

**STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION**

**IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION FOR
THE PURPOSE OF CONSIDERING:**

**APPLICATION OF FRONTIER FIELD
SERVICES, LLC FOR AUTHORITY
TO INJECT, LEA COUNTY, NEW MEXICO**

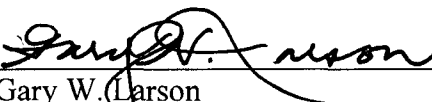
Case No. 14664

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**FRONTIER FIELD SERVICES, LLC'S
SUPPLEMENTAL OF HEARING RECORD**

As authorized by the Hearing Examiner, applicant Frontier Field Services, LLC ("Frontier") hereby supplements the hearing record with the signed return receipts for the certified mail notice letters that are included in Frontier's Exhibit No. 5. Frontier has marked the supplemental exhibit as Exhibit No. 5A and has attached it hereto.

HINKLE, HENSLEY, SHANOR &
MARTIN, LLP



Gary W. Larson
P.O. Box 2068
Santa Fe, NM 87504-2068
Phone: (505) 982-4554
Facsimile: (505) 982-8623
glarson@hinklelawfirm.com

Counsel for Frontier Field Services, LLC

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Cimera Energy of Co.
 500 N. Marienfeld #600
 Midland TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Sadie Garcia* ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Sadie Garcia 5-25-11

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7010 0290 0001 9420 6858
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Cog Operating LLC
 550 W. Texas #1300
 Midland TX 79701

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Robert Sanchez* ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
Robert Sanchez 5-25

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7010 0290 0001 9420 6865
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 Mid America Pipeline Co.
 Tax Dept.
 PO Box 4018
 Houston TX 77210

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Tom Lewis* ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
 MAY 25 2011

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7010 0290 0001 9420 6810
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

SENDER: COMPLETE THIS SECTION

■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
 ■ Print your name and address on the reverse so that we can return the card to you.
 ■ Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
 State of New Mexico
 Commissioner of Public Safety
 310 Old Santa Fe Trail
 Santa Fe NM 87501

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 X *Robert Sanchez* ☐ Agent ☐ Addressee

B. Received by (Printed Name) C. Date of Delivery
ROBERTA SANCHEZ 5/24/11

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number 7010 0290 0001 9420 6827
 (Transfer from service label)

PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540

Case No. 14664

FRONTIER
 FIELD SERVICES
 Exhibit #5A

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Dept. of the Interior
Bureau of Land Mgt.
301 Dinosaur Trail
Santa Fe NM 87508

2. Article Number

(Transfer from service label)

7010 0290 0001 9420 6803

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1541

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Maria Lopez☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

5-24-11

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Lynx Petroleum Consultants
PO Box 1708
Hobbs NM 88241

2. Article Number

(Transfer from service label)

7010 0290 0001 9420 6889

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Harry Scott☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

L. Scott

11/2/02

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

ConocoPhillips Co.
3401 E. 30th St
Farmington NM 87402

2. Article Number

(Transfer from service label)

7010 0290 0001 9420 6841

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Greg Cross☒ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Greg Cross

5/25/11

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

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- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

V-F Petroleum, Inc
PO Box 1889
Midland TX 79702

2. Article Number

(Transfer from service label)

7010 0290 0001 9420 6834

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Ann S. Smith☐ Agent☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

Ann S. Smith

11/2/02

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature X</p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Endurance Resources LLC 15455 Dallas Parkway #600 Addison TX 75001</p>		<p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>7010 0290 0001 9420 6872</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p>		<p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>	
PS Form 3811, February 2004		Domestic Return Receipt 102595-02-M-1	



ENDURANCE RESOURCES, LLC
15455 DALLAS PARKWAY #600
ADDISON TX 75001

7010 0290 0001 9420 6872

