

OCD Case 20805
October 3, 2019
Vista Disposal Solutions
Exhibit 6

Katherine Federal SWD #1 - Notice of Application Recipients				
Entity	Address	City	State	Zip Code
Landowner & Mineral Owner				
New Mexico BLM	620 E Greene St.	Carlsbad	NM	88220
OCD District				
NMOCD District 1	1625 N. French Drive	Hobbs	NM	88240
Leasehold Operators				
Chevron USA Inc. (CHEVRON USA INC)	6301 Deauville	Midland	TX	79706
Cimarex Energy Co.	600 N. Marienfield St. Suite 600	Midland	TX	79701
EOG A Resources, Inc. (EOG A RESOURCES INC)	P.O. Box 900	Artesia	NM	88211
EOG M Resources, Inc. (EOG M RESOURCES INC)	P.O. Box 840	Artesia	NM	88211
EOG Resources, Inc. (EOG RESOURCES INC)	104 S. 4th Street	Artesia	NM	88210
EOG Y Resources, Inc. (EOG Y RESOURCES INC)	104 S. 4th Street	Artesia	NM	88210
JKM Energy, LLC	26 E Compress Road	Artesia	NM	88210
Magnum Hunter Production, Inc. (MAGNUM HUNTER PRODUCTION INC)	202 S. Cheyenne Ave., Suite 1000	Tulsa	OK	74103
Mobil Producing Texas & New Mexico (MOBIL PROD TX & NM)	P.O. Box 1760	Denver City	TX	79323
Murchison Oil & Gas Inc. (MURCHISON OIL & GAS INC)	7250 Dallas Parkway, Suite 1400	Plano	TX	75024
OXY-1 Company	P.O. Box 27570	Houston	TX	77227
Notes: The table above shows the Entities who were identified as parties of interest requiring notification on either the 1-mile well detail list (Attachment 2) or on the 2-mile Mineral Lease Map (Attachment 2). The names listed above in parenthesis, are the abbreviated entity names used on either the 1-mile well detail list (Attachment 2) or on the 2-mile Mineral Lease Map (Attachment 2).				

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
 Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
☐ Return Receipt (electronic) \$
☐ Certified Mail Restricted Delivery \$
☐ Adult Signature Required \$
☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

PS Form 3800, April 2010

Postmark
Here

New Mexico BLM
 620 E. Greene Street
 Carlsbad, NM 88220

7018 1130 0000 6249 8741

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

New Mexico BLM
 620 E. Greene Street
 Carlsbad, NM 88220



9590 9402 4038 8079 4177 04

2. Article Number (Transfer from service label)

7018 1130 0000 6249 8741

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

x *CA Williams*

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

CA Williams

C. Date of Delivery

9/12/19

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

3. Service Type

- ☐ Adult Signature
☐ Adult Signature Restricted Delivery
☒ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)
☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☒ Return Receipt for Merchandise
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

7018 1130 0000 6249 8758

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com®.

Certified Mail Fee \$ _____

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$ _____
☐ Return Receipt (electronic)	\$ _____
☐ Certified Mail Restricted Delivery	\$ _____
☐ Adult Signature Required	\$ _____
☐ Adult Signature Restricted Delivery	\$ _____

Postage \$ _____

Total Postage and Fees \$ _____

Sent To _____

Street and Apt. No. _____

City, State, ZIP+4® _____

PS Form 3800, _____

Postmark Here

NMOCD District 1
 1625 N. French Drive
 Hobbs, NM 88240

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

NMOCD District 1
 1625 N. French Drive
 Hobbs, NM 88240



9590 9402 4038 8079 4178 10

2. Article Number (Transfer from service label)
 7018 1130 0000 6249 8758

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature _____ ☐ Agent
☒ Addressee

B. Received by (Printed Name) _____

C. Date of Delivery 7-12-15

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

3. Service Type

- | | |
|--|---|
| ☐ Adult Signature | ☐ Priority Mail Express® |
| ☐ Adult Signature Restricted Delivery | ☐ Registered Mail™ |
| ☒ Certified Mail® | ☐ Registered Mail Restricted Delivery |
| ☐ Certified Mail Restricted Delivery | ☒ Return Receipt for Merchandise |
| ☐ Collect on Delivery | ☐ Signature Confirmation™ |
| ☐ Collect on Delivery Restricted Delivery | ☐ Signature Confirmation Restricted Delivery |
| ☐ Insured Mail | |
| ☐ Insured Mail Restricted Delivery (over \$500) | |

Domestic Return Receipt

7018 1130 0000 6249 8765

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
For delivery information, visit our website at www.usps.com ®.	
Certified Mail Fee \$	Postmark Here
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy) \$	
☐ Return Receipt (electronic) \$	
☐ Certified Mail Restricted Delivery \$	
☐ Adult Signature Required \$	
☐ Adult Signature Restricted Delivery \$	
Postage \$	
Total Postage and \$	
Sent To	Chevron USA Inc.
Street and Apt. No.	6301 Deauville
City, State, ZIP+4	Midland, TX 79706
PS Form 3800, 11-1-03	

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Chevron USA Inc.
6301 Deauville
Midland, TX 79706



9590 9402 4038 8079 4178 03

2. Article Number (Transfer from service label)

7018 1130 0000 6249 8765

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature		☐ Agent
X <i>[Signature]</i>		☐ Addressee
B. Received by (Printed Name)	C. Date of Delivery	
<i>Maria Brown</i>		
D. Is delivery address different from item 1? ☐ Yes		
If YES, enter delivery address below: ☐ No		

3. Service Type	
☐ Adult Signature	☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery	☐ Registered Mail™
☒ Certified Mail®	☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery	☒ Return Receipt for Merchandise
☐ Collect on Delivery	☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Insured Mail	
☐ Insured Mail Restricted Delivery (over \$500)	

Domestic Return Receipt

7018 1130 0000 6249 8772

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com™.

Certified Mail Fee
 \$ _____

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$ _____
☐ Return Receipt (electronic)	\$ _____
☐ Certified Mail Restricted Delivery	\$ _____
☐ Adult Signature Required	\$ _____
☐ Adult Signature Restricted Delivery	\$ _____

Postage
 \$ _____

Total Postage and
 \$ _____

Sent To
 Street and Apt. No.
 City, State, ZIP+4

Cimarex Energy Co.
 600 N. Marienfeld St. Ste. 600
 Midland, TX 79701

PS Form 3800, April 2015

Postmark
 Here

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
■ Complete items 1, 2, and 3. ■ 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: Cimarex Energy Co. 600 N. Marienfeld St. Ste. 600 Midland, TX 79701 2. Article Number (Transfer from service label) 7018 1130 0000 6249 8772		A. Signature ☒ <i>[Signature]</i> ☐ Agent ☐ Addressee B. Received by (Printed Name) JACAR GARNETT C. Date of Delivery 09/12/19 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No	
3. Service Type ☐ Adult Signature ☐ Adult Signature Restricted Delivery ☒ Certified Mail® ☐ Certified Mail Restricted Delivery ☐ Collect on Delivery ☐ Collect on Delivery Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)		☐ Priority Mail Express® ☐ Registered Mail™ ☐ Registered Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Signature Confirmation™ ☐ Signature Confirmation Restricted Delivery	

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT

Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery \$
- ☐ Adult Signature Required \$
- ☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and Fees

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

PS Form 3800

OXY-1 Company
PO Box 27570
Houston, TX 77227

Postmark
Here

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

OXY-1 Company
PO Box 27570
Houston, TX 77227



9590 9402 4038 8079 4177 66

2. Article Number (Transfer from service label)

7018 1130 0000 6249 8802

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

- ☐ Agent
☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from above?
If YES, enter delivery address below:

- ☐ Yes
☐ No

JAMES BEARD

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)
- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

Domestic Return Receipt

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CERTIFIED MAIL® RECEIPT
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For delivery information, visit our website at www.usps.com®.

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postmark
Here

Postage	
\$	
Total Postage and	
\$	

Sent To	
Street and Apt. No.	
City, State, ZIP+4	

Murchison Oil & Gas, Inc.
 7250 Dallas Parkway, Suite 1400
 Plano, TX 75024

PS Form 3800, 7-15

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Murchison Oil & Gas, Inc.
 7250 Dallas Parkway, Suite 1400
 Plano, TX 75024



9590 9402 4038 8079 4177 11

2. Article Number (Transfer from service label)

7018 1130 0000 6249 8819

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature		☐ Agent
X <i>Flane Bacon</i>		☐ Addressee
B. Received by (Printed Name)	C. Date of Delivery	
<i>Flane Bacon</i>	<i>9-12-14</i>	
D. Is delivery address different from item 1? ☐ Yes		
If YES, enter delivery address below: ☐ No		

3. Service Type		☐ Priority Mail Express®
☐ Adult Signature	☐ Registered Mail™	
☐ Adult Signature Restricted Delivery	☐ Registered Mail Restricted Delivery	
☒ Certified Mail®	☒ Return Receipt for Merchandise	
☐ Certified Mail Restricted Delivery	☐ Signature Confirmation™	
☐ Collect on Delivery	☐ Signature Confirmation Restricted Delivery	
☐ Collect on Delivery Restricted Delivery		
☐ Insured Mail		
☐ Insured Mail Restricted Delivery (over \$500)		

Domestic Return Receipt

U.S. Postal Service™
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For delivery information, visit our website at www.usps.com®.

Certified Mail Fee
 \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy)	\$
☐ Return Receipt (electronic)	\$
☐ Certified Mail Restricted Delivery	\$
☐ Adult Signature Required	\$
☐ Adult Signature Restricted Delivery	\$

Postage
 \$

Total Postage and
 \$

Sent To
 Street and Apt. No.
 City, State, ZIP+4

EOG Resources, Inc.
 EOG Y Resources, Inc.
 104 S. 4th Street
 Artesia, NM 88210

PS Form 3800, April 2015 PSN 7530-02-000-9053 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

EOG Resources, Inc.
 EOG Y Resources, Inc.
 104 S. 4th Street
 Artesia, NM 88210

2. Article Number (Transfer from service label)

7018 1130 0000 6249 8826

PS Form 3811, July 2015 PSN 7530-02-000-9053

COMPLETE THIS SECTION ON DELIVERY

A. Signature
Nancy H. Franco

B. Received by (Printed Name)
 NANCY H. FRANCO

C. Date of Delivery
 SEP 12 2019

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

3. Service Type

☐ Adult Signature	☐ Priority Mail Express®
☐ Adult Signature Restricted Delivery	☐ Registered Mail™
☒ Certified Mail®	☐ Registered Mail Restricted Delivery
☐ Certified Mail Restricted Delivery	☒ Return Receipt for Merchandise
☐ Collect on Delivery	☐ Signature Confirmation™
☐ Collect on Delivery Restricted Delivery	☐ Signature Confirmation Restricted Delivery
☐ Registered Mail	
☐ Registered Mail Restricted Delivery (\$500)	

Domestic Return Receipt

7018 1130 0000 6249 8833

U.S. Postal ServiceTM
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For delivery information, visit our website at www.usps.com.

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$

☐ Return Receipt (electronic) \$

☐ Certified Mail Restricted Delivery \$

☐ Adult Signature Required \$

☐ Adult Signature Restricted Delivery \$

Postage \$

Total Postage and \$

Sent To JKM Energy, LLC
 26 E. Compress Road
 Artesia, NM 88210

City, State, ZIP+4

PS Form 3800, April 2015 PSN 7530-02-000-9053

Postmark
Here

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ Complete items 1, 2, and 3. ■ 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: JKM Energy, LLC 26 E. Compress Road Artesia, NM 88210 2. Article Number (Transfer from service label) 7018 1130 0000 6249 8833	A. Signature ☒ Kenneth Matthews ☐ Agent ☐ Addressee B. Received by (Printed Name) Kenneth Matthews C. Date of Delivery 9-12-19 D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No 3. Service Type ☐ Adult Signature ☐ Priority Mail Express[®] ☐ Adult Signature Restricted Delivery ☐ Registered MailTM ☒ Certified Mail[®] ☐ Registered Mail Restricted Delivery ☐ Certified Mail Restricted Delivery ☒ Return Receipt for Merchandise ☐ Collect on Delivery ☐ Signature ConfirmationTM ☐ Collect on Delivery Restricted Delivery ☐ Signature Confirmation Restricted Delivery ☐ Insured Mail ☐ Insured Mail Restricted Delivery (over \$500)



9590 9402 4038 8079 4177 35

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

7018 1130 0000 6249 8840

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Domestic Mail Only

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Certified Mail Fee

\$

Extra Services & Fees (check box, add fee as appropriate)

- ☐ Return Receipt (hardcopy) \$
- ☐ Return Receipt (electronic) \$
- ☐ Certified Mail Restricted Delivery \$
- ☐ Adult Signature Required \$
- ☐ Adult Signature Restricted Delivery \$

Postage

\$

Total Postage and

\$

Sent To

Street and Apt. No.

City, State, ZIP+4

PS Form 3800, 1

Postmark
Here

Magnum Hunter Production, Inc.
 202 S. Cheyenne Ave, Suite 1000
 Tulsa, OK 74103

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- 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:

Magnum Hunter Production, Inc.
 202 S. Cheyenne Ave, Suite 1000
 Tulsa, OK 74103



9590 9402 4038 8079 4177 42

2. Article Number (Transfer from service label)

7018 1130 0000 6249 8840

COMPLETE THIS SECTION ON DELIVERY

A. Signature

Justin Wallace
JUSTIN WALLACE

☐ Agent

☐ Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? If YES, enter delivery address below:

☐ Yes

☐ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☒ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2015 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal ServiceTM
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Domestic Mail Only

For delivery information, visit our website at www.usps.com.

7018 1130 0000 6249 8789

Certified Mail Fee	
\$	Extra Services & Fees (check box, add fee as appropriate)
	☐ Return Receipt (hardcopy) \$
	☐ Return Receipt (electronic) \$
	☐ Certified Mail Restricted Delivery \$
	☐ Adult Signature Required \$
	☐ Adult Signature Restricted Delivery \$
Postage	
\$	Total Postage and
Sent to	
Street and Apt. No.	
City, State, Zip+4	

EOG A Resources, Inc.
PO Box 900
Artesia, NM 88211

CERTIFIED MAIL[®]



7018 1130 0000 6249 8789



EOG A Resources, Inc.
PO Box 900
Artesia, NM 88211

Handwritten signature/initials

663110422233

750 PM 0000 0000 0000 0000
0562-0876-00-00
000019219 SEP 04 2018
MAILING FROM ZIP CODE 87505

U.S. Postal ServiceTM
CERTIFIED MAIL[®] RECEIPT
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For delivery information, visit our website at www.usps.com.

Certified Mail Fee

Extra Services & Fees (attach box, add fee as appropriate)

☐ Return Receipt (hardcopy) \$ _____
☐ Return Receipt (electronic) \$ _____
☐ Certified Mail Restricted Delivery \$ _____
☐ Adult Signature Required \$ _____
☐ Adult Signature Restricted Delivery \$ _____

Postmark
Here

Postage

Total Postage and

EOG M Resources, Inc.

PO Box 840

Artesia, NM 88211

City, State, ZIP+4[®]

PS Form 3800, 10-1-06

7018 1130 0000 6249 8796

CERTIFIED MAIL



7018 1130 0000 6249 8796



EOG M Resources, Inc.
PO Box 840
Artesia, NM 88211

5544 5000 0000

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com

Certified Mail Fee

Extra Services & Fees (check box, add fee as appropriate)	
☐ Return Receipt (hardcopy)	\$ _____
☐ Return Receipt (electronic)	\$ _____
☐ Certified Mail Restricted Delivery	\$ _____
☐ Adult Signature Required	\$ _____
☐ Adult Signature Restricted Delivery	\$ _____

Postmark
Here

Total Postage and Fees \$ _____

Mobil Producing Texas/New Mexico
 PO Box 1760
 Denver City, TX 79323

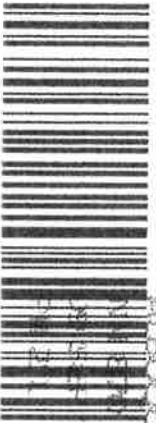
PS Form 3800, April 2015 PSN 7530-02-000-9000

See How to Use for Instructions

7018 1130 0000 6249 8857

PO BOX 1760
 DENVER CITY, TX 79323

CERTIFIED MAIL®



7018 1130 0000 6249 8857



UNITED STATES POSTAGE
 PINEY BOWES
 \$006.80
 00057979 SEP 09 2013
 MAILED FROM ZIP CODE 79323

Mobil Producing Texas/New Mexico
 PO Box 1760
 Denver City, TX 79323

62

79323-1760
 87504-2323