



**NEW MEXICO ENERGY, MINERALS
& NATURAL RESOURCES DEPARTMENT**

OIL CONSERVATION DIVISION
2040 South Pacheco Street
Santa Fe, New Mexico 87505
(505) 827-7131

November 10, 1999

Burlington Resources Oil & Gas
P.O. Box 4289
Farmington, New Mexico 87499

Attention: Ms. Peggy Bradfield

Re: DHC Applications
Tommy Bolack No. 1M
Lawson No. 1A
Grenier No. 4
Decker No. 4A

Dear Ms. Bradfield:

Please submit a notification list of interest owners for each of the above-described applications. I will process the applications, however, this list needs to be in the files. Thanks for your help.

Sincerely,

David Catanach
Engineer

Decker 4A

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MARY C MARTIN TRUSTEE
OF TRUST AGMT DATED 11-75
510 EAST 15TH ST
FARMINGTON, NM 87401

4a. Article Number
2 554 443 947

4b. Service Type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
10/19/99

5. Received By: (Print Name)
M. C. MARTIN

6. Signature: (Addressee or Agent)
M. C. Martin

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Decker 4A

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

W L MCCORMICK FAMILY LTD PTSHP
C/O SPEEREX LTD PTSHP
PO BOX 255
FARMINGTON, NM 87499

4a. Article Number
2 554 443 955

4b. Service Type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
10/19/99

5. Received By: (Print Name)
W L MCCORMICK

6. Signature: (Addressee or Agent)
W L McCormick

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

Deck 4A

Is your RETURN ADDRESS completed on the reverse side?

SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
3. Article Addressed to: ELIZABETH BEARD TANKSLEY PO BOX 720 ALPINE, TX 79831	4a. Article Number 2 554 643 939	Thank you for using Return Receipt Service.
	4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
	7. Date of Delivery OCT 20 1999	
5. Received By: (Print Name) Elizabeth Tanksley	8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) <i>Elizabeth Tanksley</i>		
PS Form 3811, December 1994		102595-98-B-0229 Domestic Return Receipt

First-Class Mail
Postage & F.
USPS
Permit No. G-

Deck 4A

Is your RETURN ADDRESS completed on the reverse side?

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3. Article Addressed to: WARDIE L HUBBARD MCCORMICK C/O SPEEREX LTD PARTNERSHIP PO BOX 255 FARMINGTON, NM 87499	4a. Article Number 2 554 643 939	Thank you for using Return Receipt Service.
	4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
	7. Date of Delivery OCT 19 1999	
5. Received By: (Print Name) W. R. Speer	8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) <i>W. R. Speer</i>		
PS Form 3811, December 1994		102595-98-B-0229 Domestic Return Receipt

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

in this box •

Decker 4A

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

ROSELYN MARTIN TRUSTEE
C/O FIRST NATL BANK
20TH ST BRANCH-ATTN DEVONA
501 E 20TH
FARMINGTON, NM 874990539

4a. Article Number
Z 554 663 957

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery 10-19-99

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X [Signature]

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-1

in this box •

Decker 4A

SENDER:

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

CHARLES H CULPEPPER TRUSTEE
U/I/A DTD 1/20/94
PO BOX 958
FARMINGTON, NM 874990958

4a. Article Number
Z 554 663 931

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)
CH Culpepper

6. Signature: (Addressee or Agent)
[Signature]

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

PS Form 3811, December 1994 Domestic Return Receipt

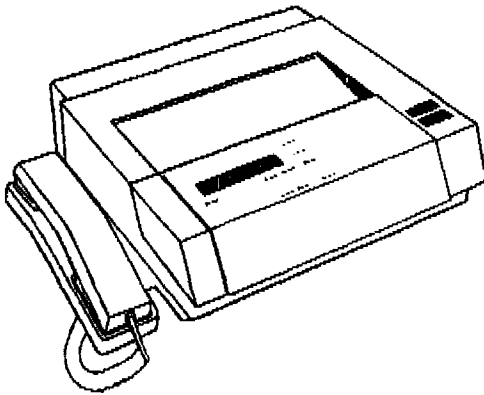
Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

DHC-2508

~~Burlington Resources Oil & Gas Company~~
San Juan Division IST/Telecom Department
3535 E. 30th Street
P. O. Box 4289
Farmington, NM 87499-4289

Deck 4A



TO: *David Catanach*
FROM: *Jeggy*
RE: *Notificacons*
CC:

FAX: 505-599-4046

DATE: *11/16/99*

PAGES:

827-1389

☐ Urgent ☐ For Review ☐ Please Comment ☐ Please Reply ☐ Please Recycle

*David - Sorry about that. I
thought she had
included them.*

Is your RETURN ADDRESS completed on the reverse side?

Deck 4A

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I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

LINDA PAYNE TRUSTEE
ELIZABETH WHITE FAMILY TRUST
P O BOX 780099
DALLAS, TX 753780099

4a. Article Number
7 554 1643 948

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
10-28-99

5. Received By: (Print Name)
LINDA PAYNE

6. Signature: (Addressee or Agent)
Linda Payne

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

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

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I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

DAVID MARTIN WOOLLEY & B WYNNE
WOOLLEY JR CO-TRUSTEES
DAVID MARTIN WOOLLEY TRUST
UNW/O LOTTIE PLUMMER WOOLLEY
PO BOX 42539
Washington, DC 20015-0539

4a. Article Number
7 554 1643 934

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
10-28-99

5. Received By: (Print Name)
Washington, DC 20015-0539

6. Signature: (Addressee or Agent)
X David Martin Woolley

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

PS Form 3811, December 1994 Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

RICHARD D HUGHES PERS REP
GLENN D HUGHES ESTATE
2321 CANDELARIA RD NW
ALBUQUERQUE, NM 82107

4a. Article Number

2 554 643 952

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

OCT 28 1999

5. Received By: (Print Name)

Richard D Hughes

6. Signature: (Addressee or Agent)

X Eugene Hughes

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

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

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PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Decker 4A

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

VIRGINIA WHITMIRE TRUST
C/O MERCANTILE TRUST CO N A
TRUST DEPARTMENT
PO BOX 1460
IOWA CITY, IA 522441460

4a. Article Number

2 554 643 956

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

OCT 21 1999

5. Received By: (Print Name)

Dr. Williams

6. Signature: (Addressee or Agent)

X Dr. Williams

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

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

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Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Class Mail
ge & Fees Paid
No. G-10

Decker 4A

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

PATRICIA ANN CLARK
PO BOX 699
FRUITA, CO 815210699

4a. Article Number
2 554 663 954

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
10-22-99

5. Received By: (Print Name)
PATRICIA A. CLARK

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

6. Signature: (Addressee or Agent)
Patricia A. Clark

PS Form 3811, December 1994 102595-96 8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

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Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Class Mail
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No. G-10

Decker 4A

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery
Consult postmaster for fee.

3. Article Addressed to:

MARY D GREGORY
P O BOX 1531
GRANTS PASS, OR 975280130

4a. Article Number
2 554 663 946

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
OCT 22 1999

5. Received By: (Print Name)
K D GREGORY

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

6. Signature: (Addressee or Agent)
X

PS Form 3811, December 1994 102595-96 8-0229 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

First-Class Mail
Postage & Fees Paid

Permit No. G-10

Deckler 4A

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- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JANE MANNING PITKIN
503 W DUARTE ROAD 6
ARCADIA, CA 91007

4a. Article Number

2 554 663 945

4b. Service Type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

10/22/99 MS

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *E. Parnes*

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

PS Form 3811, December 1994

102595-99-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

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Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

First-Class Mail
Postage & Fees Paid

ISPS
Permit No. G-10

X

Deckler 4A

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- 1. ☐ Addressee's Address
- 2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

DAVID ALLEN SMITH
C/O 1ST UNION NATL BANK ON
MARYLAND-ACCT #1040000367087
607 N FREDERICK AVE
GAITHERSBURG, MD 20879

4a. Article Number

2 554 663 935

4b. Service Type

- ☐ Registered ☒ Certified
- ☐ Express Mail ☐ Insured
- ☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

10/22/99

5. Received By: (Print Name)

NISHA RAJAM

6. Signature: (Addressee or Agent)

X *Nisha Rajam*

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

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Decker 4A

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

s box 8

Is your RETURN ADDRESS completed on the reverse side?

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2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

FIRST NATL BK IOWA CITY
TRUSTEE UTA DTD 5/20/65
VIRGINIA WHITMIRE TRUST
PO BOX 1460
IOWA CITY, IA 522441460

4a. Article Number

Z 554 643 937

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

OCT 21 1999

5. Received By: (Print Name)

Don Wm

6. Signature: (Addressee or Agent)

X *Don Williams*

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Decker 4A

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

1 this box 8

3

4289

Is your RETURN ADDRESS completed on the reverse side?

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I also wish to receive the following services (for an extra fee):

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2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

WINIFRED AMSDEN TRUSTEE
WINIFRED AMSDEN REVOCABLE TRST
1730 PONDEROSA
LOS ALAMOS, NM 87544

4a. Article Number

Z 554 643 932

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Winifred Amaden*

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

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

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First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

this box •

Decker 4A

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I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

CHARLES W AMSDEN
PO BOX 4871
YATAHEY, NM 873754671

4a. Article Number

2 554 643 936

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

11/14/1999

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

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JRCES

7499-4289

Decker 4A

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
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I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

WILLIAM A HALL
416 N BEHREND AVE
FARMINGTON, NM 87401

4a. Article Number

2 554 643 958

4b. Service Type

☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

11/14/1999

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

William A Hall

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

PS Form 3811, December 1994

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Decker 4A

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

R S CULPEPPER TRUSTEE
U/T/A DTD 7/3/85
5703 WOODLAND CT
FARMINGTON, NM 87402

4a. Article Number

Z 554 643 953

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

10-26

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

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Decker 4A

SENDER:

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- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

JANE K BEARD
4104 LOVERS LN
DALLAS, TX 75225

4a. Article Number

Z 554 643 940

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

10 26 99

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

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Decker 4A

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

B WYNNE WOOLLEY JR & DAVID
MARTIN CO-TRUSTEES
B WYNNE WOOLLEY JR TRUST U/W/O
PO BOX 3847
SUNRIVER, OR 97707

4a. Article Number
2 554 663 933

4b. Service Type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
10/25/99

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X *M. Woolley*

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

PS Form 3811, December 1994 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

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289

Decker 4A

SENDER:

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address

2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MICHAEL SCOTT LEA
3032 S OAK WAY
LAKEWOOD, CO 802272621

4a. Article Number
2 554 663 950

4b. Service Type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery
10/25/99

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X *M. Lea*

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

PS Form 3811, December 1994 Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Decker 4A

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

box

289

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Is your RETURN ADDRESS completed on the reverse side?

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MINERALS MANAGEMENT SERVICE
ROYALTY MANAGEMENT PROGRAM
PO BOX 5810
DENVER, CO 802175810

Denali Ventures, Inc.

4a. Article Number

7 554 663 949

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

5. Received By: (Print Name)

OCT 25 1999

6. Signature: (Addressee or Agent)

X Agent for MMS

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.

Decker 4A

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

this box

Is your RETURN ADDRESS completed on the reverse side?

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I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

W THOMAS BEARD III
P O BOX 668
ALPINE, TX 79830

4a. Article Number

7 554 663 960

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

10-20-99

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

BOX •

Deck 4A

Is your RETURN ADDRESS completed on the reverse side?

SENDER: ■ Complete items 1 and/or 2 for additional services. ■ Complete items 3, 4a, and 4b. ■ Print your name and address on the reverse of this form so that we can return this card to you. ■ Attach this form to the front of the mailpiece, or on the back if space does not permit. ■ Write "Return Receipt Requested" on the mailpiece below the article number. ■ The Return Receipt will show to whom the article was delivered and the date delivered.		I also wish to receive the following services (for an extra fee): 1. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.
3. Article Addressed to: GEORGE ANNE SCHARHAG PERS REP KATHLYN H GIBSON ESTATE PO BOX 548 TESUQUE, NM 87574	4a. Article Number 2 554 663 942	
5. Received By: (Print Name) George Anne Scharhag	4b. Service Type <input type="checkbox"/> Registered <input checked="" type="checkbox"/> Certified <input type="checkbox"/> Express Mail <input type="checkbox"/> Insured <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> COD	
	7. Date of Delivery OCT 21 1999	
6. Signature: (Addressee or Agent) [Signature]	8. Addressee's Address (Only if requested and fee is paid)	

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.
Thank you for using Return Receipt Service.

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

in this box •

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

Code in this box

289

Is your RETURN ADDRESS completed on the reverse side?

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I also wish to receive the following services (for an extra fee):

- ☐ Addressee's Address
- ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

ETHEL PARNELL
503 W DUARTE RD APT 5
ARCADIA, CA 91007

4a. Article Number

2 554 643 938

4b. Service Type

- ☐ Registered ☒ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ COD

7. Date of Delivery

10/28/99

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

James M. Pickett

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

PS Form 3811, December 1994

102595-98-8-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

ZIP Code in this box

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9-4289