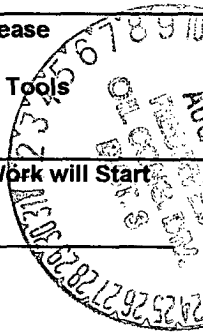


UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

APPLICATION FOR PERMIT TO DRILL, DEEPEN, OR PLUG BACK

2005 JUL 14 PM 2 17  
RECEIVED  
070 FARMINGTON NM

1a. Type of Work DRILL	5. Lease Number NMSF-078509 Unit Reporting Number	
1b. Type of Well GAS	6. If Indian, All. or Tribe	
2. Operator <b>BURLINGTON</b> RESOURCES Oil & Gas Company	7. Unit Agreement Name San Juan 32-9 Unit	
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700	8. Farm or Lease Name 9. Well Number #253S	
4. Location of Well Unit C (NENW), 1045' FNL, 1650' FWL  Latitude 36° 55.8710'N Longitude 107° 48.3500'W	10. Field, Pool, Wildcat Basin Fruitland Coal  11. Sec., Twn, Rge, Mer. (NMPM) C Sec. 5, T31N, R09W  API # 30-045- 33229	
14. Distance in Miles from Nearest Town 15 miles to Aztec, NM	12. County San Juan	13. State NM
15. Distance from Proposed Location to Nearest Property or Lease Line 1045'	17. Acres Assigned to Well 313.85 W/2	
16. Acres in Lease	18. Distance from Proposed Location to Nearest Well, Drig, Compl, or Applied for on this Lease 560' - San Juan 32-9 Unit #23A	
19. Proposed Depth <del>3754'</del> 3670'	20. Rotary or Cable Tools Rotary	
21. Elevations (DF, FT, GR, Etc.) 6819' GL	22. Approx. Date Work will Start	
23. Proposed Casing and Cementing Program See Operations Plan attached		
24. Authorized by: <u>Amanda Sandoval</u> Regulatory Compliance Assistant II	7-14-05 Date	

PERMIT NO.

APPROVAL DATE

APPROVED BY

TITLE

DATE

Archaeological Report attached

Threatened and Endangered Species Report attached

NOTE: This format is issued in lieu of U.S. BLM Form 3160-3

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or presentations as to any matter within its jurisdiction.

This action is subject to technical and procedural review pursuant to 43 CFR 3165.3 and appeal pursuant to 43 CFR 3165.4

DRILLING OPERATIONS AUTHORIZED ARE  
SUBJECT TO COMPLIANCE WITH ATTACHED  
"GENERAL REQUIREMENTS".

NMCCD

District I  
PO Box 1980, Hobbs, NM 88241-1980

District II  
PO Drawer DD, Artesia, NM 88211-0719

District III  
1000 Rio Brazos Rd., Aztec, NM 87410

District IV  
PO Box 2088, Santa Fe, NM 87504-2088

State of New Mexico  
Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION  
PO Box 2088  
Santa Fe, NM 87504-2088

Form C-102  
Revised February 21, 1994

Instructions on back  
Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number 30-045- 33229	*Pool Code 71629	*Pool Name Basin Fruitland Coal
*Property Code 7473	*Property Name SAN JUAN 32-9 UNIT	*Well Number 2535
*GRID No. 14538	*Operator Name BURLINGTON RESOURCES OIL & GAS COMPANY, LP	*Elevation 6819'

<sup>10</sup> Surface Location

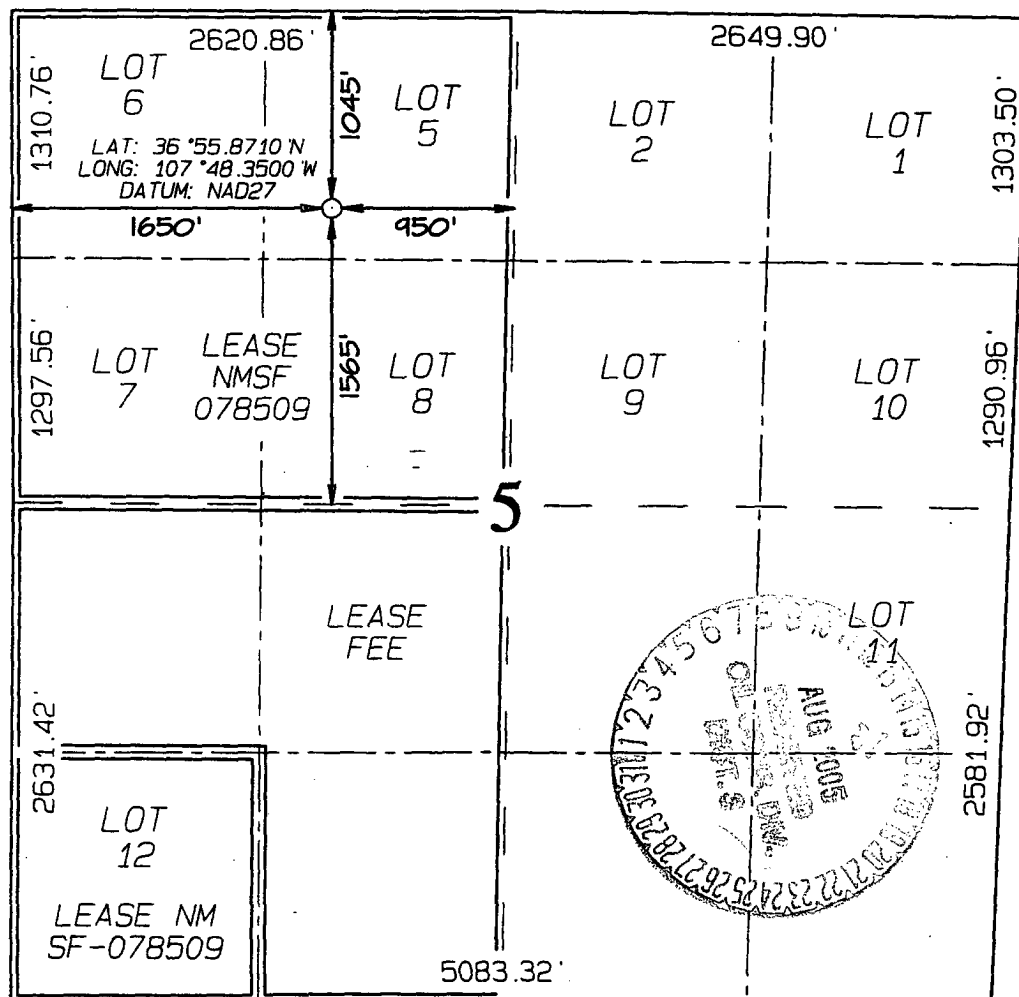
UL or lot no. C	Section 5	Township 31N	Range 9W	Lot Idn	Feet from the 1045	North/South line NORTH	Feet from the 1650	East/West line WEST	County SAN JUAN
--------------------	--------------	-----------------	-------------	---------	-----------------------	---------------------------	-----------------------	------------------------	--------------------

<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
---------------	---------	----------	-------	---------	---------------	------------------	---------------	----------------	--------

<sup>12</sup> Dedicated Acres 313.85 W/2	<sup>13</sup> Joint or Infill	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
---	-------------------------------	----------------------------------	-------------------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



<sup>17</sup> OPERATOR CERTIFICATION

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief

*Amanda Sandoval*  
Signature

Amanda Sandoval  
Printed Name  
Regulatory Assistant II

Title  
4-18-05

Date

<sup>18</sup> SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Date of Survey: MARCH 22, 2005

Signature and Seal of Professional Surveyor



*JASON C. EDWARDS*  
Certificate Number 15269

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

## Sundry Notices and Reports on Wells

2005 AUG 10 PM 2 05

1. **Type of Well**  
GAS

2. **Name of Operator**  
**BURLINGTON**  
RESOURCES OIL & GAS COMPANY LP

3. **Address & Phone No. of Operator**

PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. **Location of Well, Footage, Sec., T, R, M**

Unit C (NENW), 1045' FNL &amp; 1650' FWL, Section 5, T31N, R9W, NMPM

5. **Lease Number**  
NMSF-078509  
6. **If Indian, All. or**  
**Tribe Name**  
7. **Unit Agreement Name**

San Juan 32-9 Unit

8. **Well Name & Number**

San Juan 32-9 Unit 253S  
9. **API Well No.**

30-045- 33229  
10. **Field and Pool**  
Basin Fruitland Coal

11. **County and State**  
San Juan Co., NM

**12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA**

Type of Submission	Type of Action
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment <input checked="" type="checkbox"/> Change of Plans <input type="checkbox"/> Other
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion <input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging <input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair <input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing <input type="checkbox"/> Conversion to Injection

**13. Describe Proposed or Completed Operations**

The subject well's sump was denied and therefore the drilling Operations Plan needs to be revised. See the new Operational Plan Attached. Note that new TD is 3670'.

**14. I hereby certify that the foregoing is true and correct.**

Signed Amanda Sandoval Amanda Sandoval Title Regulatory Assistant II Date 8/10/05

(This space for Federal or State Office use)

APPROVED BY Robert Adams Title Acting AFM Date 8/12/05

CONDITION OF APPROVAL, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOCD

Office

Energy, Minerals and Natural Resources

May 27, 2004

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

**OIL CONSERVATION DIVISION**

1220 South St. Francis Dr.

Santa Fe, NM 87505

WELL API NO.

**30-045-**

5. Indicate Type of Lease

STATE ☐FEE ☐

6. State Oil &amp; Gas Lease No.

**NMSF-078509**

7. Lease Name or Unit Agreement Name

**San Juan 32-9 Unit**

8. Well Number

**253S**

9. OGRID Number

**14538**

10. Pool name or Wildcat

**Basin Fruitland Coal**

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A  
 DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH  
 PROPOSALS.)

1. Type of Well:

Oil Well ☐Gas Well ☒

Other

2. Name of Operator

**BURLINGTON RESOURCES OIL & GAS COMPANY LP**

3. Address of Operator

**3401 E. 30TH STREET, FARMINGTON, NM 87402**

4. Well Location

Unit Letter **C** : **1045** feet from the **North** line and **1650** feet from the **West** lineSection **5** Township **31N** Range **09W** NMPM County **San Juan**

11. Elevation (Show whether DR, RKB, RT, GR, etc.)

**6819' GR**

Pit or Below-grade Tank Application

☒ or Closure ☐

Pit type

**New Drill**

Depth to Groundwater

**>100'**

Distance from nearest fresh water well

**>1000'**

Distance from nearest surface water

**<1000'**

Pit Liner Thickness:

mil

Below-Grade Tank:

Volume

bbls;

Construction Material

**12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data****NOTICE OF INTENTION TO:**PERFORM REMEDIAL WORK ☐TEMPORARILY ABANDON ☐PULL OR ALTER CASING ☐PLUG AND ABANDON ☐CHANGE PLANS ☐MULTIPLE COMPL ☐**SUBSEQUENT REPORT OF:**REMEDIAL WORK ☐COMMENCE DRILLING OPNS. ☐CASING/CEMENT JOB ☐ALTERING CASING ☐P AND A ☐

OTHER:

**New Drill Pit**☒

OTHER:

☐

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

Burlington Resources proposes to construct a new drilling pit and an associated vent/flare pit. Based on Burlington's interpretation of the Ecosphere's risk ranking criteria, the new drilling pit and vent/flare pit will be an unlined pit as detailed in Burlington's Revised Drilling / Workover Pit Construction / Operation Procedures dated November 11, 2004 on file at the NMOCD office. A portion of the vent/flare pit will be designed to manage fluids, and that portion will be unlined, as per the risk ranking criteria. Burlington Resources anticipates closing these pits according to the Drilling / Workover Pit Closure Procedure dated August 2, 2004 on file at the NMOCD office

I hereby certify that the information above is true and complete to the best of my knowledge and belief. I further certify that any pit or below-grade tank has been/will be constructed or closed according to NMOCD guidelines ☐, a general permit ☒ or an (attached) alternative OCD-approved plan ☐.

SIGNATURE

*Amanda Sandoval*

TITLE

**Regulatory Specialist**

DATE

**4/18/2005**

Type or print name

**Amanda Sandoval**

E-mail address:

**asandoval@br-inc.com**

Telephone No.

**505-326-9700****For State Use Only**

APPROVED BY

*[Signature]*

TITLE

**DEPUTY OIL & GAS INSPECTOR, DIST. 8**

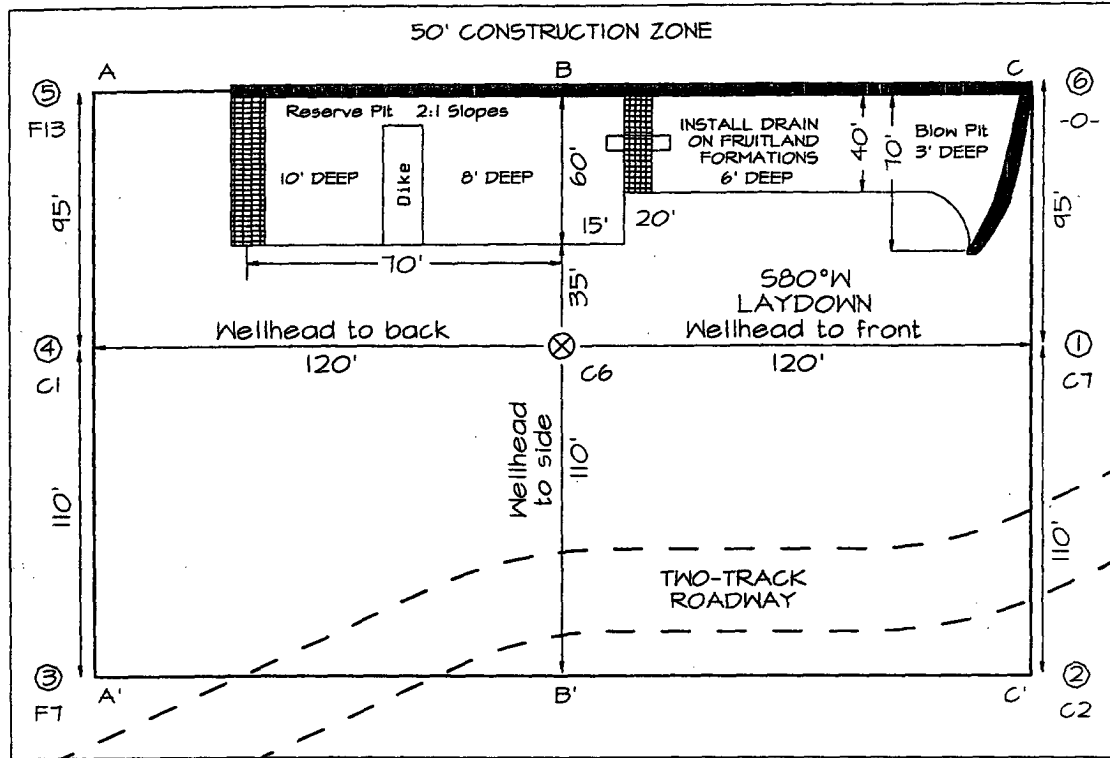
DATE

Conditions of Approval (if any):

**AUG 15 2005**

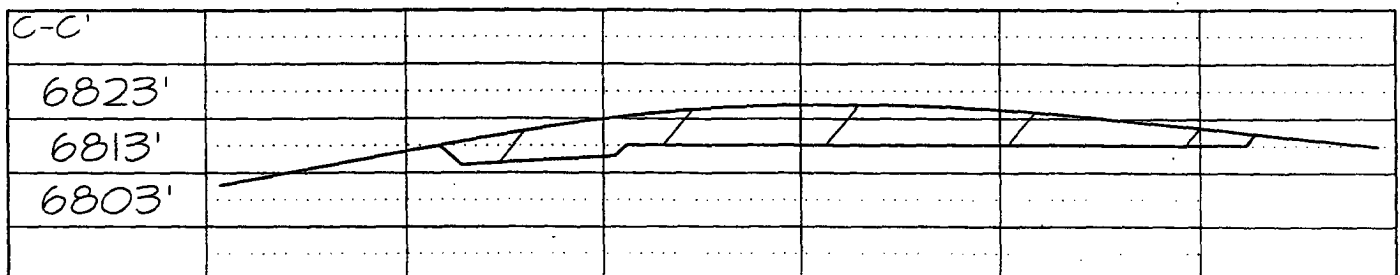
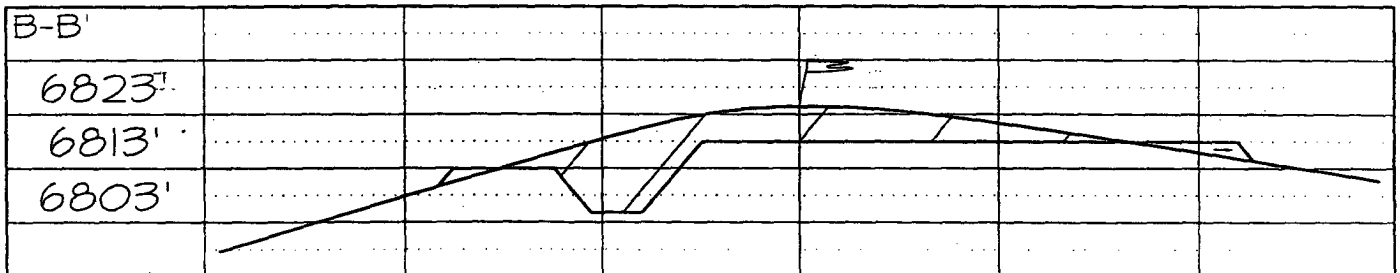
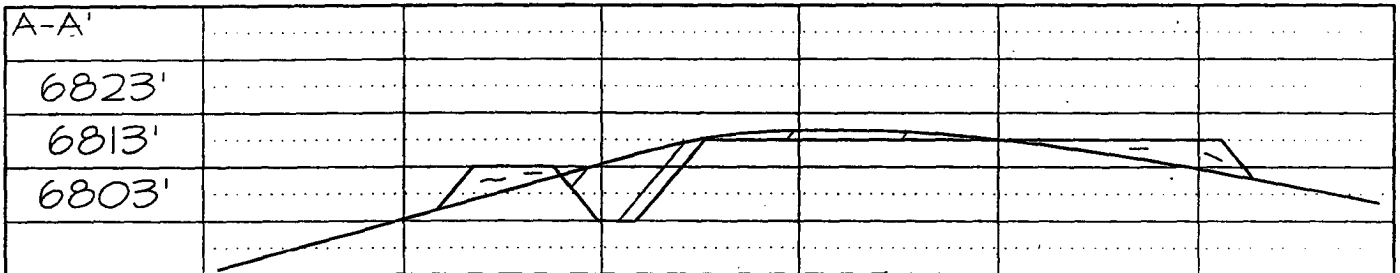
**BURLINGTON RESOURCES OIL & GAS COMPANY SAN JUAN 32-9 UNIT #253S**  
**1045' FNL & 1650' FWL, SECTION 5, T31N, R9W, NMPM, SAN JUAN COUNTY, NM**  
**GROUND ELEVATION: 6819' DATE: MARCH 22, 2005**

**LATITUDE: 36°55'52"**  
**LONGITUDE: 107°48'21"**  
 DATUM: NAD1927



**205' X 240' 305' X 340' = 2.38 ACRES**

Reserve Pit Dike: to be 8' above Deep side (overflow - 3' wide and 1' above shallow side).  
 Blow Pit: overflow pipe halfway between top and bottom and to extend over plastic liner and into blow pit.



Note: Contractor should call One-Call for location of any marked or unmarked buried pipelines or cables on well pad and/or access road at least two (2) working days prior to construction

## OPERATIONS PLAN

**Well Name:** San Juan 32-9 Unit #253S

**Location:** 1045' FNL, 1650' FWL, Sec 5, T-31-N, R-9-W  
San Juan County, NM

Latitude 36° 55.8710'N, Longitude 107° 48.3500'W

**Formation:** Basin Fruitland Coal

**Total Depth:** 3670'

Burlington Resources is requesting a sump on this well.

**Logging Program:** See San Juan 32-9 Unit Wells Master Operations Plan

**Mud Program:** See San Juan 32-9 Unit Wells Master Operations Plan

**Casing Program (as listed, the equivalent, or better):**

Hole Size	Depth Interval	Csg	Wt.	Grade	Cement
12 1/4	0' - 120'	9.625"	32.3#	H-40	131 cu.ft
8 3/4	0' - 3387'	7"	20.0#	J-55	767 cu.ft
6 1/4	3367'- 3670'	5 1/2"	15.5#	J-55	uncemented

**Tubing Program:** See San Juan 32-9 Unit Wells Master Operations Plan

- \* The Fruitland Coal formation will be completed.
- \* The west half of Section 5 is dedicated to the Fruitland Coal formation in this well.
- \* Gas is dedicated.

  
Drilling Engineer

8/10/05  
Date

## OPERATIONS PLAN

**Well Name:** San Juan 32-9 Unit #253S

**Location:** 1045' FNL, 1650' FWL, Sec 5, T-31-N, R-9-W  
San Juan County, NM

Latitude 36° 55.8710'N, Longitude 107° 48.3500'W

**Formation:** Basin Fruitland Coal

**Total Depth:** 3754'

**Burlington Resources is requesting a sump on this well.**

**Logging Program:** See San Juan 32-9 Unit Wells Master Operations Plan

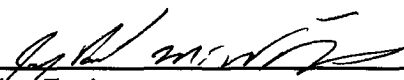
**Mud Program:** See San Juan 32-9 Unit Wells Master Operations Plan

**Casing Program (as listed, the equivalent, or better):**

Hole Size	Depth Interval	Csg	Wt.	Grade	Cement	
12 1/4	0' - 120	9.625"	32.3#	H-40	131	cu.ft
8 3/4	0' - 3387	7"	20.0#	J-55	767	cu.ft
6 1/4	3367'- 3754	5 1/2"	15.5#	J-55	uncemented	

**Tubing Program:** See San Juan 32-9 Unit Wells Master Operations Plan

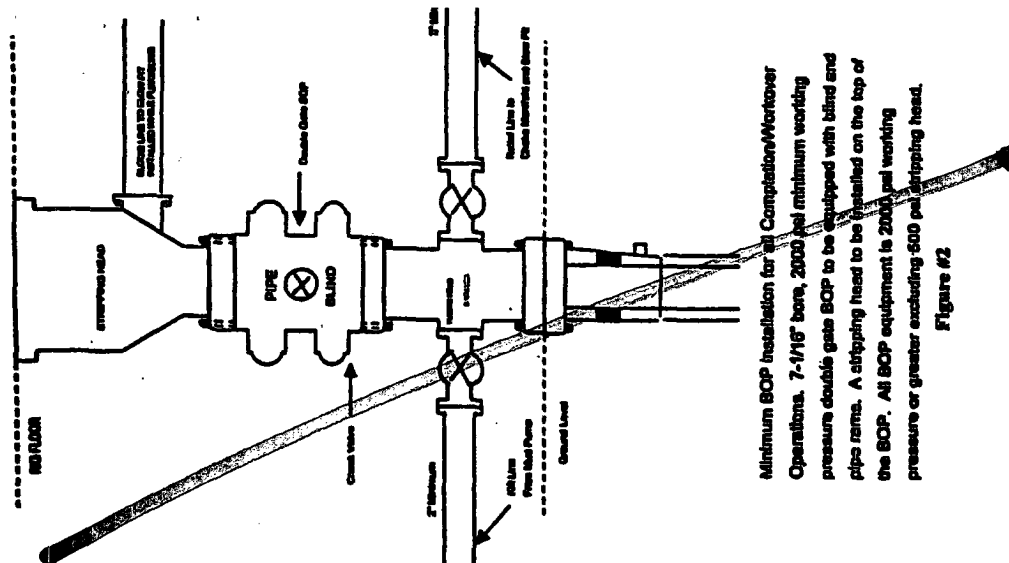
- \* The Fruitland Coal formation will be completed.
- \* The west half of Section 5 is dedicated to the Fruitland Coal formation in this well.
- \* Gas is dedicated.

  
\_\_\_\_\_  
Drilling Engineer

4/27/05  
\_\_\_\_\_  
Date

# BURLINGTON RESOURCES

Completion/Workover Rig  
BOP Configuration  
2,000 psi System



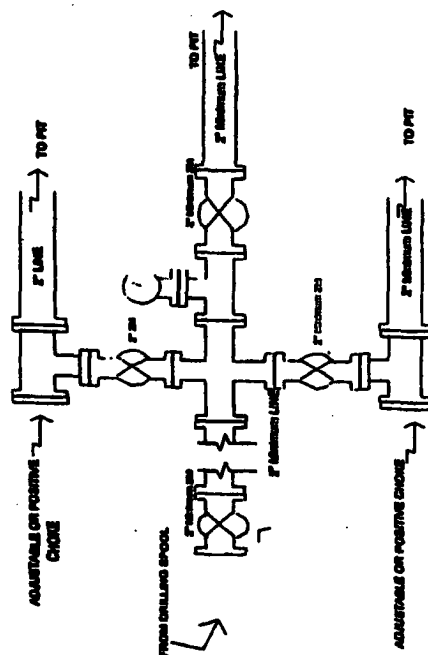
Minimum BOP installation for all Completion/Workover Operations. 7-1/16" bore, 2000 psi minimum working pressure double gate BOP to be equipped with blind and pipe rams. A stopping head to be installed on the top of the BOP. All BOP equipment is 2000 psi working pressure or greater excluding 800 psi stripping head.

Figure #2

4-20-01

# BURLINGTON RESOURCES

Drilling Rig  
Choke Manifold Configuration  
2000 psi System



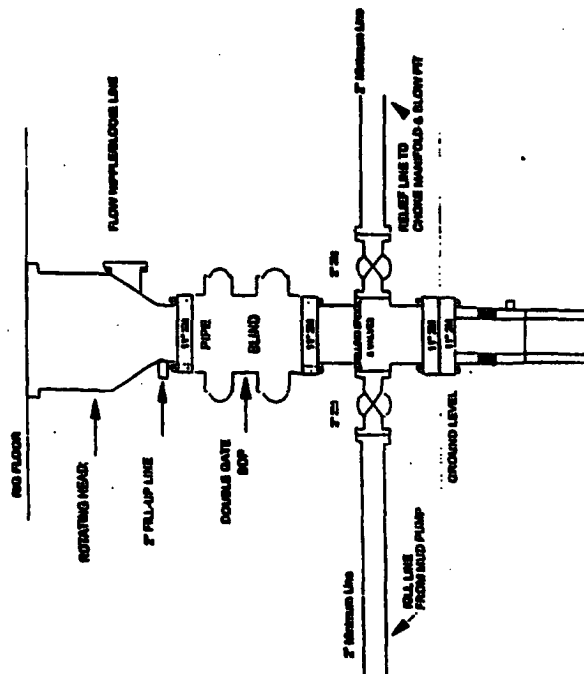
Choke manifold installation from Surface Casing Point to Total Depth. 2,000psi working pressure equipment with two chokes.

Figure #3

4-20-01

# Burlington Resources

Drilling Rig  
2000 psi System



BOP installation from Surface Casing Point to Total Depth. 11" Bore 10" Nominal, 2000 psi working pressure double gate BOP to be equipped with blind rams and pipe rams. A 1000 psi rotating head on top of ram prevention. All BOP equipment is 2,000 psi working pressure.

Figure #1



**BURLINGTON**  
**RESOURCES**  
San Juan Division

July 25, 2005

(Certified Mail - Return Receipt Requested)

Re: San Juan 32-9 Unit #2535  
Basin Fruitland Coal  
1045' FNL & 1650' FWL, Sec. 5, T31N, R9W  
San Juan County, NM

To the Affected Persons:

Burlington Resources Oil & Gas Company LP is submitted the enclosed Application for Permit to Drill to the appropriate regulatory agency(s) for approval. This well is located inside the High Productivity Area of the Basin-Fruitland Coal Pool as indicated on the attached plat. Notice is being made pursuant to New Mexico Oil Conservation Commission Order R-8768-F dated July 17, 2003.

The affected parties have twenty (20) days form receipt of this notice in which to file with the District Office of the New Mexico Oil Conservation Division written objection to the proposed Application for Permit to Drill.

Sincerely,



Patsy Clugston  
Sr. Regulatory Specialist



# **BURLINGTON**

---

## **RESOURCES**

San Juan Division

Working Interest Owners - SJ 32-9 FRT Coal PA, PA Number 7411238000

Williams

TH McElvain Oil & Gas LTD

Phillips - San Juan Partners

JRP San Juan LP

John S. Brown Jr.

Four Star Oil & Gas CO LP

Devon Energy Production CO LP

ConocoPhillips Company

Burlington Resources O&G CO LP

Burlington RESO O&G (SJBT)

BP American Production Company

Bolack Minerals CO

2. Article Number



7110 6605 9590 0011 7903

1. Article Addressed to:

BOLACK MINERALS CO  
ATTN TOMMY BOLACK  
3901 BLOOMFIELD HWY  
RT 3 BOX 47  
FARMINGTON, NM 87401

5/25/2005 12:56 PM

Code: SJ32-9 UNIT FTC - HPA (6) WELLS

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X: Theresa Kady

☐ Agent☐ Addressee

B. Received by (Printed Name)

Theresa Kady

C. Date of Delivery

07-26-05

D. Is delivery address different from item 1? ☐ Yes

If YES enter delivery address below:

☐ No

3. Service Type



Certified

4. Restricted Delivery? (Extra Fee)



Yes

PS Form 3811

Domestic Return Receipt

2. Article Number



7110 6605 9590 0011 7927

1. Article Addressed to:

CONOCOPHILLIPS COMPANY  
ATTN CHIEF LANDMAN SAN JUAN/ROCKIES  
PO BOX 2197

HOUSTON, TX 77252-2197

5/25/2005 12:56 PM

Code: SJ32-9 UNIT FTC - HPA (6) WELLS

A. Signature

B. Received by (Printed Name)

JUL 29 2005

☐ Addressee

C. Date of Delivery

D. Is delivery address different from item 1? ☐ Yes

If YES enter delivery address below:

☐ No

3. Service Type



Certified

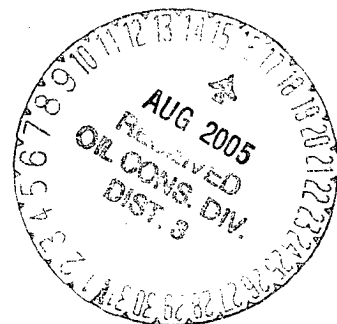
4. Restricted Delivery? (Extra Fee)




Yes

PS Form 3811


Domestic Return Receipt



2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9550 0011 7934		A. Signature X <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to:		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
DEVON ENERGY PRODUCTION CO LP ATTN LAND DEPT 20 N BROADWAY STE 1500  OKLAHOMA CITY, OK 73102  5/25/2005 12:56 PM		3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
Code: SJ32-9 UNIT FTC - HPA (6) WELLS			

PS Form 3811


Domestic Return Receipt

2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9550 0011 7941		A. Signature X <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		B. Received by (Printed Name)	C. Date of Delivery
1. Article Addressed to:		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
FOUR STAR OIL & GAS COMPANY ATTN BARBARA NELMS PO BOX 36366  HOUSTON, TX 77236  5/25/2005 12:56 PM		3. Service Type <input checked="" type="checkbox"/> Certified 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
Code: SJ32-9 UNIT FTC - HPA (6) WELLS			

PS Form 3811


Domestic Return Receipt



2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9590 0011 7958		A. Signature X <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		B. Received by (Printed Name) <i>[Signature]</i>	C. Date of Delivery 7/28/05
1. Article Addressed to:  JOHN S BROWN JR 7301 BURNET RD STE 102-122  AUSTIN, TX 78757-2248  5/25/2005 12:56 PM Code: SJ32-9 UNIT FTC - HPA (6) WELLS		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

PS Form 3811


Domestic Return Receipt

2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9590 0011 7972		A. Signature X <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		B. Received by (Printed Name) <i>[Signature]</i>	C. Date of Delivery JUL 29 2005
1. Article Addressed to:  PHILLIPS-SAN JUAN PARTNERS C/O CONOCOPHILLIPS ATTN CHIEF LANDMAN SAN JUAN/ROCKIES PO BOX 2197 HOUSTON, TX 77252-2197  5/25/2005 12:56 PM Code: SJ32-9 UNIT FTC - HPA (6) WELLS		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

PS Form 3811


Domestic Return Receipt



2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9540 0011 7989		A. Signature X <i>Marta Nelson</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		B. Received by (Printed Name)	C. Date of Delivery JUL 27 2006
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified	
1. Article Addressed to:		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
T H MCELVAIN OIL & GAS LTD PARTNERSHIP 1050 17TH ST STE 1800  DENVER, CO 80265			
5/25/2005 12:56 PM Code: SJ32-9 UNIT FTC - HPA (6) WELLS			

PS Form 3811


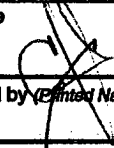
Domestic Return Receipt

2. Article Number		COMPLETE THIS SECTION ON DELIVERY	
 7110 6605 9540 0011 7996		A. Signature X <i>STANLEY ALLEN</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		B. Received by (Printed Name)	C. Date of Delivery JUL 28 2005
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified	
1. Article Addressed to:		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
WILLIAMS PRODUCTION COMPANY ONE WILLIAMS CENTER PO BOX 3102 MS25-3  TULSA, OK 74101			
5/25/2005 12:56 PM Code: SJ32-9 UNIT FTC - HPA (6) WELLS			

PS Form 3811

Domestic Return Receipt





<p>2. Article Number</p> <div style="text-align: center;">   7110 6605 9590 0011 7910 </div> <p>1. Article Addressed to:</p> <p style="text-align: center;"> <b>BP AMERICA PRODUCTION COMPANY</b>  <b>ATTN JOHN LARSON</b>  <b>SAN JUAN BU</b>  <b>WEST LAKE 1 ROOM 19-158</b>  <b>501 WESTLAKE PARK BLVD</b>  <b>HOUSTON, TX 77079</b>  5/25/2005 12:56 PM </p>	<p style="text-align: center; font-size: small;">COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature  X  <input type="checkbox"/> Agent  <input type="checkbox"/> Addressee </p> <p>B. Received by (Printed Name) C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES enter delivery address below: <input checked="" type="checkbox"/> No </p> <p>3. Service Type <input checked="" type="checkbox"/> <b>Certified</b></p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
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Code: SJ32-9 UNIT FTC - HPA (6) WELLS

PS Form 3811

Domestic Return Receipt

<p>2. Article Number</p> <div style="text-align: center;">   7110 6605 9590 0011 7965 </div> <p>1. Article Addressed to:</p> <p style="text-align: center;"> <b>JRP SAN JUAN LP</b>  <b>ATTN JAMES M RAYMOND MGR</b>  <b>PO BOX 291445</b>    <b>KERRVILLE, TX 78029-1445</b>  5/25/2005 12:56 PM </p>	<p style="text-align: center; font-size: small;">COMPLETE THIS SECTION ON DELIVERY</p> <p>A. Signature  X  <input checked="" type="checkbox"/> Agent  <input type="checkbox"/> Addressee </p> <p>B. Received by (Printed Name) C. Date of Delivery  <b>EILEEN CARTER</b> </p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes  If YES enter delivery address below: <input checked="" type="checkbox"/> No </p> <p>3. Service Type <input checked="" type="checkbox"/> <b>Certified</b></p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
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