

PS Form 3811, Feb. 1986

<p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address.</p> <p>2. <input type="checkbox"/> Restricted Delivery.</p>		<p>4. Article Number <i>P 456 360 110</i></p> <p>Type of Service: <input checked="" type="checkbox"/> Registered <input type="checkbox"/> Certified <input type="checkbox"/> Insured <input type="checkbox"/> Express Mail <input type="checkbox"/> COD</p>	
<p>3. Article Addressed to: <i>Mobile Prod. Tax & N.M., Inc.</i> <i>P. O. Box 633</i> <i>Midland, Texas 79702</i> <i>Attn: Rust Jordan</i></p>		<p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>	
<p>5. Signature — Addressee <i>X</i></p>		<p>8. Addressee's Address (ONLY if requested and fee paid)</p>	
<p>6. Signature — Agent <i>X</i> <i>Stacy L. L. L.</i></p>			
<p>7. Date of Delivery <i>5-13-87</i> <i>W.A.</i></p>			

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

CAMPBELL & BLACK, P.A.

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SANTA FE, NEW MEXICO 87504-2208
TELEPHONE: (505) 988-4421
TELECOPIER: (505) 983-6043

May 11, 1987

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Heritage Resources
Post Office Box 727
Davis, Oklahoma 73030

Attention: Mr. Brian Healy

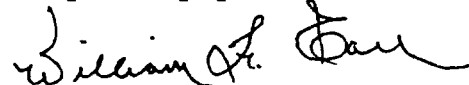
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Very truly yours,



WILLIAM F. CARR
ATTORNEY FOR AMERIND OIL CO.

WFC/ab

P 456 360 111
 RECEIPT FOR CERTIFIED MAIL

U.S. POSTAL SERVICE
 WASHINGTON, D.C. 20540

To: <u>Heritage Resources</u>	
Street and No. <u>P.O. Box 727</u>	
City, State and Zip Code <u>Davis, CA. 95603</u>	
Weight <u>22</u>	
Declared Value <u>75</u>	
Insurance Charge <u>70</u>	
Postage and Fees <u>1.67</u>	
Postmaster's Office	

5/11/87

<p>● 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.</p> <p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. 2. <input type="checkbox"/> Restricted Delivery.</p>	
<p>3. Article Addressed to:</p> <p><u>Heritage Resources</u> <u>P.O. Box 727</u> <u>Davis, California 95603</u> <u>Attn: Mr. Tim Neely</u></p>	<p>4. Article Number <u>P 456 360 111</u></p> <p>Type of Service: <input checked="" type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD</p> <p>Always obtain signature of addressee or agent and DATE DELIVERED.</p>
<p>5. Signature - Addressee <u>X</u> <u>[Signature]</u></p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature - Agent <u>X</u></p>	
<p>7. Date of Delivery <u>MAY 13 1987</u></p>	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

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May 11, 1987

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Tipperary Oil & Gas Corporation
511 West Ohio Street
6th Floor
Midland, Texas 79701

Attention: Mark S. Martin


Re: Application of Amerind Oil Co. for an
Unorthodox Well Location,
Lea County, New Mexico.

Dear Sirs:

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WFC/ab

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3. Article Addressed to:

4. Article Number

Type of Service:

☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail

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5. Signature — Addressee

6. Signature — Agent

7. Date of Delivery

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

P 456 360 108

Tipperary Oil & Gas Corp.
511 W. Ohio St., 6th Floor
Midland, Texas 79701

.22

.75

.70

1.67

5/11/87

CAMPBELL & BLACK, P.A.
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MICHAEL B. CAMPBELL
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SUITE 1 - 110 NORTH GUADALUPE
POST OFFICE BOX 2208
SANTA FE, NEW MEXICO 87504-2208
TELEPHONE: (505) 988-4421
TELECOPIER: (505) 983-6043

May 11, 1987

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Pennzoil Company
Post Office Box 2967
Houston, Texas 77252-2967

Attention: Lonnie Whitfield

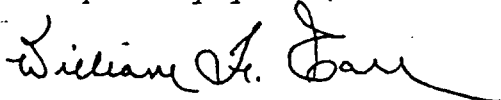
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3. Article Addressed to:		4. Article Number	
Pennzoil Company P.O. Box 2967 Houston, Texas 77052-2967 Attn: Laurie Whitfield		P 456 360 107	
5. Signature — Addressee		Type of Service:	
<input checked="" type="checkbox"/> X		<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> COD	
6. Signature — Agent		Always obtain signature of addressee or agent and DATE DELIVERED.	
<input checked="" type="checkbox"/> X		8. Addressee's Address (ONLY if requested and fee paid)	
7. Date of Delivery			
MAY 15 1987			

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

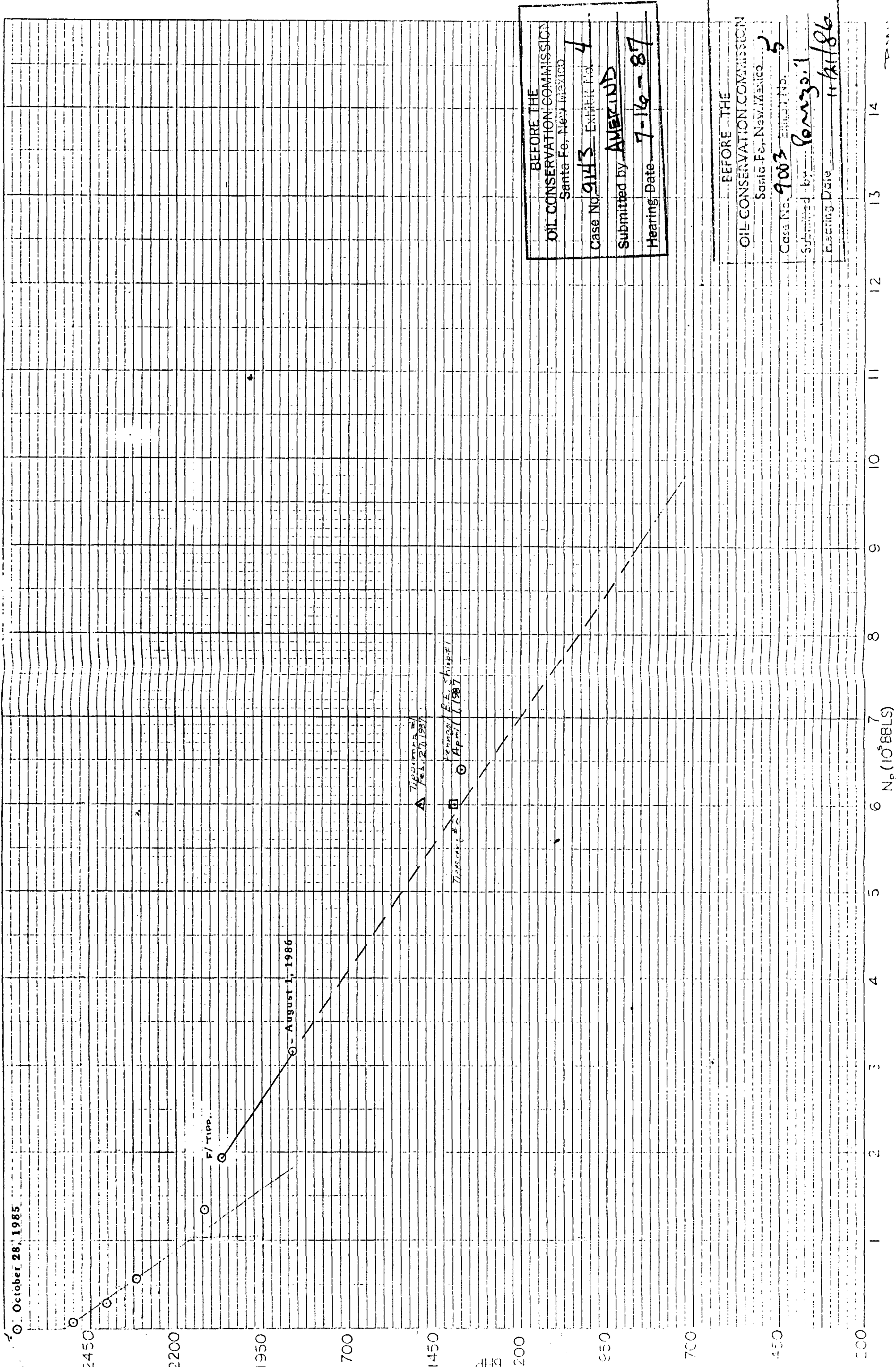
P 456 360 107
RECEIPT FOR CERTIFIED MAIL

SENT TO	
Pennzoil Company	
P.O. Box 2967	
Houston, Texas 77052-2967	
Postage	.22
Certified Fee	.75
Delivery Service Fee	
Registered Mail Fee	
Insurance (Amount and Date Delivered)	70
TOTAL Postage and Fees	1.67
Postmark or Date	

5/11/87

BE SHIPP NO. 1 RESERVOIR

BHP VS. N_p



BEFORE THE
OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

Case No. 9143 Exhibit No. 4

Submitted by AMERIND

Hearing Date 7-16-87

BEFORE THE
OIL CONSERVATION COMMISSION
Santa Fe, New Mexico

Case No. 9003 Exhibit No. 5

Submitted by Permco, Inc.

Hearing Date 11-11-86