

KELLAHIN AND KELLAHIN

ATTORNEYS AT LAW

EL PATIO BUILDING

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POST OFFICE BOX 2265

SANTA FE, NEW MEXICO 87504-2265

W. THOMAS KELLAHIN*

*NEW MEXICO BOARD OF LEGAL SPECIALIZATION
RECOGNIZED SPECIALIST IN THE AREA OF
NATURAL RESOURCES-OIL AND GAS LAW

TELEPHONE (505) 982-4285

TELEFAX (505) 982-2047

JASON KELLAHIN (RETIRED 1991)

November 27, 1996

TO: ALL INTERESTED PARTIES ENTITLED TO NOTICE
OF THE HEARING OF THE FOLLOWING NEW MEXICO
OIL CONSERVATION DIVISION CASE:

*Re: Application of Yates Petroleum Corporation
for Compulsory Pooling and an Unorthodox Well Location,
Eddy County, New Mexico*

On behalf of Yates Petroleum Corporation, please find enclosed our application for a compulsory pooling and an unorthodox well location for its Stonewall AQK State Com Well No. 1 which has been set for hearing on the New Mexico Oil Conservation Division Examiner's docket now scheduled for December 19, 1996. The hearing will be held at the Division hearing room located in Santa Fe, New Mexico.

As an interest owner who may be affected by this application, we are notifying you of your right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application. Failure to appear at the hearing may preclude you from any involvement in this case at a later date.

Pursuant to the Division's Memorandum 2-90, you are further notified that if you desire to appear in this case, then you are requested to file a Pre-Hearing Statement with the Division not later than 4:00 PM on Friday, December 13, 1996, with a copy delivered to the undersigned.

Very truly yours,

A handwritten signature in black ink, appearing to read 'W. Thomas Kellahin', written over a horizontal line.

W. Thomas Kellahin

cc: BY CERTIFIED MAIL-RETURN RECEIPT REQUESTED
to all parties listed in application

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.

3. Article Addressed to:

InterCoast Oil & Gas Co.
7130 S. Lewis Ave. Suite 700
Tulsa, OK 74136
Attn: Rock Quinn

5. Received By: (Print Name)

6. Signature: (Addressed to Agent)

PS Form 3811, December 1994

ENDER:

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1. Article Addressed to:

XY USA, Inc.
P.O. Box 50250
Midland, TX 79710

5. Received By: (Print Name)

6. Signature: (Addressed to Agent)

PS Form 3811, December 1994

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

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

Domestic Return Receipt

Thank you for using Return Receipt Service.

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

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3. Article Addressed to:

Vision Energy, Inc.
P.O. Box 2459
Carlsbad, NM 88221

5. Received By: (Print Name)

6. Signature: (Addressed to Agent)

PS Form 3811, December 1994

ENDER:

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3. Article Addressed to:

Petroleum Reserve Corp.
4815 S. Harvard Drive
Suite 305
Tulsa, OK 74135

5. Received By: (Print Name)

6. Signature: (Addressed to Agent)

PS Form 3811, December 1994

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2. ☐ Restricted Delivery
Consult postmaster for fee.

4a. Article Number

4b. Service Type

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4a. Article Number

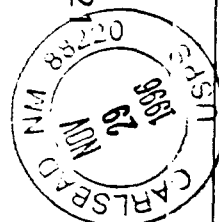
4b. Service Type

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

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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:

Diamond Head Prop., L.P.
P.O. Box 2127
Midland, Texas 79702-2127

4a. Article Number

P 238 262 019

4b. Service Type

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

7. Date of Delivery**5. Received By: (Print Name)****6. Signature: (Addressee or Agent)**

X *[Signature]*

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

PS Form 3811, December 1994

Domestic Return Receipt

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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:

John McRae
P.O. 2970
Denton, TX 76201

4a. Article Number

P 238 262 071

4b. Service Type

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

7. Date of Delivery

11-30-94

8. Addressee's Address (Only if requested and fee is paid)**5. Received By: (Print Name)****6. Signature: (Addressee or Agent)**

X *[Signature]*

PS Form 3811, December 1994

Domestic Return Receipt

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SENDER:

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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:

John D. Wallis
16 E. 16th Street
Tulsa, OK 74119

4a. Article Number

P 238 262 072

4b. Service Type

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

7. Date of Delivery**5. Received By: (Print Name)****6. Signature: (Addressee or Agent)**

X *[Signature]*

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

PS Form 3811, December 1994

Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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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:

Karen Loewenherz
1825 S. Peoria #6
Tulsa, OK 74105

4a. Article Number

P 238 262 073

4b. Service Type

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

7. Date of Delivery

11-30-94

8. Addressee's Address (Only if requested and fee is paid)**5. Received By: (Print Name)****6. Signature: (Addressee or Agent)**

X *[Signature]*

PS Form 3811, December 1994

Domestic Return Receipt

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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:

Mallon Oil Company
199 18th Street
Suite 1700
Denver, CO 80202

4a. Article Number

P 288 262 076

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ 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)

PS Form 3811, December 1994

Domestic Return Receipt

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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:

Kerr-McGee Corp.
P.O. Box 25861
Oklahoma City, OK 73125
Attn: Dave Henke

4a. Article Number

P 288 262 076

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ 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)

PS Form 3811, December 1994

Domestic Return Receipt

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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:

Baker Recovery, Inc.
P.O. Box 1026
Tulsa, OK 74101

4a. Article Number

P 288 262 076

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ 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)

PS Form 3811, December 1994

Domestic Return Receipt

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

Consult postmaster for fee.

3. Article Addressed to:

Milton Berry
4825 S. Peoria #6
Tulsa, OK 74105

4a. Article Number

P 288 262 076

4b. Service Type

- ☐ Registered ☐ Certified
☐ Express Mail ☐ Insured
☐ Return Receipt for Merchandise ☐ 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)

PS Form 3811, December 1994

Domestic Return Receipt

Is your RETURN ADDRESS completed on the reverse side?

Certified Fee	
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	
Return Receipt Showing to Whom, Date, & Addressee's Address	
TOTAL Postage & Fees	\$
Postmark or Date	

PS Form 3800, April 1995

US Postal Service
Receipt for Certified Mail
 No Insurance Coverage Provided.
 XA Onshore Corp.
 1612 S. Cincinnati Ave.
 Tulsa, OK 74119

P 288 262 070

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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3. Article Addressed to:

Claremont Oil Corp.
 4815 S. Harvard
 Suite 305
 Tulsa, OK 73112

4a. Article Number

P 288 262 069

4b. Service Type

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

7. Date of Delivery

12/15

5. Received By: (Print Name)

WILSONES
 X [Signature]

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

||||| ||| ||||| |||

PS Form 3811, December 1994

Domestic Return Receipt

SENDER:

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- The Return Receipt will show to whom the article was delivered and the date delivered.

3. Article Addressed to:

Petroleum Reserve Corp.
 4815 S. Harvard
 Suite 305
 Tulsa, OK 73112

4a. Article Number

P 288 262 068

4b. Service Type

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

7. Date of Delivery

12-11-96

5. Received By: (Print Name)

X [Signature]

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

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

Thank you for using Return Receipt Service.