

GONZALES 31 FEDERAL #6Y

SAGA PETROLEUM P 329 365 309 5-6-98
415 S. WALL, STE. 835
MIDLAND, TX 79701

MATADOR PETROL. P 329 365 310 5-6-98
415 W. WALL, STE. 1101
MIDLAND, TX 79701

ANNETTE O. MARTIN TRUST P 329 365 272 5-6-98
8516 STONE HARBOR CT.
LAS VEGAS, NV. 89129

OCD – HOBBS P 329 365 292 5-19-98
PO BOX 1980
HOBBS, NM 88240

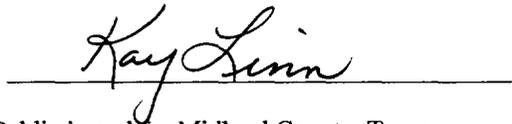
OCD – SANTA FE P 329 365 291 5-19-98
2040 S. PACHECO
SANTA FE, NM 87505

BLM – HOBBS P 329 365 279 8-14-98
414 W. TAYLOR
HOBBS, NM 88240

A complete Application For Authorization to Inject on the **GONZALES 31 FEDERAL #6Y** was mailed to the above.

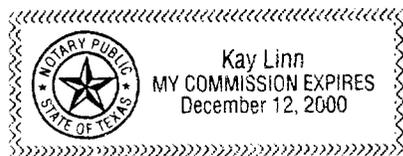

Signature of Affiant

Subscribed and sworn to before me this day of August 17, 1998.



Notary Public in and for Midland County, Texas.

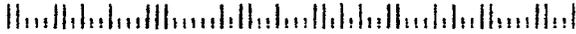
My Commission Expires



• Print your name, address, and ZIP Code in this box •

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

SAGA PETROLEUM
415 S. WALL, STE. 835
MIDLAND, TX 79701

4a. Article Number

P329365309

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5-7-98

5. Received By: (Print Name)

Jean Marchbanks

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

6. Signature: (Addressee or Agent)

X Jean Marchbanks

Thank you for using Return Receipt Service.

is your BUSINESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
 - 2. Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

SAGA PETROLEUM
415 S. WALL, STE. 835
MIDLAND, TX 79701

4a. Article Number

1329365309

4b. Service Type

- Registered
- Certified
- Express Mail
- Insured
- Return Receipt for Merchandise
- COD

7. Date of Delivery

3 7 98

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

5. Received By: (Print Name)

J dan Marchbanks

6. Signature: (Addressee or Agent)

X J dan Marchbanks

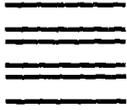
PS Form 3811, December 1994

102946-97-B-0179

Domestic Return Receipt

Thank you for using Return Receipt Service.

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield

5-8-94



SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

MATADOR PETROLEUM CORP.
415 W. WALL ST. STE. 1101
MIDLAND, TX 79701

4a. Article Number

P329365310

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

7. Date of Delivery

5-8-94

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X Sherry Cooker

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
 2. Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

MATADOR PETROLEUM CORP.
415 W. WALL ST. STE. 1101
MIDLAND, TX 79701

4a. Article Number

P329365310

4b. Service Type

- Registered
- Express Mail
- Return Receipt for Merchandise
- Certified
- Insured
- COD

7. Date of Delivery

5-8-98

5. Received By: (Print Name)

6. Signature (Addressee or Agent)

X *Mersey Cook*

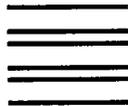
8. Addressee's Address (Only if requested and fee is paid)

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

● Print your name, address, and ZIP Code in this box ●

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



DELIVERY ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
- Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:
Annette O. Martin Trust
8516 Stone Harbor Ct.
Las Vegas, NV 89129

4a. Article Number
P329365272

4b. Service Type

<input type="checkbox"/> Registered	<input checked="" type="checkbox"/> Certified
<input type="checkbox"/> Express Mail	<input type="checkbox"/> Insured
<input type="checkbox"/> Return Receipt for Merchandise	<input type="checkbox"/> COD

7. Date of Delivery
6-5-12-98

5. Received By: (Print Name)

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

6. Signature (Addressee or Agent)
X Annette Martin

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- Addressee's Address
 - Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

Annette O. Martin Trust
8516 Stone Harbor Ct.
Las Vegas, NV 89129

4a. Article Number

8329365272

4b. Service Type

- Registered
- Express Mail
- Return Receipt for Merchandise
- CC:D

7. Date of Delivery

12/16/94

5. Received By: (Print Name)

X *Annette O. Martin*

6. Signature (Addresssee or Addressee)

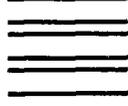
8. Addressee's Address (Only if requested and fee is paid)

Domestic Return Receipt

10/25/95-9/1/97-0179

PS Form 3811, December 1994

UNITED STATES POSTAL SERVICE

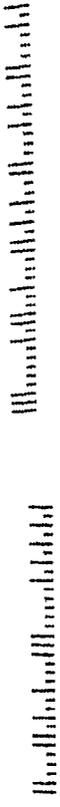


First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield





First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
- 2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

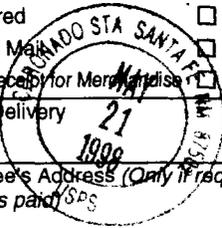
OCD
P. O. BOX 1980
HOBBS, NM 88240

4a. Article Number

4b. Service Type

- Registered
- Express Mail
- Return Receipt for Merchandise
- Certified
- Insured
- COD

7. Date of Delivery



5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X. J. Martinez

Thank you for using Return Receipt Service.

POSTAGE WILL BE PAID BY ADDRESSEE

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

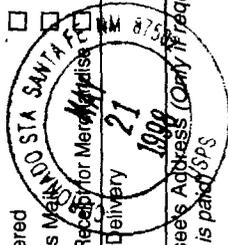
1. Addressee's Address
 2. Restricted Delivery
- Consult postmaster for fee.

4a. Article Number

4b. Service Type

- Registered Certified
- Express Mail Insured
- Return Receipt for Merchandise COD

OCD
P. O. BOX 1980
HOBBS, NM 88240



5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X. J. Martz

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

PS Form 3811, December 1994 102595-97-B-0179 Domestic Return Receipt



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

• Print your name, address, and ZIP Code in this box •

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield



SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. Addressee's Address
2. Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

**OCD - DISTRICT IV
2040 S. PACHECO
SANTA FE, NM 87505**

4a. Article Number

4b. Service Type

- | | |
|---|------------------------------------|
| <input type="checkbox"/> Registered | <input type="checkbox"/> Certified |
| <input type="checkbox"/> Express Mail | <input type="checkbox"/> Insured |
| <input type="checkbox"/> Return Receipt for Merchandise | <input type="checkbox"/> COD |

7. Date of Delivery

5-21-98

5. Received By: (Print Name)

GARY W. WINK

6. Signature: (Addressee or Agent)

X Gary W. Wink

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

Thank you for using Return Receipt Service.

... completed on the reverse side?

SENDER:

- Complete items 1 and/or 2 for additional services.
- Complete items 3, 4a, and 4b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

- 1. Addressee's Address
 - 2. Restricted Delivery
- Consult postmaster for fee.

3. Article Addressed to:

OCD - DISTRICT IV
2040 S. PACHECO
SANTA FE, NM 87505

4a. Article Number

- 4b. Service Type
- Registered
 - Express Mail
 - Return Receipt for Merchandise
 - Certified
 - Insured
 - COD

7. Date of Delivery

5-21-98

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

5. Received By: (Print Name)

GARY W. WINK

6. Signature: (Addressee or Agent)

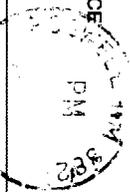
X Gary W. Wink

PS Form 3811, December 1994

102595-97-B-0179

Domestic Return Receipt

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

● Print your name, address, and ZIP Code in this box ●

SOUTHWEST ROYALTIES, INC.
P. O. DRAWER 11390
MIDLAND, TEXAS 79702

Beverly Hatfield

