



OIL CONSERVATION DIVISION
RECEIVED

JUN 9 47

Manzano Oil Corporation

P.O. Box 2107
Roswell, New Mexico 88202-2107
(505) 623-1996
FAX (505) 625-2620

June 29, 1992

Oil Conservation Division
P.O. Box 2088
State Land Office Building
Santa Fe, New Mexico 87501

Attn: Ben Stone

Re: Texaco Federal #2
Sec 14, T19S, R33E
Lea County, NM

Anadarko Federal #1
Sec 15, T18S, R32E
Lea County, NM

Dear Mr. Stone:

Enclosed are copies of the return receipts whereby notification was given to offset leasehold operators, surface owners, and grazing lessees of the proposal to convert the above wells to salt water disposals.

If you need any further information, please do not hesitate to call.

Very truly yours,

Allison Raney
Production Analyst


:ar

Enclosures

1282 PSI INSTEAD OF 1600 PSI

COPIES OF CERT. MAIL RECEIPTS

TALKED W/ DONNIE BROWN!

6-29-92 

RELEASE 7-6-92

'92 JUN 27 AM 9 18

APPLICATION FOR AUTHORIZATION TO INJECT

- I. Purpose: ☐ Secondary Recovery ☐ Pressure Maintenance ☒ Disposal ☐ Storage
Application qualifies for administrative approval? ☒ yes ☐ no
- II. Operator: Manzano Oil Corporation
Address: P.O. Box 2107, Roswell, New Mexico 88202-2107
Contact party: Donnie E. Brown Phone: (505) 623-1996
- III. Well data: Complete the data required on the reverse side of this form for each well proposed for injection. Additional sheets may be attached if necessary.
- IV. Is this an expansion of an existing project? ☐ yes ☒ no
If yes, give the Division order number authorizing the project _____.
- V. Attach a map that identifies all wells and leases within two miles of any proposed injection well with a one-half mile radius circle drawn around each proposed injection well. This circle identifies the well's area of review.
- * VI. Attach a tabulation of data on all wells of public record within the area of review which penetrate the proposed injection zone. Such data shall include a description of each well's type, construction, date drilled, location, depth, record of completion, and a schematic of any plugged well illustrating all plugging detail.
- VII. Attach data on the proposed operation, including:
1. Proposed average and maximum daily rate and volume of fluids to be injected;
 2. Whether the system is open or closed;
 3. Proposed average and maximum injection pressure;
 4. Sources and an appropriate analysis of injection fluid and compatibility with the receiving formation if other than reinjected produced water; and
 5. If injection is for disposal purposes into a zone not productive of oil or gas at or within one mile of the proposed well, attach a chemical analysis of the disposal zone formation water (may be measured or inferred from existing literature, studies, nearby wells, etc.).
- *VIII. Attach appropriate geological data on the injection zone including appropriate lithologic detail, geological name, thickness, and depth. Give the geologic name, and depth to bottom of all underground sources of drinking water (aquifers containing waters with total dissolved solids concentrations of 10,000 mg/l or less) overlying the proposed injection zone as well as any such source known to be immediately underlying the injection interval.
- IX. Describe the proposed stimulation program, if any.
- * X. Attach appropriate logging and test data on the well. (If well logs have been filed with the Division they need not be resubmitted.)
- * XI. Attach a chemical analysis of fresh water from two or more fresh water wells (if available and producing) within one mile of any injection or disposal well showing location of wells and dates samples were taken.
- XII. Applicants for disposal wells must make an affirmative statement that they have examined available geologic and engineering data and find no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.
- XIII. Applicants must complete the "Proof of Notice" section on the reverse side of this form.
- XIV. Certification

I hereby certify that the information submitted with this application is true and correct to the best of my knowledge and belief.

Name: Donnie E. Brown Title Vice President, Engineering

Signature: Donnie E. Brown Date: June 1, 1992

- * If the information required under Sections VI, VIII, X, and XI above has been previously submitted, it need not be duplicated and resubmitted. Please show the date and circumstance of the earlier submittal. N/A

III. WELL DATA

A. The following well data must be submitted for each injection well covered by this application. The data must be both in tabular and schematic form and shall include:

- (1) Lease name; Well No.; location by Section, Township, and Range; and footage location within the section.
- (2) Each casing string used with its size, setting depth, sacks of cement used, hole size, top of cement, and how such top was determined.
- (3) A description of the tubing to be used including its size, lining material, and setting depth.
- (4) The name, model, and setting depth of the packer used or a description of any other seal system or assembly used.

Division District offices have supplies of Well Data Sheets which may be used or which may be used as models for this purpose. Applicants for several identical wells may submit a "typical data sheet" rather than submitting the data for each well.

B. The following must be submitted for each injection well covered by this application. All items must be addressed for the initial well. Responses for additional wells need be shown only when different. Information shown on schematics need not be repeated.

- (1) The name of the injection formation and, if applicable, the field or pool name.
- (2) The injection interval and whether it is perforated or open-hole.
- (3) State if the well was drilled for injection or, if not, the original purpose of the well.
- (4) Give the depths of any other perforated intervals and detail on the sacks of cement or bridge plugs used to seal off such perforations.
- (5) Give the depth to and name of the next higher and next lower oil or gas zone in the area of the well, if any.

XIV. PROOF OF NOTICE

All applicants must furnish proof that a copy of the application has been furnished, by certified or registered mail, to the owner of the surface of the land on which the well is to be located and to each leasehold operator within one-half mile of the well location.

Where an application is subject to administrative approval, a proof of publication must be submitted. Such proof shall consist of a copy of the legal advertisement which was published in the county in which the well is located. The contents of such advertisement must include:

- (1) The name, address, phone number, and contact party for the applicant;
- (2) the intended purpose of the injection well; with the exact location of single wells or the section, township, and range location of multiple wells;
- (3) the formation name and depth with expected maximum injection rates and pressures; and
- (4) a notation that interested parties must file objections or requests for hearing with the Oil Conservation Division, P. O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

NO ACTION WILL BE TAKEN ON THE APPLICATION UNTIL PROPER PROOF OF NOTICE HAS BEEN SUBMITTED.

NOTICE: Surface owners or offset operators must file any objections or requests for hearing of administrative applications within 15 days from the date this application was mailed to them.

INJECTION WELL DATA SHEET

Manzano Oil Corporation

Texaco Federal Com.

OPERATOR

LEASE

#2

1980' FNL & 2310' FEL

14

19S

33E

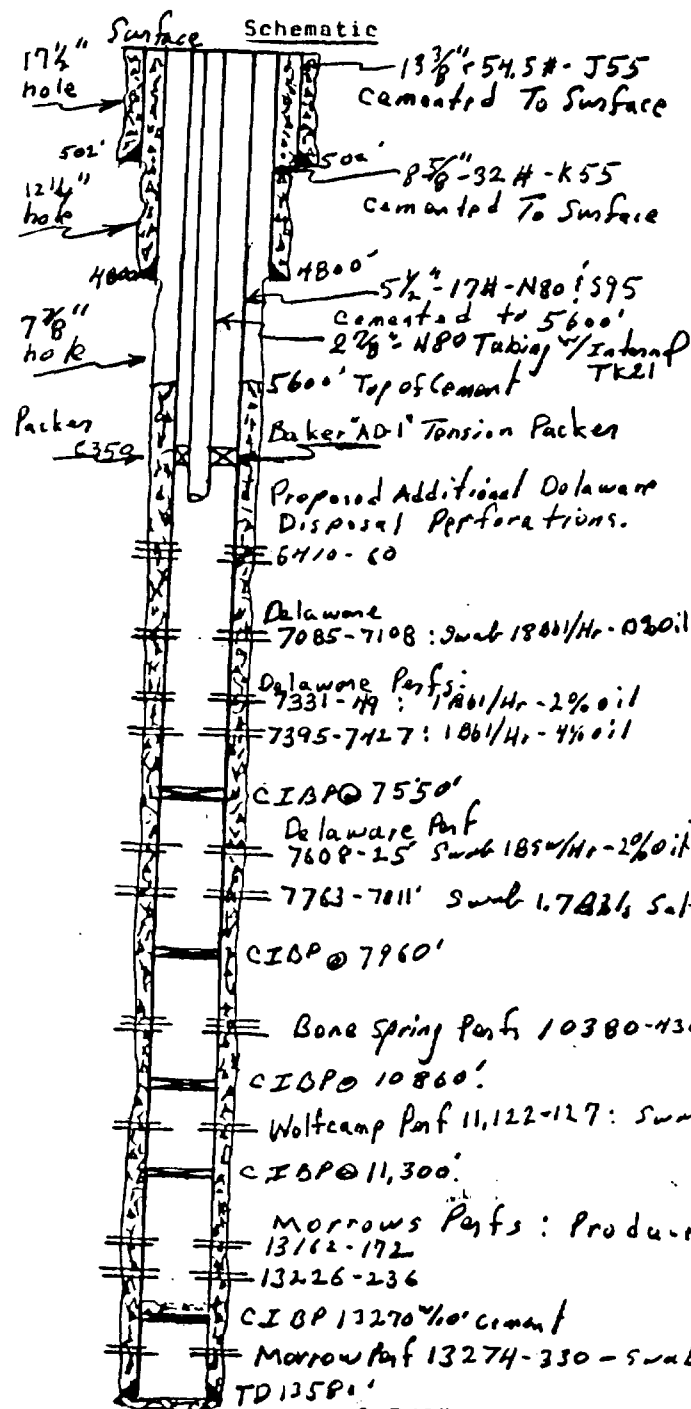
WELL NO.

FOOTAGE LOCATION

SECTION

TOWNSHIP

RANGE



Tabular Data

Surface Casing

Size 13-3/8 " Cemented with 500 sx.TOC Surface feet determined by InspectionHole size 17-1/2"

Intermediate Casing

Size 8-5/8 " Cemented with 2100 sx.TOC Surface feet determined by InspectionHole size 12-1/4"

Long string

Size 5-1/2 " Cemented with 2800 sx.TOC 5600' or higher feet determined by CBL/CELHole size 7-7/8Total depth 13,530

Injection interval

6400 feet to 7450 feet
(perforated or ~~XXXXXXXXXX~~ indicate which)

PLUGS:

ADDITIONAL
6260 - 6274 (135PF)Tubing size 2-7/8" lined with Tuboscope Tk-21 set in a
(material)Baker Model "AD-1" Tension packer at 6350 feet
(brand and model)

(or describe any other casing-tubing seal).

Other Data

- Name of the injection formation Delaware
- Name of field or Pool (if applicable) Gem Delaware East
- Is this a new well drilled for injection? ☐ Yes ☒ No
If no, for what purpose was the well originally drilled? To test the Atoka/Morrow.
Morrow produced until depleted. Wolfcamp, Bone Spring, and Delaware were tested for hydrocarbon production. No commercial pay was found.
- Has the well ever been perforated in any other zone(s)? List all such perforated intervals and give plugging detail (sacks of cement or bridge plug(s) used) Morrow 13274-330. CIBP 13,270. Morrow 13162-172 & 13226-236. CIBP 11300. Wolfcamp 11122-127. CIBP 10860. Bone Spring 10380-430. CIBP 7960. Delaware 7763-7811 and 7608-25. CIBP 7550. Delaware 7395-7427 and 7331-49. Delaware 7085-7108.
- Give the depth to and name of any overlying and/or underlying oil or gas zones (pools) in this area. Overlying: Seven Rivers
Underlying: None

<u>Operator</u>	<u>Lease/Well</u>	<u>Location</u>	<u>Type</u>	<u>Construction</u>	<u>Date Drilled</u>	<u>Total Depth</u>	<u>Completion & Comments</u>
1. Nearburg Expl. Co.	Britz Federal #1	Sec 14, T19S, R33E 1980'FSL & 660'FWL	Oil	8-5/8" @ 1527'w/ 700 sks 5-1/2" @ 4950'w/ 400 sks	1/27/87	4950'	Seven Rivers - 3722-42'. Did not penetrate proposed injection zone.
2. Manzano Oil Corp.	Texaco Federal #1	Section 14, T19S, R33E 2060'FSL & 1980'FWL	Oil	13-3/8" @ 500'w/ 500 sks 8-5/8" @ 5200'w/2000 sks 5-1/2" @ 13650'w/ 650 sks	12/22/89	13650'	Morrow. Perf 13214-218' & 13295-309' Blanking plug in X N Nipple @ 13076' Wolfcamp Perf 11100-130'. Now producing.
3. Manzano Oil Corp.	Texaco Federal #2	Section 14, T19S, R33E 1990'FNL & 2310'FEL	TA	13-3/8" @ 502'w/ 500 sks 8-5/8" @ 4800'w/2100 sks 5-1/2" @ 13580'w/2800 sks	9/10/90	13530'	Morrow Perf: 13162-172'; 13226-236' 13274-330'. CIBPs: 13270', 11300' Wolfcamp Perf: 11122-127' CIBP: 10860' Bone Spring Perfs: 10380-430' CIBP: 7960' Delaware Perfs: 7608-25'; 7763-7811' CIBP: 7550' Delaware Perfs: 7085-7108'; 7331-49'; 7395-7427'
4. Manzano Oil Corp.	Texaco Federal #3	Section 14, T19S, R33E 660'FSL & 1980'FWL	Oil	8-5/8" @ 1635'w/ 850 sks 5-1/2" @ 795'w/ 450 sks	12/15/91	7980'	Delaware Perfs: 7439-56'; Producing
5. Texaco Company	Federal (USA) L #1	Section 14, T19S, R33E 2310'FSL & 1650'FEL	Oil	8-5/8" @ 1505'w/1000 sks 5-1/2" @ 3913'w/ 800 sks	4/19/89	3913'	Seven Rivers - 3722-50'. Did not penetrate proposed injection zone.
6. Texaco Company	Federal (USA) L #2	Section 14, T19S, R33E 2310'FNL & 2210'FWL	Oil	8-5/8" @ 1507'w/1000 sks 5-1/2" @ 3867'w/ 800 sks	7/19/89	3867'	Seven Rivers - 3679-3710'. Did not penetrate proposed injection zone.
7. Texaco Company	Federal (USA) L #3	Section 14, T19S, R33E 1980'FNL & 1675'FEL	Oil	8-5/8" @ 1507'w/1200 sks 5-1/2" @ 4450'w/1000 sks	10/26/89	4450'	Seven Rivers - 3701-18'. Did not penetrate proposed injection zone.
8. Texaco Company	Federal (USA) L #4	Section 14, T19S, R33E 2100'FSL & 2310'FWL	Oil	8-5/8" @ 1500'w/1200 sks 5-1/2" @ 4450'w/1050 sks	6/06/90	4450'	Seven Rivers - 3615-94'. Did not penetrate proposed injection zone.
9. Texaco Company	Federal (USA) L #5	Section 14, T19S, R33E 990'FSL & 1650'FEL	P&A	8-5/8" @ 1500'w/ 800 sks 5-1/2" @ 3950'w/1025 sks	8/06/90	3950'	Seven Rivers Perfs: 3633-3711' (OA) Non-commercial. Did not penetrate proposed injection zone. Cement Plugs: 3565-3600' 1425-1575' 60-Surface

Item VII of New Mexico OCD-Form C-108
Data on Proposed Operations
Texaco Federal #2

1. The proposed average and maximum daily injection rate is expected to be 600 BWPD and 1500 BWPD, respectively.
2. The injection system will be operated as a closed system.
3. The average injection pressure is expected to be 1200 psi. The maximum injection pressure should not be over 1600 psi. $6410' \times .2 \text{ psi} = 1282 \text{ psi}$ ⁸² ~~1280~~ _{MAX}
4. Source for the disposal water will be the Manzano Texaco Federal #1, 2060' FSL and 1980' FWL of Section 14, T19S, R33E; and the Manzano Texaco Federal #3, 660' FSL and 1980' FWL of Section 14, T19S, R33E plus water from additional development wells drilled on the Manzano Texaco lease. Water analysis for the Delaware water in the Texaco Federal #2 and Texaco Federal #3 is attached as Exhibit VII 4a. Water analysis for the Wolfcamp water in the Texaco Federal #1 is attached as Exhibit VII 4b.
5. Water analysis of the disposal zone formation water in the Texaco Federal #3 is attached as Exhibit VII 4a.

Exhibit VII 4a.

HALLIBURTON SERVICES
HOBBS, NEW MEXICO

To Manzano Oil CorporationSample Number 124

This report is the property of Halliburton Company and neither it nor any part thereof nor a copy thereof is to be published or disclosed without first securing the express written approval of laboratory management. It may, however, be used in the course of regular business operations by any person or persons and employees thereof receiving such report from Halliburton Company.

ATT; Donnie BrownSubmitted by Carol BellahDate Received 4-21-92Well No. See Below

Depth _____

Formation Delaware

County _____

Field _____

Source _____

	<u>Texaco #2</u>	<u>Texaco #3</u>	
Resistivity.....	<u>0.054 @ 70°F</u>	<u>0.052 @ 70°F</u>	
Specific Gr.....	<u>1.155</u>	<u>1.180</u>	
pH.....	<u>5.6</u>	<u>5.7</u>	
Calcium*.....	<u>16400</u>	<u>29900</u>	
Ca			
Magnesium*.....	<u>6390</u>	<u>3720</u>	<u>Ca SO₄</u>
Mg			
Chlorides*.....	<u>139920</u>	<u>161120</u>	
Cl			
Sulfates*.....	<u>moderate 500-3000</u>	<u>light @ - 500</u>	<u>7</u>
SO ₄			
Bicarbonates*....	<u>134</u>	<u>122</u>	
HCO ₃			
Soluble Iron*....	<u>light</u>	<u>light</u>	
Fe			
Nitrates	<u>nil</u>	<u>nil</u>	

Remarks:

Tex #2 post 7005-7108See 14-195-33e

*Milligrams per liter

Calcium in Delaware
should be 10 times higher
than in commercial Brine

Respectfully submitted,

See data in commercial
Brine should be 5000-6000

Analyst: ALFUSANA

HALLIBURTON COMPANY

Conclusions: Both are
Reference.

I have this zone
w/ 32k ppm Cut Brine

THE WESTERN COMPANY OF NORTH AMERICA
WATER ANALYSIS

ANALYSIS #: HB010057

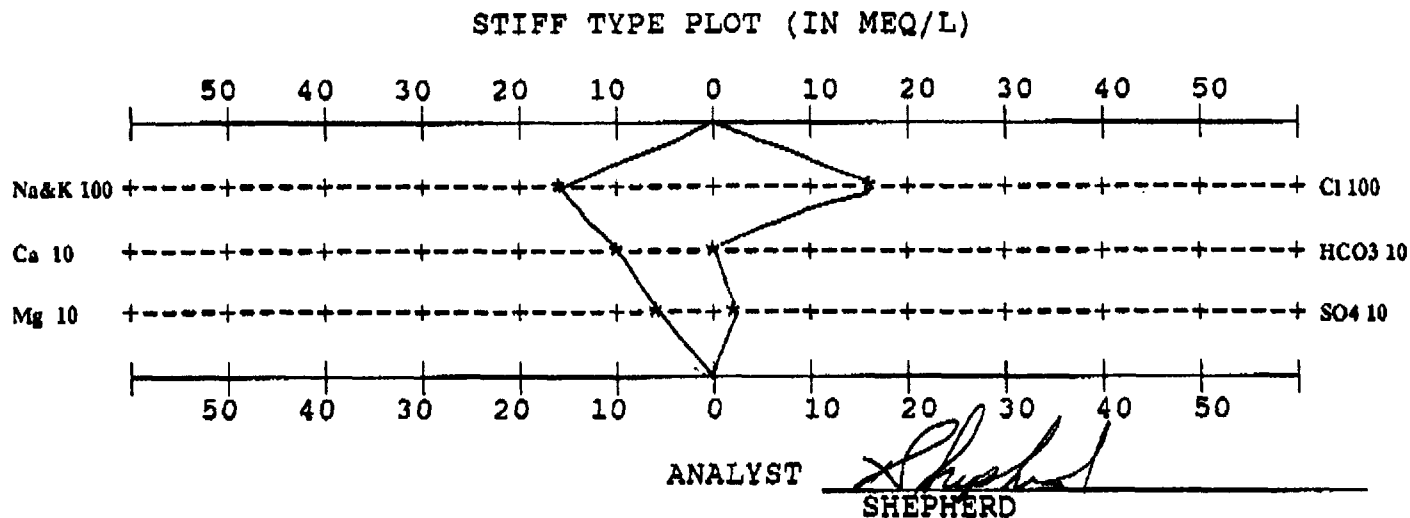
OPERATOR: MANZANO OIL CO.
WELL: TEXACO FED #1
FIELD:
FORMATION: Wolfcamp
COUNTY:
STATE: NM

DEPTH: 0
DATE SAMPLED: 6-6-92
DATE RECEIVED: 6-6-92
SUBMITTED BY: DONNY BROWN
WORKED BY: SHEPHERD
PHONE #: 505-392-5556

SAMPLE DESCRIPTION: SAMPLE FROM HEATER TREATER.

SPECIFIC GRAVITY:	1.073 @ 72 °F	PH:	6.65
RESISTIVITY (CALC.)	: .075 OHMS @ 75 °F		
IRON (FE++):	10 PPM	SULFATE:	629 PPM
CALCIUM:	1938 PPM	TOTAL HARDNESS:	7642 PPM
MAGNESIUM:	679 PPM	BICARBONATE:	341 PPM
CHLORIDE:	58142 PPM	SODIUM CHLORIDE (CALC)	95643 PPM
SODIUM+POTASS:	34631 PPM	TOT. DISSOLVED SOLIDS:	101385 PPM
KCL	:N/A	H2S	:NO TRACE

REMARKS: NO OIL IN SAMPLE. SMALL AMOUNT OF SOME GRAVEL
LIKE MATERIAL ON BOTTOM OF SAMPLE.



Item VIII of New Mexico OCD Form C-108
Geologic Data of the Injection Zone & Underground Drinking Water
Texaco Federal #2

The proposed interval for salt water disposal is the Delaware Mountain Group between the depth of 6410' and 7427' in the Manzano Texaco Federal #2. The Delaware Mountain Group is a sequence of well consolidated sandstone, siltstone, and shale strata of Permian age.

The proposed Delaware disposal zones had the following stimulation and swab test results:

<u>Interval</u>	<u>Holes Perforated</u>	<u>Stimulation</u>	<u>Swab Results</u>
7395-7427	11	1000 gal - 15%	Swab dry. Had 1 bbl entry per hour - 4% oil. Non-commercial.
7331-7349	11	1000 gal - 15%	Swab dry. Had 1 bbl entry per hour - 2% oil. Non-commercial.
7085-7108	14	1500 gal - 15%	Swab 18 bbl of salt water per hour with fluid level at 6400.
6410-6460:	100 holes of additional Delaware perforations for disposal. Calculates wet from open hole logs with no shows from mud log.		

No commercial oil pay in the Delaware has been found in the Texaco Federal #2.

Based on information from the New Mexico State Engineer's Office in Roswell, the nearest water well is 2-1/4 miles from the proposed saltwater injection well. This water well has a total depth of 101' and is located in the NENESE of Section 26, T19S, R33E. The fresh water zone in this well is the Alluvium found at a depth of 80' to 150' from surface. The only other strata with potential fresh water is the Triassic Red Beds. According to State Engineer's Office, fresh water production from the Triassic Red Beds is very spotty in this area.

There are no known fresh water strata underlying the Delaware.

Items IX through XIII
New Mexico OCD Form C-108
Texaco Federal #2

Item IX. The proposed Delaware disposal zones 7085-7108; 7331-49; and 7395-7427 have already been perforated and acidized. No additional stimulation should be required.

For additional disposal capacity, the Delaware interval 6410-60 will be perforated with 100 holes and acidized with 5000 gallons of 10% acid.

Item X. There is no test data on this well other than what is outlined in the schematic and that given in item VIII of this application.

All logs for this well are already on file with the State of New Mexico Oil Conservation Division (OCD) and will not be resubmitted with this application.

Item XI. The only strata within one mile of the proposed disposal well which contains fresh water is Alluvium confined to 150' and shallower. No contamination of this fresh water should occur since the proposed disposal well has surface casing set at 502'KB with cement circulated to surface plus an intermediate casing string set at 4800' with cement also circulated to surface. There are no fresh water wells within one mile of this proposed saltwater disposal well.

Item XII. Manzano Oil has examined all available geological and engineering data in the surrounding area of the proposed disposal well and finds no evidence of open faults or any other hydrologic connection between the disposal zone and any underground source of drinking water.

Item XIII. Proof of notice is attached. See Exhibits XIII A and B.

MANZANO OIL CORPORATION
APPLICATION FOR AUTHORIZATION TO INJECT
TEXACO FEDERAL COM #2
LEA COUNTY, NEW MEXICO

CERTIFICATE OF SERVICE

I, Donnie E. Brown, Engineer, Manzano Oil Corporation, Operator of the Texaco Federal Com #2, have on this 4th day of June, 1992, mailed or caused to be mailed, postage prepaid a copy of the Application for Authorization to Inject to the following persons at the address shown:

LAND OWNER

Bureau of Land Management
Carlsbad Resource Area Headquarters
P.O. Box 1778
Carlsbad, New Mexico 88220

GRAZING LESSEE

Mr. Ken Smith
P.O. Box 764
Carlsbad, New Mexico 88220

OFFSET OPERATORS

R.L. Ingle, Div. Oprns. Mgr.
Enron Oil and Gas Corp.
P.O. Box 2267
Midland, Texas 79702

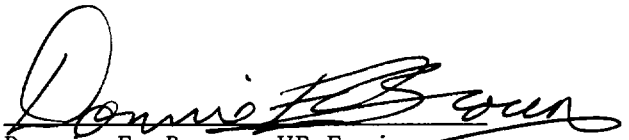
Rick Hall, Oper. Engr.
Oryx Energy Company
P.O. Box 2880
Dallas, Texas 75221-2880

Harvey E. Yates, COB
HEYCO-Harvey E. Yates Company
P.O. Box 1933
Roswell, New Mexico 88202-1933

R.L. Wright, Div. Oprns. Supv.
Pogo Producing Company
P.O. Box 10340
Midland, Texas 79702

Mark K. Nearburg
Nearburg Producing Company
401 E. Illinois, Suite 300
Midland, Texas 79701

Robert A. Solberg, DM
Texaco Exploration & Production, Inc.
P.O. Box 3109
Midland, Texas 79702

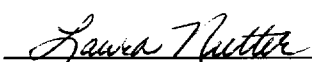

Donnie E. Brown, VP Engineering

State of New Mexico)
)
County of Chaves)

The foregoing instrument was acknowledged before me this 4th day of June, 1992 by Donnie E. Brown, Vice President of Engineering, Manzano Oil Corporation, on behalf of said corporation.

My commission expires:

June 6, 1995


Notary Public in and for the
State of New Mexico

AFFIDAVIT OF PUBLICATION

State of New Mexico,
County of Lea.

I, Kathi Bearden

of the Hobbs Daily News-Sun, a daily newspaper published at Hobbs, New Mexico, do solemnly swear that the clipping attached hereto was published once a week in the regular and entire issue of said paper, and not a supplement thereof for a period

of _____

One weeks.
Beginning with the issue dated

June 16, 1992
and ending with the issue dated

June 16, 1992

Kathi Bearden
General Manager

Sworn and subscribed to before

me this 17 day of

June, 1992

Paula Parvins
Notary Public.

My Commission expires _____

Aug. 5, 1995
(Seal)

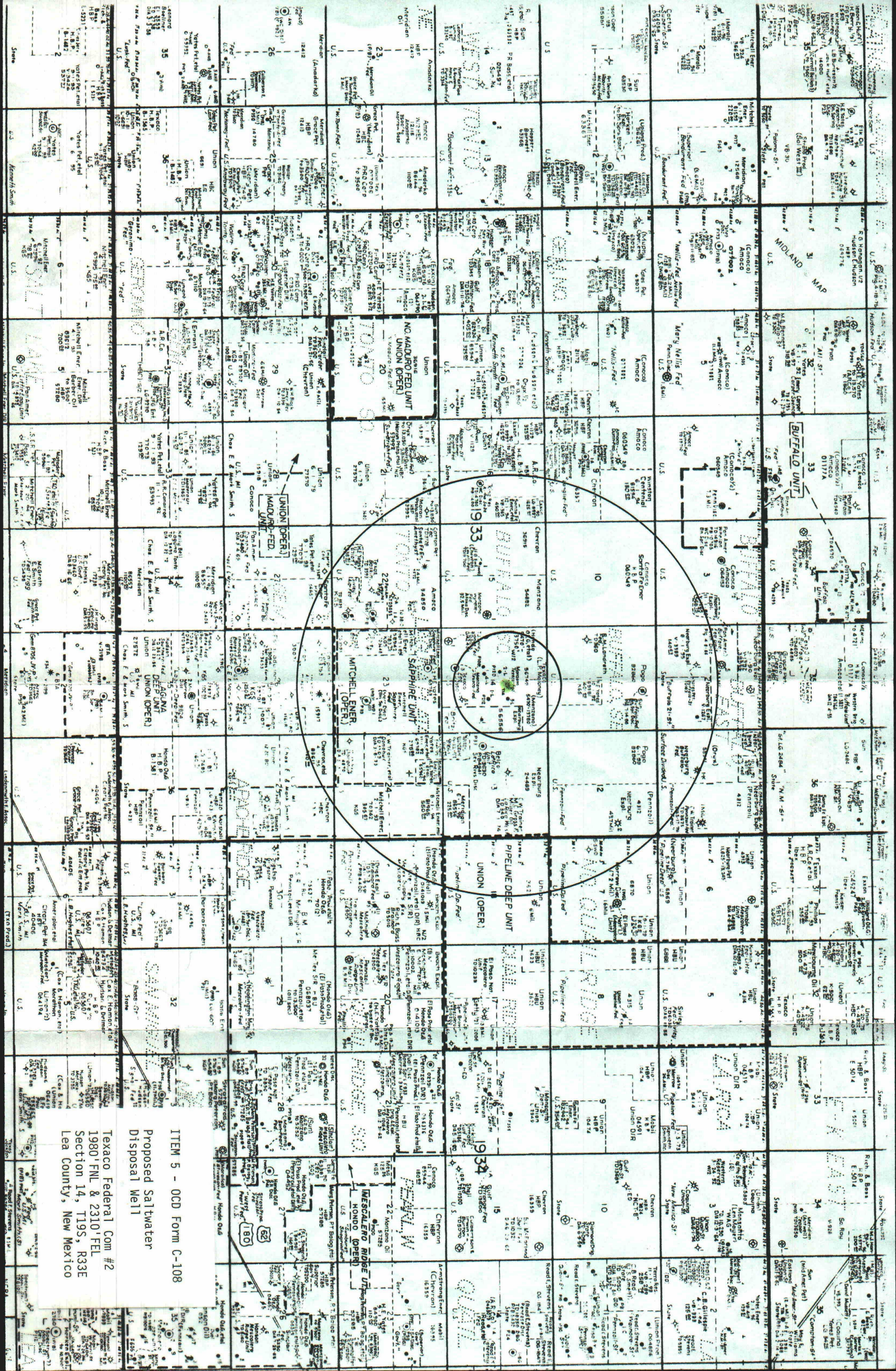
This newspaper is duly qualified to publish legal notices or advertisements within the meaning of Section 3, Chapter 167, Laws of 1937, and payment of fees for said publication has been made.

LEGAL NOTICE

June 16, 1992

Manzano Oil Corporation proposes to convert the Texaco Federal #2 well from an oil well to a water disposal well. The Texaco Federal #2 is located 1980' FNL & 2310' FEL of Section 14, Township 19 South, Range 33 East, N.M.P.M., Lea County, New Mexico. 1500 barrels of water per day maximum shall be injected at 1600 psi into the Delaware Mountain Group at a depth of 6400 - 7450 feet. Interested parties must file objections or request a hearing with the New Mexico Oil Conservation Division P.O. Box 2088, Santa Fe, New Mexico 87501 within 15 days.

1282 PS1
PERKS: 6410-7427



ITEM 5 - OCD FORM C-108
Proposed Saltwater
Disposal Well
Texaco Federal Com #2
1980 FNL & 2310 FCL
Section 14, T19S, R33E
Lea County, New Mexico

Unrecorded #2
Return Receipt
Sec. 111, T195, R33E
Dea County, TX

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) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
R. A. Wright, Div. Opns.
Pogo Producing Company
P.O. Box 10340
Midland, TX 79702

4. Article Number
P 340 896 244

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 — Addressee
X

6. Signature — Agent
X

7. Date of Delivery
R. Keel 6-9-92

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 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) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:
B.M.
P.O. Box 1778
Carlsbad, NM 88220

4. Article Number
P 340 896 242

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 — Addressee
X

6. Signature — Agent
X Betty Hill

7. Date of Delivery

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 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) 2. ☒ Restricted Delivery (Extra charge)

3. Article Addressed to:
Robert A. Selburg, Dm
Servico Explor & Prod.
P.O. Box 3109
Midland, TX 79702

4. Article Number
P 340 896 243

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 — Addressee
X

6. Signature — Agent
X [Signature]

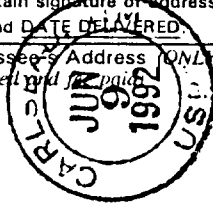
7. Date of Delivery
JUL - 8 1992

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

PS Form 3811, Apr. 1989 *U.S.G.P.O. 1989-238-815 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) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Ken Smith P.O. Box 764 Carlsbad, NM 88220	4. Article Number P 340 896 142
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid) 
6. Signature — Agent X <i>Dana Reid</i>	
7. Date of Delivery	

PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-315 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☒ Restricted Delivery (Extra charge)

3. Article Addressed to: R. L. Single, Div. Oper. Mgr. Enron Oil & Gas Corp. P.O. Box 2267 Midland, TX 79702	4. Article Number P 340 896 140
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Addressee X <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery JUN - 8 1992	

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 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. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Harvey E. Yates, COB HEGCO - Harvey E. Yates Co. P.O. Box 1933 Roswell, NM 88202-1933	4. Article Number P 340 896 2417
Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise	
Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .	
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>[Signature]</i>	
7. Date of Delivery 6/8/92	

PS Form 3811, Apr. 1989 * U.S.G.P.O. 1989-238-815 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) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Hobbs Daily News Sun P.O. Box 860 Legal Dept. Hobbs, NM 88241-0860	4. Article Number P 340 896 139
5. Signature — Addressee X <i>[Signature]</i>	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature — Agent X	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery 6-12-92	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

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. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Mark K. Marburg Marburg Prod. Co. 401 E. Illinois, Ste 300 Midland, TX 79701	4. Article Number P 340 896 248
5. Signature — Addressee X	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature — Agent X <i>[Signature]</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery 6-15-92	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989

* U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

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1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Rick Hall, Oper. Ingr. Drex Energy Company P.O. Box 2880 Dallas, TX 75221-2880	4. Article Number P 340 896 245
5. Signature — Addressee X	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature — Agent X <i>[Signature]</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery JUN 09 1992	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Apr. 1989

* U.S.G.P.O. 1989-238-815

DOMESTIC RETURN RECEIPT

<p>● SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.</p> <p>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. (Extra charge) 2. <input type="checkbox"/> Restricted Delivery (Extra charge)</p>	
<p>3. Article Addressed to:</p> <p>Hobbs Daily News Sun P.O. Box 860 Legal Department Hobbs, NM 88241-0860</p>	<p>4. Article Number</p> <p>P 340 896 249</p> <p>Type of Service:</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise</p> <p>Always obtain signature of addressee or agent and <u>DATE DELIVERED</u>.</p>
<p>5. Signature - Addressee</p> <p>X <i>Shonda Perry</i></p>	<p>8. Addressee's Address (ONLY if requested and fee paid)</p>
<p>6. Signature - Agent</p> <p>X</p>	
<p>7. Date of Delivery</p> <p>6-12-92</p>	