



RECEIVED  
2008 SEP 15 PM 2 38

New Mexico Oil Conservation Division  
Attn. Richard Ezeanyim  
1220 South St. Francis Drive  
Santa Fe, NM 87505

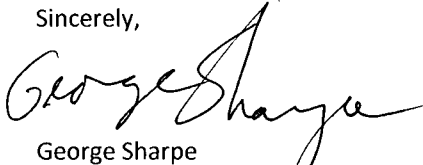
Re: NMOCD Case No. 14163  
Application of Merrion Oil & Gas Corporation for Compulsory Pooling

Gentlemen:

Enclosed please find Affidavit of Briana Campbell, with four (4) exhibits attached. Merrion Oil & Gas Corporation requests that the Affidavit, with attachments, be admitted as evidence in Case No. 14163 and that the record applicable to Case No. 14163 be supplemented accordingly.

Please let me know if you have any questions regarding this submission. My phone number is 505-324-5314.

Sincerely,

  
George Sharpe  
Manager, Oil and Gas Development

AFFIDAVIT

STATE OF NEW MEXICO )  
                                  ) ss.  
COUNTY OF SAN JUAN )

Briana Campbell, being first duly sworn, states as follows:

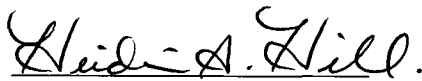
1. I am employed as a lease analyst in the Land Department of Merrion Oil & Gas Corporation (MOG).
2. MOG is the Applicant in New Mexico Oil Conservation Division (NMOCD) Case No. 14163.
3. NMOCD Case No. 14163 – an application for compulsory pooling – was heard by the NMOCD Hearing Examiner on August 21, 2008.
4. At the conclusion of the hearing on August 21, 2008, the Hearing Examiner continued the hearing until September 18, 2008 and directed MOG to provide notice of the continuation to all persons entitled to notice pursuant to the rules of the NMOCD.
5. By certified – return receipt requested letter dated August 25, 2008, a copy of which is attached hereto as Exhibit No. 1, MOG provided to all uncommitted interest owners written notification of the continuance of NMOCD Case No. 14163. A list of the names of those interest owners, together with their last known mailing address and a copy of the signed return receipt, if applicable, is attached hereto as Exhibit No. 2.
6. In addition to the certified letter dated August 25, 2008, MOG published notice of the continuance of NMOCD Case No. 14163 in the Farmington Daily Times. A copy of the legal advertisement is attached hereto as Exhibit No. 3 and a copy of an Affidavit of Publication is attached hereto as Exhibit No. 4.
7. MOG conducted a good faith, diligent effort to find the correct addresses for all persons entitled to notice pursuant to the rules of the NMOCD.
8. MOG has given notice at the correct address for each person entitled to notice or has notified each such person by publication, all as required by 19.15.14.1210 NMAC.
9. Based on the foregoing, MOG has complied with the notice provisions of 19.15.14.1210 NMAC.

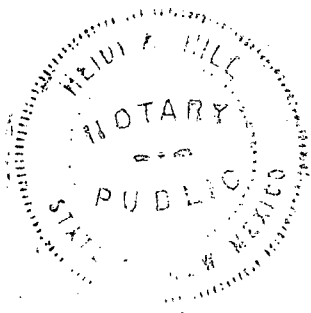
Dated this 11<sup>th</sup> day of September, 2008

  
Briana Campbell

Subscribed and sworn to before me this 11<sup>th</sup> day of September, 2008.

10-20-2008  
My commission expires:

  
Notary Public





August 25, 2008

7007 1490 0005 0869 0701  
CERTIFIED RETURN RECEIPT REQUESTED

**RE: NOTIFICATION OF CONTINUATION OF CASE # 14163  
APPLICATION OF MERRION OIL AND GAS CORP  
FOR COMPULSORY POOLING - WESTLAND PARK #1 AND #2 WELLS  
BASIN FRUITLAND COAL GAS POOL  
N/2 SECTION 18, T29N, R13W  
SAN JUAN COUNTY, NEW MEXICO**

To Uncommitted Interest Owners:

By certified letter dated June 18, 2008 you were advised that Merrion Oil & Gas Corp. (Merrion) intended to drill the subject wells. The letter outlined various options as to what you might do with your interest in the spacing unit. Those options are still available to you.

In that letter, Merrion advised that the above referenced case had been set for hearing before the New Mexico Oil Conservation Division (NMOCD) on August 7, 2008. Merrion subsequently requested that the hearing be continued to the August 21, 2008 docket of the NMOCD. Merrion presented the subject case at the NMOCD Examiner Hearing on August 21, 2008. The Hearing Examiner received testimony and evidence, but continued the case until the September 18, 2008 docket of the NMOCD, and directed Merrion to provide all uncommitted interest owners with written notification of the continuance.

The purpose of this letter, therefore, is to advise you of the continuance and to further advise you that you may participate in the hearing on this application by appearing at 8:15 a.m. on September 18, 2008 at the NMOCD hearing room located at 1220 S. St. Francis Dr., Santa Fe, NM 87505. If you decide to participate at the hearing, the rules of the NMOCD require that you file a pre-hearing statement at the same address not later than 5:00 pm on Thursday, September 11, 2008.

If you have any questions about the process or concerns about our application, please call me at the number below, or call the NMOCD at 505-476-3483.

Sincerely,

A handwritten signature in black ink that reads "Briana Campbell". The signature is written in a cursive, flowing style.

Briana Campbell  
Land Analyst  
505-324-5325  
bcampbell@merrion.bz


N½ Section 18, Township 29 North, Range 13 West, San Juan County NM


Sent Certified letters out on August 25, 2008

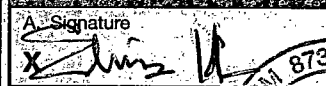
| <b>Name</b>                         | <b>Address</b>        | <b>City</b> | <b>State</b> | <b>Zip</b> |
|-------------------------------------|-----------------------|-------------|--------------|------------|
| <b>Uncommitted Leasehold Owners</b> |                       |             |              |            |
| Synergy Operating LLC               | P O Box 5513          | Farmington  | NM           | 87499      |
| XTO Energy Inc                      | 810 Houston Street    | Fort Worth  | TX           | 76102      |
| <b>Uncommitted Mineral Owners</b>   |                       |             |              |            |
| Billy Harris                        | 2706 La Salle St      | Farmington  | NM           | 87401      |
| BS Enterprises                      | 101 E. Main St        | Farmington  | NM           | 87401      |
| Anna Chacon                         | 308 La Belle Ave      | Farmington  | NM           | 87401      |
| Gary Clichee                        | 302 La Crosse Ave     | Farmington  | NM           | 87401      |
| Carol Cooper                        | 308 La Cuesta Ave     | Farmington  | NM           | 87401      |
| DBL Systems 7 LLC                   | 3801 W Clarendon      | Phoenix     | AZ           | 85019      |
| Jonathon & Ivy Dufree               | 305 La Belle Ave      | Farmington  | NM           | 87401      |
| Anthony Espinosa                    | 2802 La Puerta St     | Farmington  | NM           | 87401      |
| Norman & Martha Faver Rev Trust     | 1028 West Main St     | Farmington  | NM           | 87401      |
| Bonnie Frazer                       | 1923 Glade Rd         | Farmington  | NM           | 87401      |
| Humberto Frias                      | 2904 La Puerta St     | Farmington  | NM           | 87401      |
| Joseph Garcia                       | 308 La Crosse Ave     | Farmington  | NM           | 87401      |
| Steve & Wendy Gardenhire            | 2704 La Salle St      | Farmington  | NM           | 87401      |
| Mary Mae Goodding Trust             | 2311 W. Apache        | Farmington  | NM           | 87401      |
| John Haxton                         | 303 La Belle Ave      | Farmington  | NM           | 87401      |
| Jones Hewey                         | 2705 La Salle St      | Farmington  | NM           | 87401      |
| Jon Jacobson                        | 2900 La Puerta St     | Farmington  | NM           | 87401      |
| Peter Kakos                         | 307 La Belle Ave      | Farmington  | NM           | 87401      |
| Peter Klug                          | 3507 E Campo Bello Dr | Phoenix     | AZ           | 85032      |
| Katherine La Rue                    | 2708 La Salle St      | Farmington  | NM           | 87401      |
| Terry Ladwig                        | P.O. Box 926          | Kamuela     | HI           | 96743      |
| Richard Lanzi                       | 2712 La Salle St      | Farmington  | NM           | 87401      |
| Max Lare                            | 2600 Ridgeview Dr     | Farmington  | NM           | 87401      |

| Name                                   | Address                 | City            | State | Zip   |
|--|-------------------------|-----------------|-------|-------|
| Wesley Latin                           | 301 La Belle Ave        | Farmington      | NM    | 87401 |
| Lechuga Transportation                 | 2501 W Main             | Farmington      | NM    | 87401 |
| Christine Maestas                      | 2802 La Salle St        | Farmington      | NM    | 87401 |
| Anthony Marinaro                       | 306 La Cuesta Ave       | Farmington      | NM    | 87401 |
| Alfredo & Reyna Martinez               | 2710 La Salle St        | Farmington      | NM    | 87401 |
| Samuel Medrano                         | 303 La Crosse Ave       | Farmington      | NM    | 87401 |
| Carl Mitchell                          | 309 La Crosse Ave       | Farmington      | NM    | 87401 |
| Navajo Shopping Center                 | P O Box 77              | Gamero          | NM    | 87317 |
| NM Department of Transportation        | 1120 Cerrillos Road     | Santa Fe        | NM    | 87504 |
| Northern Properties I LLC Attn Wendy's | 1515 N. Academy Blvd, # | Colorado Spring | CO    | 80909 |
| Nygren Investment                      | 816 Crestview Dr        | Farmington      | NM    | 87401 |
| Nancy Olguin & Angel Miguel            | 2805 La Salle           | Farmington      | NM    | 87401 |
| Richard Ramos                          | 2712 La Puente St       | Farmington      | NM    | 87401 |
| Jose Alberto & Justina Ponce           | 309 La Belle Ave        | Farmington      | NM    | 87401 |
| Richard Potter                         | 306 La Belle Ave        | Farmington      | NM    | 87401 |
| Leroy Riley                            | 2403 Riverside          | Farmington      | NM    | 87401 |
| Nazario & Lucinda Salazar              | 310 La Cuesta Ave       | Farmington      | NM    | 87401 |
| T C & Sharon Shaffer                   | 2401 Ridgeview Dr       | Farmington      | NM    | 87401 |
| Charles Sherman                        | 307 La Crosse Ave       | Farmington      | NM    | 87401 |
| Scott & Tammi Stimson                  | 2714 La Salle St        | Farmington      | NM    | 87401 |
| Thomas Strange                         | 301 La Crosse Ave       | Farmington      | NM    | 87401 |
| Tres Tse Rocks LLC                     | P O Box 3015            | Durango         | CO    | 81302 |
| Achille Vitali                         | 2708 La Puente St       | Farmington      | NM    | 87401 |
| T K Webster                            | PO Box 5981             | Farmington      | NM    | 87401 |
| Western Refining Inc                   | 123 W Mills Ave         | El Paso         | TX    | 79901 |
| William Woodall Jr                     | 2703 La Salle St        | Farmington      | NM    | 87401 |
| Christine Wright                       | 100 Hidden Acres Dr     | Farmington      | NM    | 87401 |

NMOCD Examiner Hearing September 18, 2008  
Docket # 30-08  
Case # 14163  
Exhibit #2  
Copies of Return Receipts

| SENDER: COMPLETE THIS SECTION  |  | COMPLETE THIS SECTION ON DELIVERY  |   |
|--|--|--|---|
| <input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.<br><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.<br><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits. |  | A. Signature<br><br><input type="checkbox"/> Agent<br><input type="checkbox"/> Addressee   |   |
| 1. Article Addressed to:<br><br>XTO Energy Inc<br>810 Houston Street<br>Fort Worth, TX 76102   |  | B. Received by (Printed Name)<br><br>C. Date of Delivery<br>AUG 28 2008  | D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No |
| 2. Article Number<br>(Transfer from service label)   |  | 3. Service Type<br><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. |   |
|  |  | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes   |   |
| PS Form 3811, February 2004  |  | Domestic Return Receipt 102595-02-M-154  |   |

| SENDER: COMPLETE THIS SECTION  |  | COMPLETE THIS SECTION ON DELIVERY  |   |
|--|--|--|---|
| <input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.<br><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.<br><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits. |  | A. Signature<br><br><input type="checkbox"/> Agent<br><input type="checkbox"/> Addressee  |   |
| 1. Article Addressed to:<br><br>Synergy Operating LLC<br>P.O. Box 5513<br>Farmington, NM 87499   |  | B. Received by (Printed Name)<br>Jennifer Thomason<br>C. Date of Delivery<br>8/27/08   | D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No |
| 2. Article Number<br>(Transfer from service label)   |  | 3. Service Type<br><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. |   |
|  |  | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes   |   |
| PS Form 3811, February 2004  |  | Domestic Return Receipt 102595-02-M-154  |   |

| SENDER: COMPLETE THIS SECTION  |  | COMPLETE THIS SECTION ON DELIVERY  |   |
|--|--|--|---|
| <input checked="" type="checkbox"/> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.<br><input checked="" type="checkbox"/> Print your name and address on the reverse so that we can return the card to you.<br><input checked="" type="checkbox"/> Attach this card to the back of the mailpiece, or on the front if space permits. |  | A. Signature<br><br><input type="checkbox"/> Agent<br><input type="checkbox"/> Addressee  |   |
| 1. Article Addressed to:<br><br>Navajo Shopping Center<br>P.O. Box 77<br>Gamerco, NM 87317   |  | B. Received by (Printed Name)<br><br>C. Date of Delivery<br>8/27/08  | D. Is delivery address different from item 1? <input type="checkbox"/> Yes<br>If YES, enter delivery address below: <input type="checkbox"/> No |
| 2. Article Number<br>(Transfer from service label)   |  | 3. Service Type<br><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail<br><input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise<br><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. |   |
|  |  | 4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes   |   |
| PS Form 3811, February 2004  |  | Domestic Return Receipt 102595-02-M-154  |   |

## 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:

Tres Tse Rocks LLC  
P O Box 3015  
Durango, CO 81302

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8159

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

*[Signature]* ☒ Agent ☒ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

SPUCE M. DARRARD 8/24

- 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:

Richard Potter  
306 La Belle Ave  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8074

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

*[Signature]* ☐ Agent ☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

Georgia R Cortez

- 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:

BS Enterprises  
101 E. Main St  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0466

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

*[Signature]* ☐ Agent ☐ Addressee

## B. Received by (Printed Name)

## C. Date of Delivery

Robert [Signature]

- 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:

Carol Cooper  
308 La Cuesta Ave  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0497

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X Carol J Cooper

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Carol J Cooper

## C. Date of Delivery

D. Is delivery address different from item 1? ☐ YesIf 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:

Jon Jacobson  
2900 La Puente St  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0619

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X Jon M. Jacobson

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Jon M. Jacobson

## C. Date of Delivery

8/26

D. Is delivery address different from item 1? ☐ YesIf 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:

Nazario & Lucinda Salazar  
310 La Cuesta Ave  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8098

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X Nazario &amp; Lucinda Salazar

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Nazario &amp; Lucinda Salazar

## C. Date of Delivery

8/26

D. Is delivery address different from item 1? ☐ YesIf 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:

Steve & Wendy Gardenhire  
2704 La Salle St  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0572

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-11

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☒ Steve Gardenhire ☐ Agent  
☐ Addressed

B. Received by (Printed Name)

Steve Gardenhire 8/26

C. Date of Delivery

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:

John Haxton  
303 La Belle Ave  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0596

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☒ John Haxton ☐ Agent  
☐ Addressed

B. Received by (Printed Name)

John Haxton 8/26

C. Date of Delivery

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:

Jones Hewey  
2705 La Salle St  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0602

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

☒ Warren Hewey ☐ Agent  
☐ Addressed

B. Received by (Printed Name)

Warren Hewey 8/26

C. Date of Delivery

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:

Alfredo & Reyna Martinez  
2710 La Salle St  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0725

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:

Scott & Tammi Stimson  
2714 La Salle St  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8128

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:

Anthony Marinaro  
306 La Cuesta Ave  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0718

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Yarema*☐ Agent☐ Addressee

## B. Received by (Printed Name)

Marta J. J. J.

## C. Date of Delivery

8/26

## 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

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Scott Stimson*☐ Agent☐ Addressee

## B. Received by (Printed Name)

Scott Stimson

## C. Date of Delivery

8/26

## 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

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Judy MARINARO*☐ Agent☐ Addressee

## B. Received by (Printed Name)

Judy

## C. Date of Delivery

8/26

## 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:

Leroy Riley  
2403 Riverside  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8081

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1541

## 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 item 1? ☐ YesIf 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:

Nygren Investment  
816 Crestview Dr  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 0122

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## 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 item 1? ☐ YesIf 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:

Carl Mitchell  
309 La Crosse Ave  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0749

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1541

## 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 item 1? ☐ YesIf 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:

Thomas Strang e  
 301 La Crosse Ave  
 Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8135

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

## COMPLETE THIS SECTION ON DELIVERY

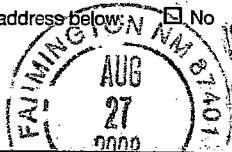
## A. Signature

X *[Signature]*☐ Agent☐ Addressee

## B. Received by (Printed Name)

I. Strang e

## C. Date of Deliver

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

## 3. Service Type

☒ Certified Mail☐ Express Mail PS☐ Registered☒ Return Receipt for Merchandis☐ 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:

Lechuga Transporation  
 2501 W Main  
 Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0695

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

## COMPLETE THIS SECTION ON DELIVERY

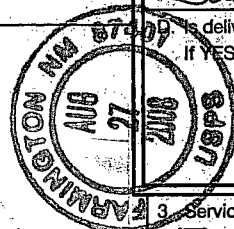
## A. Signature

X *[Signature]*☐ Agent☐ Addressee

## B. Received by (Printed Name)

Sudi Kemp

## C. Date of Deliver

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

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandis☐ 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:

Max Lar e  
 2600 Ridgeview Dr  
 Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0671

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *[Signature]*☐ Agent☐ Addressee

## B. Received by (Printed Name)

Max Lar e

## C. Date of Deliver

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

## 3. Service Type

☒ Certified Mail☐ Express Mail☐ Registered☒ Return Receipt for Merchandis☐ 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:

Peter Klug  
3507 E Campo Bello Dr  
Phoenix, AZ 85032

2. Article

(M)

PS F

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent  
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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.

☐ Yes

102595-02-M-15

## 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:

Northern Properties I LLC Attn Wendy's  
1515 N. Academy Blvd, #400  
Colorado Springs, CO 80909

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0787

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

## 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:

Western Refining Inc  
123 W Mills Ave  
El Paso, TX 79901

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

☐ Agent  
☐ Address

B. Received by (Printed Name)

C. Date of Delivery

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

(Transfer from service label)

7007 1490 0005 0868 8197

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

## 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:

Jose Alberto & Justina Ponce  
 309 La Belle Ave  
 Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8067

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:

Mary Mae Goodding Trust  
 2311 W. Apache  
 Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0589

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:

Katherine La Rue  
 2708 La Salle St  
 Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0640

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Justina Ponce*
☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

*Justina Ponce*

## C. Date of Delivery

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

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Clinton Goodding*
☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

*Clinton Goodding*

## C. Date of Delivery

8-29

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

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X *Katherine La Rue*
☐ Agent  
☒ Addressee

## B. Received by (Printed Name)

*K La Rue*

## C. Date of Delivery

8-30-08

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:

DBL Systems 7 LLC  
3801 W Clarendon  
Phoenix, AZ 85019

2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0503

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-15

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Krystal Baddy

☐ Agent☐ Addressee

B. Received by (Printed Name)

Krystal Baddy

C. Date of Delivery

8-28-8

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:

Norman & Martha Faver Rev Trust  
1028 West Main St  
Farmington, NM 87401

2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0534

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

John Achule

☐ Agent☐ Addressee

B. Received by (Printed Name)

John Achule

C. Date of Delivery

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:

Achille Vitali  
2708 La Puente St  
Farmington, NM 87401

2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8166

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

Teresa Vitali

☐ Agent☐ Addressee

B. Received by (Printed Name)

Teresa Vitali

C. Date of Delivery

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:

Anthony Espinosa  
2802 La Puente St  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0527

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

Espinoza

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Kim Espinosa

## C. Date of Delivery

8/26

D. Is delivery address different from item 1? ☐ YesIf 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:

Charles Sherman  
307 La Crosse Ave  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0868 8111

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

C Sherman

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Charles A Sherman

## C. Date of Delivery

8/26

D. Is delivery address different from item 1? ☐ YesIf 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:

Gary Clichee  
302 La Crosse Ave  
Farmington, NM 87401

## 2. Article Number

(Transfer from service label)

7007 1490 0005 0869 0480

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-154

## COMPLETE THIS SECTION ON DELIVERY

## A. Signature

X

Gary Clichee

☐ Agent☐ Addressee

## B. Received by (Printed Name)

Gary Clichee

## C. Date of Delivery

8/26

D. Is delivery address different from item 1? ☐ YesIf 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



7007 1490 0005 0869 0510

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|   |        |                  |
|---|--------|------------------|
| Postage   | \$     | Postmark<br>Here |
| Certified Fee                                     |        |                  |
| Return Receipt Fee<br>(Endorsement Required)      |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required) |        |                  |
| Total Postage & Fees                              | \$5.32 |                  |

8-25-08

Sent To  
Jonathon & Ivy Durfee  
Street, Apt. No., or PO Box No. 305 La Belle  
City, State, ZIP+4 Farmington, NM 87401

PS Form 3800, August 2006 See Reverse for Instructions

7007 1490 0005 0869 0473

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|   |        |                  |
|---|--------|------------------|
| Postage   | \$     | Postmark<br>Here |
| Certified Fee                                     |        |                  |
| Return Receipt Fee<br>(Endorsement Required)      |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required) |        |                  |
| Total Postage & Fees                              | \$5.32 |                  |

8-25-08

Sent To  
Anna Chacon  
Street, Apt. No., or PO Box No. 308 La Belle Ave  
City, State, ZIP+4 Farmington, NM 87401

PS Form 3800, August 2006 See Reverse for Instructions

7007 1490 0005 0869 0565

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|   |        |                  |
|---|--------|------------------|
| Postage   | \$     | Postmark<br>Here |
| Certified Fee                                     |        |                  |
| Return Receipt Fee<br>(Endorsement Required)      |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required) |        |                  |
| Total Postage & Fees                              | \$5.32 |                  |

8-25-08

Sent To  
Joseph Garcia  
Street, Apt. No., or PO Box No. 308 La Crosse  
City, State, ZIP+4 Farmington, NM 87401

PS Form 3800, August 2006 See Reverse for Instructions

7007 1490 0005 0869 0541

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|   |        |                  |
|---|--------|------------------|
| Postage   | \$     | Postmark<br>Here |
| Certified Fee                                     |        |                  |
| Return Receipt Fee<br>(Endorsement Required)      |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required) |        |                  |
| Total Postage & Fees                              | \$5.32 |                  |

8-25-08

Sent To  
Bonnie Frazer  
Street, Apt. No., or PO Box No. 1923 Glade Rd.  
City, State, ZIP+4 Farmington, NM 87401

PS Form 3800, August 2006 See Reverse for Instructions

7007 1490 0005 0869 0626

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|   |        |                  |
|---|--------|------------------|
| Postage   | \$     | Postmark<br>Here |
| Certified Fee                                     |        |                  |
| Return Receipt Fee<br>(Endorsement Required)      |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required) |        |                  |
| Total Postage & Fees                              | \$5.32 |                  |

8-25-08

Sent To  
Peter Kakas  
Street, Apt. No., or PO Box No. 301 La Belle Ave  
City, State, ZIP+4 Farmington, NM 87401

PS Form 3800, August 2006 See Reverse for Instructions

7007 1490 0005 0869 0558

U.S. Postal Service  
**CERTIFIED MAIL RECEIPT**  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|   |        |                  |
|---|--------|------------------|
| Postage   | \$     | Postmark<br>Here |
| Certified Fee                                     |        |                  |
| Return Receipt Fee<br>(Endorsement Required)      |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required) |        |                  |
| Total Postage & Fees                              | \$5.32 |                  |

8-25-08

Sent To  
Humberto Frias  
Street, Apt. No., or PO Box No. 2904 La Puente  
City, State, ZIP+4 Farmington, NM 87401

PS Form 3800, August 2006 See Reverse for Instructions

7007 1490 0005 0868 8050

|  |        |                  |
|--|--------|------------------|
| U.S. Postal Service<br><b>CERTIFIED MAIL RECEIPT</b><br>(Domestic Mail Only; No Insurance Coverage Provided) |        |                  |
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>                 |        |                  |
| <b>OFFICIAL USE</b>  |        |                  |
| Postage  | \$     | Postmark<br>Here |
| Certified Fee  |        |                  |
| Return Receipt Fee<br>(Endorsement Required)   |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required)  |        |                  |
| Total Postage & Fees   | \$5.32 |                  |
| Sent To <b>Richard Ramos</b>   |        |                  |
| Street, Apt. No.,<br>or PO Box No. <b>2712 La Puerta</b>   |        |                  |
| City, State, ZIP+4 <b>Farmington, NM 87401</b>   |        |                  |
| PS Form 3800, August 2006 See Reverse for Instructions   |        |                  |

7007 1490 0005 0869 0770

|  |        |                  |
|--|--------|------------------|
| U.S. Postal Service<br><b>CERTIFIED MAIL RECEIPT</b><br>(Domestic Mail Only; No Insurance Coverage Provided) |        |                  |
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>                 |        |                  |
| <b>OFFICIAL USE</b>  |        |                  |
| Postage  | \$     | Postmark<br>Here |
| Certified Fee  |        |                  |
| Return Receipt Fee<br>(Endorsement Required)   |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required)  |        |                  |
| Total Postage & Fees   | \$5.32 |                  |
| Sent To <b>Nancy Olquin &amp; Angel Miguel</b>   |        |                  |
| Street, Apt. No.,<br>or PO Box No. <b>2805 La Salle</b>  |        |                  |
| City, State, ZIP+4 <b>Farmington, NM 87401</b>   |        |                  |
| PS Form 3800, August 2006 See Reverse for Instructions   |        |                  |

7007 1490 0005 0869 0688

|  |        |                  |
|--|--------|------------------|
| U.S. Postal Service<br><b>CERTIFIED MAIL RECEIPT</b><br>(Domestic Mail Only; No Insurance Coverage Provided) |        |                  |
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>                 |        |                  |
| <b>OFFICIAL USE</b>  |        |                  |
| Postage  | \$     | Postmark<br>Here |
| Certified Fee  |        |                  |
| Return Receipt Fee<br>(Endorsement Required)   |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required)  |        |                  |
| Total Postage & Fees   | \$5.32 |                  |
| Sent To <b>Wesley &amp; Lattin</b>   |        |                  |
| Street, Apt. No.,<br>or PO Box No. <b>301 La Belle</b>   |        |                  |
| City, State, ZIP+4 <b>Farmington, NM 87401</b>   |        |                  |
| PS Form 3800, August 2006 See Reverse for Instructions   |        |                  |

7007 1490 0005 0868 8180

|  |        |                  |
|--|--------|------------------|
| U.S. Postal Service<br><b>CERTIFIED MAIL RECEIPT</b><br>(Domestic Mail Only; No Insurance Coverage Provided) |        |                  |
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>                 |        |                  |
| <b>OFFICIAL USE</b>  |        |                  |
| Postage  | \$     | Postmark<br>Here |
| Certified Fee  |        |                  |
| Return Receipt Fee<br>(Endorsement Required)   |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required)  |        |                  |
| Total Postage & Fees   | \$5.32 |                  |
| Sent To <b>William Woodhall</b>  |        |                  |
| Street, Apt. No.,<br>or PO Box No. <b>2703 La Salle</b>  |        |                  |
| City, State, ZIP+4 <b>Farmington, NM 87401</b>   |        |                  |
| PS Form 3800, August 2006 See Reverse for Instructions   |        |                  |

7007 1490 0005 0868 8173

|  |        |                  |
|--|--------|------------------|
| U.S. Postal Service<br><b>CERTIFIED MAIL RECEIPT</b><br>(Domestic Mail Only; No Insurance Coverage Provided) |        |                  |
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>                 |        |                  |
| <b>OFFICIAL USE</b>  |        |                  |
| Postage  | \$     | Postmark<br>Here |
| Certified Fee  |        |                  |
| Return Receipt Fee<br>(Endorsement Required)   |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required)  |        |                  |
| Total Postage & Fees   | \$5.32 |                  |
| Sent To <b>T. K. Webster</b>   |        |                  |
| Street, Apt. No.,<br>or PO Box No. <b>P.O. Box 5981</b>  |        |                  |
| City, State, ZIP+4 <b>Farmington, NM 87499</b>   |        |                  |
| PS Form 3800, August 2006 See Reverse for Instructions   |        |                  |

7007 1490 0005 0868 8104

|  |        |                  |
|--|--------|------------------|
| U.S. Postal Service<br><b>CERTIFIED MAIL RECEIPT</b><br>(Domestic Mail Only; No Insurance Coverage Provided) |        |                  |
| For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a>                 |        |                  |
| <b>OFFICIAL USE</b>  |        |                  |
| Postage  | \$     | Postmark<br>Here |
| Certified Fee  |        |                  |
| Return Receipt Fee<br>(Endorsement Required)   |        |                  |
| Restricted Delivery Fee<br>(Endorsement Required)  |        |                  |
| Total Postage & Fees   | \$5.32 |                  |
| Sent To <b>T.C. &amp; Sharon Shaffer</b>   |        |                  |
| Street, Apt. No.,<br>or PO Box No. <b>2401 Ridgeway</b>  |        |                  |
| City, State, ZIP+4 <b>Farmington, NM 87401</b>   |        |                  |
| PS Form 3800, August 2006 See Reverse for Instructions   |        |                  |

U.S. Postal Service  
**CERTIFIED MAIL - RECEIPT**  
(Domestic Mail Only, No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

|   |        |
|---|--------|
| Postage   | \$     |
| Certified Fee                                     |        |
| Return Receipt Fee<br>(Endorsement Required)      |        |
| Restricted Delivery Fee<br>(Endorsement Required) |        |
| Total Postage & Fees                              | \$5.32 |

Postmark  
Here

8-25-08

Sent To Richard Lanzi  
Street, Apt. No.,  
or PO Box No. 2712 Le Salle  
City, State, ZIP+4 Farmington, NM 87401

PS Form 3800, August 2006

See Reverse for Instructions

7007 1490 0005 0869 0664

## CLASSIFIEDS

Legal Notices

152

Legal Notices

152

**NOTIFICATION OF CONTINUATION  
OF CASE #14163  
APPLICATION OF MERRION OIL  
AND GAS CORP.  
FOR COMPULSORY POOLING  
WESTLAND PARK #1 AND #2 WELLS  
BASIN FRUITLAND COAL GAS POOL  
N/2 SECTION 18, T29N, R13W  
SAN JUAN COUNTY, NEW MEXICO**

To: All Uncommitted Interest Owners

Merrion Oil and Gas Corp. presented the subject case at the New Mexico Oil Conservation Division (NMOCD) Examiner Hearing on August 21, 2008. The Hearing Examiner received testimony and evidence, but continued the case until the September 18, 2008 docket of the NMOCD, and directed Merrion to provide all uncommitted interest owners with written notification of the continuance.

Interested parties may participate in the hearing on this application by appearing at 8:15 a.m. on September 18, 2008 at the NMOCD hearing room located at 1220 S. St. Francis Dr., Santa Fe, NM 87505. The rules of the NMOCD require that any party desiring to participate in the hearing file a pre-hearing statement at the same address not later than 5:00 p.m. on Thursday, September 11, 2008. Questions about the compulsory pooling process or about the application in this case may be directed to Briana Campbell at Merrion at 324-5325, or to the NMOCD at 505-476-3483.

Legal No. 60642 published in The Daily Times, Farmington, New Mexico, on Thursday September 04, 2008.

## AFFIDAVIT OF PUBLICATION

Ad No. 60642

### STATE OF NEW MEXICO County of San Juan:

BOB WALLER, being duly sworn says: That he is the CLASSIFIED MANAGER of THE DAILY TIMES, a daily newspaper of general circulation published in English at Farmington, said county and state, and that the hereto attached Legal Notice was published in a regular and entire issue of the said DAILY TIMES, a daily newspaper duly qualified for the purpose within the meaning of Chapter 167 of the 1937 Session Laws of the State of New Mexico for publication and appeared in the Internet at The Daily Times web site on the following day(s):

Thursday September 4, 2008

And the cost of the publication is \$84.00

ON 9/09/08 BOB WALLER appeared before me, whom I know personally to be the person who signed the above document.

Christine Sellers

My Commission expires November 05, 2011

### COPY OF PUBLICATION

NOTIFICATION OF CONTINUATION  
OF CASE #14163  
APPLICATION OF MERRION OIL  
AND GAS CORP.  
FOR COMPULSORY POOLING  
WESTLAND PARK #1 AND #2 WELLS  
BASIN FRUITLAND COAL GAS POOL  
N/2 SECTION 18, T29N, R13W  
SAN JUAN COUNTY, NEW MEXICO

To: All Uncommitted Interest Owners

Merrion Oil and Gas Corp. presented the subject case at the New Mexico Oil Conservation Division (NMOCD) Examiner Hearing on August 21, 2008. The Hearing Examiner received testimony and evidence, but continued the case until the September 18, 2008 docket of the NMOCD, and directed Merrion to provide all uncommitted interest owners with written notification of the continuance.

Interested parties may participate in the hearing on this application by appearing at 8:15 a.m. on September 18, 2008 at the NMOCD hearing room, located at 1220 S. St. Francis Dr., Santa Fe, NM 87505. The rules of the NMOCD require that any party desiring to participate in the hearing file a pre-hearing statement at the same address not later than 5:00 pm on Thursday, September 11, 2008. Questions about the compulsory pooling process or about the application in this case may be directed to Briana Campbell at Merrion at 324-5325, or to the NMOCD at 505-476-3483.

Legal No. 60642 published in The Daily Times, Farmington, New Mexico on Thursday September 04, 2008