OIL CONSERVE ON DIVISION

BTA OIL PRODUCERS

RECEIVED ROCKY MOUNTAIN DIVISION

MIDLAND, TEXAS 79701

555-17TH STREET 27 SUITE 835 AM 9

DENVER, CO BOZOZ

KELLY BEAL DENVER PARTNER BARRY BEAL, JR.

CARLTON BEAL

SPENCER BEAL

BARRY BEAL

CARLTON BEAL, JR.

MIDLAND PARTNERS

October 15, 1992

AC 915-682-3753

Application for Unorthodox Location

Antelope Ridge, Morrow

State "2", 8016 JV-P, Well No. 2

1980' FSL & 990' FWL Sec. 2, T23S, R34E Lea County, New Mexico

STATE OF NEW MEXICO Energy & Minerals Department P. O. Box 2088 Santa Fe, New Mexico 87504-2088

Attn: Mr. Michael Stogner

Dear Mr. Stogner:

Please find attached "proof of notification" PS Forms 3811 for five of the offset operators for the above referenced application.

The proof of notification card for Amoco Production Company has never been found. We filled out Form 3811-A on 10/07/92 and have not received anything on that. We are enclosing a copy of the receipt for certified mail.

Please advise should further information be required to grant this application.

Sincerely,

DOROTHY HOUGHTO

For BTA Oil Producers

DH/pdi

Attachments

SENDER: Complete items 1 and 2 when addition 3 and 4. Put your address in the "RETURN TO" Space on the reversified being returned to you. The return receipt fee will provi the date of delivery. For additional fees the following serving and check box(es) for additional service(s) requested. 1. Show to whom delivered, date, and addressee's (Extra charge)	se side. Failure to do this will prevent this card de you the name of the person delivered to and ces are available. Consult postmaster for fees address 2. Restricted Delivery (Extra charge)
3. Article Addressed to:	4 Article Number
Estoril Production Corporation	P 45 806 954
400 W. Illinois, Suite 1600 Midland, Texas 79701	Type of Service: Registered Insured Cortified Insured Receipt for Merchandise Always obtain signature of addressee
	or agent and DATE DELIVERED
5. Signature — Addressee	8 / Address (ONLY if
X	** Femested and fee paid)
6. Signature — Agent	
* Comu Danus	
7. Date of Delivery $(G, \partial_{\Omega}) G Z$	
DC 5 3911 A 1000	
PS Form 3811, Apr. 1989 ** U.S.G.Po. 1989 238	BIS DOMESTIC RETURN RECEIPT
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3. Article Addressed to:	4a Article Number
Anderson Carter II, et al	64 P P 4045 806 955
P. O. Box 998	4b., Service Type □ Registered □ Insured
Las Cruces, New Mexico 88004	☑ Certified COD
	Express Mails - Receipt for
). Post of the second of the s	7. Date of Delivery
THE PARTY OF THE STATE OF THE S	6 8 2 B
5. Signature (Addressee)	8. Addressed's Address (Pay of requested
	and fet is haid)
6. Signature (Agent)	200
PS Form 3811, November 1990 & U.S. GPO: 1991-28	37-066 DOMESTIC RETURN RECEIPT
• Attach this form to the front of the mailpiece, or on the bac	
• Write "Return Receipt Requested" on the mailpiece below the	
The Return Receipt Fee will provide you the signature of the pe	rson delivered
3. Article Addressed to:	Consult postmaster for fee. 4a. Article Number
CHARLES OF THE STREET,	P 045 896 956
TIPCO Corporation	4b. Service Type
6525 N. Meridian, No. 102	Registered Insured
Oklahoma City, Oklahoma 73116	Certified COD
	Express Malk S Return Receipt for Merchandise
	7 Date of/Delivery
B Signature (Addressee)///	8. Addressee's Address (Only in bound tool
INDIAN NUMBER	and fee R paid)
6. Signature (Agent)	
	Line and
PS Form 3811, November 1990 + U.S. GPO: 1991-2	87-088 DOMESTIC RETURN RECEIPT
	The state of the s

SENDER: • Complete items 11 and/or 2 for additional services. • Complete items 3 and 4a & b. • Print your name and address on the reverse of this form so the return this card to you? • Attach this form to the front of the malipiece; or on the back does not permit.	if space, 11. □ Addressee's Address
The Return Receipt Fee will provide you the signature of the pers to and the date of delivery	on delivered Consult postmaster for fee.
3 Article Addressed to 3	4a. Article Number P. 045 806 957
P. O. Box 400 Amarillo, Texas 79188-0001	4b Service Type ☐ Registered ☐ Insured ☐ Certified ☐ COD ☐ Express Mail ☐ Return Receipt for ☐ Merchandise
Bel Raberso	7 Date of Deliv SEP 2 3 1992
5.: Signature (Addressee)	8 Addressee's Address (Only if requested and fee is paid)
6 (Signature (Agent)) (Agent)	
PS Form 3811, November 1990 + U.S. GPO: 1991–287	OGE DOMESTIC RETURN RECEIPT
Write "Return Receipt Requested" on the mailpiece below the ar The Return Receipt Fee will provide you the signature of the persto and the date of delivery.	The stricted, Delivery with the stricted and the stricted of t
3. Article Addressed to: State of New Mexico	4a. Article Number P 045 806 958
Commissioner of Public Lands P. O. Box 1148	4b. Service Type ☐ Registered ☐ Insured
Santa Fe, New Mexico 87504-4148	☐ Contified ☐ COD☐ Express Mail ☐ Return Receipt for Merchandise
(5)	Date of Delivery
5. Signature (Addressee)	8. Addressee's Address (Only if requested and fee is paid)
6. Signature (Agent)	
PS Form 3811, November 1990 U.S. GPO 1991—28	1066 DOMESTIC PETLIPM DECEIPT

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UNITED STATES OFFICIAL BUSINES	POSTAL SERVICE S		1	
TO .	(Enter name and addrescustomer making inquir	y)		U.S. MAIL
NAME /	a oil th 04 S. Pe	RODUCERS	PENA	LTY FOR PRIVAT USE, \$300
STREET	MIDLAND,	The second secon	01	
CITY	STATE	ZIP CODE		+ 1, + 1
		TO: POST	MASTER	• ** • *
		Houston,	Texas	77253
		CITY	STATE	ZIP CODE

DELIVERY OFFICE: (After completion-cross out Postmaster's address and return to customer shown in return address)

CUSTOMER:—Complete items 1 or 2 and 3 through 10 below.
Add your address in the "RETURN TO" space on reverse PS and compared against the LTHIS FORM TO CUSTOMERS: 1b. For return receipt after mailing ATTACH appropriate for as chown in 14 AFTER MAILING: provide name of individual, company, or organization to whom delivered and date of delivery.

(Attach appropriate fee as shown in Section 932.2 of the DMM

(2-20 DUPLICATE: provide name of individual, company or organization to whom delivered and date of delivery.

25 DUPLICATE: provide name of individual, company, or organization to whom delivered, date of delivery, and place of delivery. Section 932.2 3. Mailing Date Return Receipt for Merchandise No. 4. COD No. Mailing post 9-21-92 fee previously Certified No. 8. Insured No. 9. Express Mail No. PO45.806 959 This form must be completed at the customer's receipt. DO NOT FURNISH. -POBOx 3092 Amoco Production Postmark of Delivery Office 12. Date of Delivery POSTAL RECORDS SHOW 14. Clerk's Initials **DELIVERY** Do not process if Section 1b above is not completed.

PS Form 3811-A, Aug. 1988

REQUEST FOR RETURN RECEIPT (AFTER MAILING)



MIDLAND PARTNERS CARLTON BEAL CARLTON BEAL, JR. BARRY BEAL SPENCER BEAL KELLY BEAL

DENVER PARTNER BARRY BEAL, JR.

BTA OIL PRODUCERS

104 SOUTH PECOS MIDLAND, TEXAS 79701 AC 915-682-3753

September 20, 1992

ROCKY MOUNTAIN DIVISION 555-17TH STREET SUITE 835 DENVER, CO BO202 AC 303-292-9299

Application for Unorthodox Location RE:

Antelope Ridge, Morrow

State "2", 8016 JV-P, Well No. 2

1980' FSL & 990' FWL Sec. 2, T23S, R34E Lea County, New Mexico

AMOCO PRODUCTION COMPANY P. O. Box 3092 Houston, Texas 77253

Certified Mail Return Receipt Requested

Gentlemen:

BTA has filed the above referenced application to the State of New Mexico, Energy and Minerals Department for administrative approval for this location.

We are enclosing a complete copy of our application.

Should you have any questions regarding this applica

Sincerely,

3800, June 1991

Form .

DOROTHY HOUGHTO: For BTA Oil Pro-

DH/pdi

Attachments

8016 JV-P State "2" #2 P 045 806 959



Receipt for **Certified Mail** No Insurance Coverage Provided

Do not use for International Mail Amoco Production Company

P. O. Box 3092 Houston, Texas 77253

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Postage	16 52
Certified Fee	\$,52
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	6.00
Return Receipt Showing to Whom, Date and Addresses Address	
87-94 OF 10/01	\$ 2.57
Postmark of Date 2	
USPO	•