

KELLAHIN AND KELLAHIN

ATTORNEYS AT LAW

EL PATIO BUILDING

117 NORTH GUADALUPE

POST OFFICE BOX 2265

SANTA FE, NEW MEXICO 87504-2265

TELEPHONE (505) 982-4285
TELEFAX (505) 982-2047

W. THOMAS KELLAHIN*

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

JASON KELLAHIN (RETIRED 1991)

August 15, 2001

**TO: NOTICE OF THE HEARING OF THE FOLLOWING
NEW MEXICO OIL CONSERVATION DIVISION CASE:**

***Re: NMOCD Case (pending): Application of Marathon Oil Company to
amend Division Order R-11186 which authorized surface commingling,
off-lease measurement and storage for its Indian Hills Centralized
Facility, Eddy County, New Mexico.***

Marathon Oil Company ("Marathon") has applied to the New Mexico Oil Conservation Division ("Division") to amend its previously approved Division Order R-11186 which authorized the surface commingling of production and the off-lease measurement and storage of that production for its Indian Hills Unit Consolidated Facility and Gathering Systems. See attached plat. This facility has the capability to satellite test and lease meter liquids and gas sent to the battery located in Section 19 and properly allocate that production to the individual leases and spacing units.

This amendment would allow Marathon to expand its prior approval to include the Indian Hills Unit Well No. 32 and any future well drilled within Sections 16, 17 and 19 of T21S, R24E which produces from the Indian Basin-Upper Pennsylvanian Associated Pool.

This case has been set for hearing on the Division Examiner's docket now scheduled for September 6, 2001. The hearing will be held at the Division hearing room located at 1220 South Saint Francis Drive, Santa Fe, New Mexico.

Marathon believes that the proposed amendment will allow it to continue to operate this project in an efficient manner. If you, agree, then there is no need for you to take any action. If you object to the Division approving this application, then you need to follow the following procedure: You have the right to appear at the hearing and participate in this case, including the right to present evidence 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, August 31, 2001 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

Interest Owners
Sections 16,17,19,20,21,28,29,32, and 33
Township 21 South, Range 24 East

Baynard W. Malone
Trustee for the Ross L. Malone Will
P.O. Box 87
Roswell, NM 88202-0087

Barbara B. Talento
3758 Mauna Loa Street
Brea, California 92823-6328

Bonnie M. Morrison
C/O Norwest Bank New Mexico NA
400 N. Pennsylvania Ave.
Roswell, NM 88201-4754

Charles Hinton
9426 Sanford
Houston, TX 77031-3-2218

Charles W. Perry, Jr.
P.O. Box 371
Midland, TX 79702-0371

Claremont Corporation
P.O. Box 549
Claremore, Oklahoma 74018-0549

Devon Energy Corporation
20 N. Broadway
Suite 1500
Oklahoma City, Oklahoma 73102-8260

Dorothy C. Frenzel
130 Abell Hanger Circle
Midland, TX 79707-6140

E. Bernard Johnston
2715 N. Kentucky # 16
Roswell, NM 882051-5868

Elinor M. Chase
1303 W. Kansas
Midland, TX 79701-6036

Hanagan Properties
P.O. Box 1887
Santa Fe, NM 87504-1887

Hoover H. Wright
P.O. Box 2312
Santa Fe, NM 87504-2312

Hugh Hanagan
P.O. Box 329
Roswell, NM 88201

James P. Murphy
2817 Stutz Dr.
Midland, TX 79705-4929

Jeffrey D. Landua
P.O. Box 2296
Brenham, TX 77834-2296

Joe B. Shutz
P.O. Box 973
Santa Fe, NM 87504-0973

John C. Stanfield
2314 Maxwell
Midland, TX 79705-4910

Louis Dreyfus Natural Gas Corporation
14000 Quail Springs Parkway
Suite 600
Oklahoma City, OK 73134

Marjorie F. Chase
1303 W. Kansas
Midland, TX 79701-6036

Mary Ann Chase
89 Sunnyside Dr.
Athens, OH 45701-1921

Mary Ellen Johnston
2714 N. Kentucky # 16
Roswell, NM 88201-5868

Nearburg Exploration Company
3300 N. A Street
Building 2 Suite 120
Midland, TX 79705-5421

New Mexico Oil Corporation
P.O. Box 1714
Roswell, NM 88202-1714

Nolan Brunson, Jr.
P.O. Box 2390
Hobbs, NM 88241-2390

Parker Wilson
P.O. Box 1297
Santa Fe, NM 87504-1297

Paul W. Eaton, Jr.
P.O. Box 12118
Amarillo, TX 79101

Ralph A. Shugart Trust
Elizabeth Duncan, Special Trustee
300 S. Jackson
Suite 500
Denver, Co 80209-3133

Richard P. Montoya
1425 Galisteo
Santa Fe, NM 87505-4669

Rimco Partners, L.P. I
C/O Rimco Associates, Inc.
22 Waterville Rd.
Avon, Connecticut 06001-2066

Rimco Partners, L.P. II
C/O Rimco Associates, Inc.
22 Waterville Rd.
Avon, Connecticut 06001-2066

Rimco Partners, L.P. III
C/O Rimco Associates, Inc.
6300 Bridgepoint Parkway
Building 2, # 500
Austin, TX 78730-5016

Roswell Museum & Foundation
100 W. Eleventh Street
Roswell, NM 88201-4910

Sabine Royalty Trust
Nations Bank of Texas Escrow Agent
Department 0887
Dallas, TX 75284-0887

Samuel Chase
19 Bonita Street
Sausalito, CA 94965-2113

Sandra Taylor Landua
2004 Community Lane
Midland, TX 79701-4016

Sarah Louise Harrington
2602 Bay Meadows Dr.
Roswell, N M 88201-5204

Steve Chase
1303 W. Kansas
Midland, TX 79701-6036

Texas Independent Exploration, Inc.
1600 Smith
Suite 3800
Houston, TX 77002

The Donald B. Anderson Foundaion
C/O Anderson Oil Company
1060 Three Park Central
Denver, CO 80202

The Home-Stake Oil & Gas Company
2800 First National Tower
Tulsa, OK 74103

The Home-Stake Royalty Corporation
2800 First National Tower
Tulsa, OK 74103

Wills Royalty, Inc.
P.O. Box 1658
Carlsbad, NM 88221-1658

Phillips Petroleum
4001 Penbrook Street
Odessa, TX 79762-5917

Santiago Royalty
105 N. Hudson
Suite 800
Oklahoma City, OK 73102-4803

Penroc Oil Corporation
P.O. Box 5970
Hobbs, NM 88241

Alberta Link
3055 S. Ray Street
Denver, Co 80210-6330

Rubic Crosby Bell
1331 Third Street
New Orleans, LA 70130-5743

Stanley W. Crosby
P.O. Box 2346
Roswell, NM 88202-2346

Elizabeth Malone Testamentary Trust
C/O Baynard W. Malone
P.O. Box 87
Roswell, NM 88202-0087

Earl Malone
310 W. Mescalero Rd.
Apartment 5
Roswell, NM 88201-5830

June D. Speight
P.O. Drawer 1687
Lovington, NM 88260-1687

J. Hiram Moore
P.O. Box 910883
Dallas, TX 75391-0833

Jean A. Eaton
321 Jasmine Street
Denver, CO 80220-5914

Optometric Extension Program Foundation, Inc.
1921 Carnegie
Suite 3 L
Santa Ana, CA 92705-5510

Anderson-Malone Trust
Baynard W. Malone-Trustee
Marilou A. Malone-Trustee
P.O. Box 87
Roswell, NM 88201-0087

Charles F. Malone Living Trust
Charles F. Malone & MT Malone TSES
2701 Chrysler Dr.
Roswell, NM 88201-5207

Devon SFS Operating, Inc.
P.O. Box 730292
Dallas, TX 75373-0292

Nancy Allen
3623 Overbook Dr.
Dallas, TX 75205-0000

Jamie E. Jennings
P.O. Box 670326
Dallas, TX 75367-0326

Susan Croft
6713 Deep Valley Lane
Ft. Worth, TX 76132-1121

Jane Armstrong
301 N. Colorado
Suite 108
Midland, TX 79701-4608

Howell Trust
Catherine A. Howell –Trustee
432 Raleigh Street
Denver, Co 80204-4724

Tandem Energy Corporation
P.O. Box 351
Midland, TX 79702-0351

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

7099 3400 0016 0166 2772
 9910 9100 0006 6602

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Recipient's Name (Please Print Clearly) (To be completed by addressee)

New Mexico Oil Corporation
 Street, Apt. No., or PO Box No.

City, State, ZIP+4

PS Form 3800, February 2000

See Reverse for Instructions

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

5012 0411 5000 0226 6602

Article Sent To:

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Name (Please Print Clearly) (To be completed by addressee)

Wiley Ann Chase
 Street, Apt. No., or PO Box No.

City, State, ZIP+4

PS Form 3800, July 1999

See Reverse for Instructions

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

7099 3400 0016 0166 2666
 9910 9100 0006 6602

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Recipient's Name (Please Print Clearly) (To be completed by addressee)

Dusan Croft
 Street, Apt. No., or PO Box No.

City, State, ZIP+4

PS Form 3800, February 2000

See Reverse for Instructions

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

5527 0411 5000 0226 6602

Article Sent To:

Postage	\$	Postmark Here
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$	

Name (Please Print Clearly) (To be completed by addressee)

Ardu Realty Trust
 Street, Apt. No., or PO Box No.

City, State, ZIP+4

PS Form 3800, July 1999

See Reverse for Instructions

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:

Clint Chase

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) Steve Chase B. Date of Delivery 7-18-01
- C. Signature Steve Chase ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

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 (Copy from service label)

7099 3380 0005 1140 10953

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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 Chase

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) Steve Chase B. Date of Delivery 7-15-01
- C. Signature Steve Chase ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

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 (Copy from service label)

7099 3380 0005 1140 10731

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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:

Yonessa Spangher

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) Yonessa Spangher B. Date of Delivery 8-15-01
- C. Signature Yonessa Spangher ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

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 (Copy from service label)

7099 3400 0016 0116 2185

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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:

Yonessa Spangher

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) Yonessa Spangher B. Date of Delivery 8-15-01
- C. Signature Yonessa Spangher ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☒ No
If YES, enter delivery address below:

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 (Copy from service label)

7099 3380 0005 1140 10830

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

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.

Article Addressed to:
Narah Shive
Harrington

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Narah Shive Harrington* B. Date of Delivery *8/15/99*
- C. Signature *Narah Shive* D. Agent *Shive*
- E. Is delivery address different from item 1? ☒ Yes ☐ No
- F. If YES, enter delivery address below: *Shive*

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 (Copy from service label)
 PS Form 3811, July 1999 *7099 3811 0005 1140 7105*
 Domestic Return Receipt 102595-00-M-0952

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.

Article Addressed to:
E. Barbara Johnston
2715 N Kentucky #16
Roseville, NM
88201-5808

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Barbara Johnston* B. Date of Delivery *8/16-01*
- C. Signature *Barbara Johnston* D. Agent *Johnston*
- E. Is delivery address different from item 1? ☐ Yes ☒ No
- F. If YES, enter delivery address below: *Johnston*

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

Article Number (Copy from service label)
 PS Form 3811, July 1999 *7099 3811 0005 1140 6908*
 Domestic Return Receipt 102595-00-M-0952

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.

Article Addressed to:
Agnes Stanfield

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Agnes Stanfield* B. Date of Delivery *8/16/99*
- C. Signature *Agnes Stanfield* D. Agent *Stanfield*
- E. Is delivery address different from item 1? ☐ Yes ☒ No
- F. If YES, enter delivery address below: *Stanfield*

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 (Copy from service label)
 PS Form 3811, July 1999 *7099 3811 0005 1140 7011*
 Domestic Return Receipt 102595-00-M-0952

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.

Article Addressed to:
Charles W. Berry, Jr.
P.O. Box 371
Midvale, UT
79702-0371

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Charles W. Berry* B. Date of Delivery *8/16/99*
- C. Signature *Charles W. Berry* D. Agent *Berry*
- E. Is delivery address different from item 1? ☐ Yes ☒ No
- F. If YES, enter delivery address below: *Berry*

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 (Copy from service label)
 PS Form 3811, July 1999 *7099 3811 0005 1140 7158*
 Domestic Return Receipt 102595-00-M-0952

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:

Donnell Morrison
c/o Prudential Bank
400 N. Pennsylvania
Roswell, NM
88201-4754

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
Susie Delasanta 8-15-01

C. Signature
D. Is delivery address different from item 1? ☐ Yes ☐ No
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 (Copy from service label)

PS Form 3811, July 1999 10295-00-M-0952
1099 3820 0005 1140 16885

2. Article Number (Copy from service label)
PS Form 3811, July 1999 10295-00-M-0952

1099 3820 0005 1140 7042

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:

Baynard W. Malone
Trustee for the Ross L. Malone Will
P.O. Box 87
Roswell, NM 88202-0087

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

☒ Signature ☐ Agent
D. Is delivery address different from item 1? ☐ Yes ☐ No
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 (Copy from service label)

PS Form 3811, July 1999 10295-00-M-0952
1099 3820 0005 1140 7141

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:

Neelburg Exploration

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
Linda Montgomery 8-15-01

C. Signature
D. Is delivery address different from item 1? ☐ Yes ☐ No
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 (Copy from service label)

PS Form 3811, July 1999 10295-00-M-0952
1099 3820 0005 1140 7042

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:

Margaret F. Chace

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

☒ Signature ☐ Agent
D. Is delivery address different from item 1? ☐ Yes ☐ No
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 (Copy from service label)

PS Form 3811, July 1999 10295-00-M-0952
1099 3820 0005 1140 7028

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.

Article Addressed to:
*Robert Muggins
 Foundation*

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery
*8/15/91*C. Signature
Shane
☒ Agent
☐ Addressee

 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.

Article Addressed to:
Carol Malone

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery
*8/16/91*C. Signature
Shane
☒ Agent
☐ Addressee

 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.

Article Addressed to:
*Anderson-Malone
 Trust*

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

C. Signature
Shane
☒ Agent
☐ Addressee

 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.

Article Addressed to:
Barbara Taylor Jordan

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery
*8-15-91*C. Signature
Shane
☒ Agent
☐ Addressee

 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

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

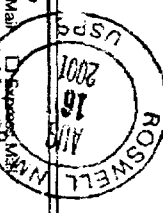
SENDER: COMPLETE THIS SECTION

- 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.

Article Addressed to:
Stanley C. Crosby

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
C. Signature <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, enter delivery address below:	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. <input type="checkbox"/> Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No	



2. Article Number (Copy from service label) *7099 3800 0025 1140 10847*
PS Form 3811, July 1999 Domestic Return Receipt 102595-09-M-0952

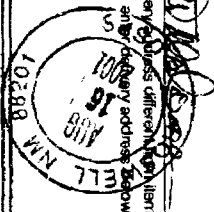
SENDER: COMPLETE THIS SECTION

- 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.

Article Addressed to:
*Eligable Malone
Postmaster's Office*

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
C. Signature <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, enter delivery address below:	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Registered Mail <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. <input type="checkbox"/> Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No	



2. Article Number (Copy from service label) *7099 3800 0025 1140 10861*
PS Form 3811, July 1999 Domestic Return Receipt 102595-09-M-0952

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.

Article Addressed to:
Radem Energy Corp.

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) <i>Tom Cup</i>	B. Date of Delivery <i>8-5-01</i>
C. Signature <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, enter delivery address below:	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. <input type="checkbox"/> Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No	

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.

Article Addressed to:
Gene Jensen

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) <i>[Signature]</i>	B. Date of Delivery <i>8-13-01</i>
C. Signature <i>[Signature]</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If YES, enter delivery address below:	
3. Service Type <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D. <input type="checkbox"/> Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Article Number (Copy from service label) *7099 3800 0010 0100 2253*
PS Form 3811, July 1999 Domestic Return Receipt 102595-09-M-0952

2. Article Number (Copy from service label) *7099 3800 0010 0100 2253*
PS Form 3811, July 1999 Domestic Return Receipt 102595-09-M-0952

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:

High Energy
P.O. Box 380
Rowell, NM
888201-0357

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *8/16/01* B. Date of Delivery
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

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 (Copy from service label)

1999 3800 0005 1140 16892

Domestic Return Receipt

10295-00-M-0952

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:

High Energy
P.O. Box 380
Rowell, NM
888201-0357

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

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 (Copy from service label)

1999 3800 0005 1140 16892

Domestic Return Receipt

10295-00-M-0952

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:

Managan Properties
P.O. Box 1887
Santa Fe, NM
87504-1887

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *8/16/01* B. Date of Delivery
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

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 (Copy from service label)

1999 3800 0005 1140 16915

Domestic Return Receipt

10295-00-M-0952

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:

Texas Independent Exploration, Inc.

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
- If YES, enter delivery address below:

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 (Copy from service label)

1999 3800 0005 1140 7134

Domestic Return Receipt

10295-00-M-0952

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 Ellen Johnston

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery
Mary E. Johnston 8/16/97C. Signature
Mary Ellen JohnstonD. 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 (Copy from service label)

1099 3380 0005 1140 7035

PS Form 3811, July 1999

Domestic Return Receipt

10256-00-M-0952

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 H. Johnston

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

2. Article Number (Copy from service label)

1099 3380 0005 1140 6984

PS Form 3811, July 1999

Domestic Return Receipt

10256-00-M-0952

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:

Claremont Cooperative

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

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 (Copy from service label)

1099 3380 0005 1140 6977

PS Form 3811, July 1999

Domestic Return Receipt

10256-00-M-0952

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:

Homer H. Weisheit

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature

☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
4. Restricted Delivery? (Extra Fee) ☐ Yes

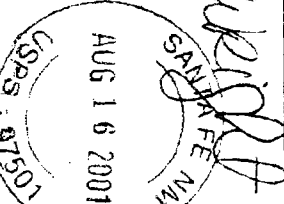
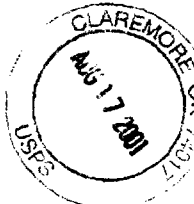
2. Article Number (Copy from service label)

1099 3380 0005 1140 6940

PS Form 3811, July 1999

Domestic Return Receipt

10256-00-M-0952



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.

Article Addressed to:
Samuel Chase

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Samuel Chase* B. Date of Delivery *8/15*
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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 (Copy from service label)
 PS Form 3811, July 1999 *7099 3400 0016 0116 02154*
 Domestic Return Receipt 102595-00-M-0992

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.

Article Addressed to:
Sanctigo Property

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *M. Robertson* B. Date of Delivery *8-16-01*
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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 (Copy from service label)
 PS Form 3811, July 1999 *7099 3400 0016 0116 02154*
 Domestic Return Receipt 102595-00-M-0992

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.

Article Addressed to:
*Charles T. McHenry
during leave*

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Charles T. McHenry* B. Date of Delivery *9/15/01*
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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 (Copy from service label)
 PS Form 3811, July 1999 *7099 3400 0016 0116 02192*
 Domestic Return Receipt 102595-00-M-0992

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.

Article Addressed to:
Wells Fargo, Inc.

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *[Signature]* B. Date of Delivery *[Signature]*
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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 (Copy from service label)
 PS Form 3811, July 1999 *7099 3400 0016 0116 02178*
 Domestic Return Receipt 102595-00-M-0992

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.

Article Addressed to:
Rumo Betheer, L.P.III

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *James Mundy* B. Date of Delivery *8-16-01*
- C. Signature *James Mundy* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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 (Copy from service label) *7099 3820 0005 1140 6768*

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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.

Article Addressed to:
Two Deafus Patisel
Two Deafus Patisel

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Paul D. Eaton* B. Date of Delivery *8-16-01*
- C. Signature *Paul D. Eaton* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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 (Copy from service label) *7099 3820 0005 1140 7097*

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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.

Article Addressed to:
Richard P. Montoya

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *R. Montoya* B. Date of Delivery *AUG 17 2001*
- C. Signature *R. Montoya* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☒ Yes ☐ No
If YES, enter delivery address below:

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 (Copy from service label) *7099 3820 0005 1140 6768*

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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.

Article Addressed to:
Paul D. Eaton, Jr.

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *Paul D. Eaton* B. Date of Delivery *8-16-01*
- C. Signature *Paul D. Eaton* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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 (Copy from service label) *7099 3820 0005 1140 7066*

PS Form 3811, July 1999 Domestic Return Receipt 102595-00-M-0952

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:

Robert Wilson



COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

WINDU SQUARES

C. Signature *[Signature]* D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

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:

Hewlett Packard

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

C. Signature *[Signature]* D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

2. Article Number (Copy from service label)

7099 3400 0005 140 0106 8882

Domestic Return Receipt

102595-00-M-0952

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:

Rino Rethore, L.P. II

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

8-20

C. Signature *[Signature]* D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

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:

J. Thrammore

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly) B. Date of Delivery

8-20

C. Signature *[Signature]* D. Is delivery address different from item 1? ☐ Yes ☒ No

If YES, enter delivery address below: ☐ Yes ☒ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☒ No

2. Article Number (Copy from service label)

7099 3820 0005 140 0810

Domestic Return Receipt

102595-00-M-0952

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.

Article Addressed to:
Home State Oil and Gas Co.

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
<i>[Signature]</i>	<i>8/29/99</i>
C. Signature	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If YES, enter delivery address below:
HOME STATE OIL & GAS COMPANY 2805 DALLAS PARKWAY #100 PLANO, TX 75083	

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 (Copy from service label)
 PS Form 3811, July 1999 Domestic Return Receipt 10295-00-M-0952
1099 3320 0005 140 710

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.

Article Addressed to:
Robert J. August Trust Elizabeth Winger Special Purposes

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
<i>[Signature]</i>	<i>8/17/99</i>
C. Signature	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If YES, enter delivery address below:

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 (Copy from service label)
 PS Form 3811, July 1999 Domestic Return Receipt 10295-00-M-0952
1099 3320 0005 140 7073

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.

Article Addressed to:
Deven Stevens Operating

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
<i>[Signature]</i>	<i>8/20/99</i>
C. Signature	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If YES, enter delivery address below:

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 (Copy from service label)
 PS Form 3811, July 1999 Domestic Return Receipt 10295-00-M-0952
1099 3400 0010 0100 8200

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.

Article Addressed to:
Alan Branson Jr.

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)	B. Date of Delivery
<i>[Signature]</i>	<i>8/17/99</i>
C. Signature	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
D. Is delivery address different from item 1? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	If YES, enter delivery address below:

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 (Copy from service label)
 PS Form 3811, July 1999 Domestic Return Receipt 10295-00-M-0952
1099 3320 0005 140 7057

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.

Article Addressed to:
James O. Roberts, L.P.I.

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *B. Date of Delivery* *8-20*
- C. Signature *James O. Roberts* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

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.

Article Addressed to:
Darlene Talento

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *B. Date of Delivery* *8/20/99*
- C. Signature *Darlene Talento* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-095

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.

Article Addressed to:
Home-Stake Royalty

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *B. Date of Delivery* *8-20*
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

HOME-STAKE OIL & GAS COMPANY
2805 DALLAS PARKWAY #100
PARKWAY CENTRE II
PLANO, TX 75093

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.

Article Addressed to:
Service Springs

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *B. Date of Delivery* *8-20*
- C. Signature *[Signature]* ☐ Agent ☐ Addressee
- D. Is delivery address different from item 1? ☐ Yes ☐ No
If YES, enter delivery address below:

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.
 4. Restricted Delivery? (Extra Fee) ☐ Yes

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0952

PS Form 3811, July 1999

Domestic Return Receipt

102595-00-M-0

SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Joe Schultz
P.O. Box 973
Santa Fe, NM 87504-0973

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

Signature *[Signature]* ☐ Agent
☐ Addressee
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below: ☐ Yes ☐ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102395-00-M-0952

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:

Alberta Link
3055 S. Race Street
Denver, CO 80210-6330

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

Signature *[Signature]* ☐ Agent
☐ Addressee
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below: ☐ Yes ☐ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102395-00-M-0952

SENDER: COMPLETE THIS SECTION

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

1. Article Addressed to:

Nancy Allen
3623 Overbrook Dr.
Dallas, TX 75205

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

Signature *[Signature]* ☐ Agent
☐ Addressee
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below: ☐ Yes ☐ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102395-00-M-0

SENDER: COMPLETE THIS SECTION

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- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Jean A. Eaton
321 Jasmine Street
Denver, CO 80220-5914

COMPLETE THIS SECTION ON DELIVERY

A. Received by (Please Print Clearly)

B. Date of Delivery

Signature *[Signature]* ☐ Agent
☐ Addressee
 D. Is delivery address different from item 1? ☐ Yes ☐ No
 If YES, enter delivery address below: ☐ Yes ☐ No

3. Service Type

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

4. Restricted Delivery? (Extra Fee) ☐ Yes ☐ No

2. Article Number (Copy from service label)

PS Form 3811, July 1999

Domestic Return Receipt

102395-00-M-0

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

Heurke O'Donnell

P.O. Box 5770

Holden, MA 01920

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *M. J. McFadden* B. Date of Delivery *108-2501*
- C. Signature *[Signature]* D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

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.

Article Addressed to:

Kubie Crosby Bell

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) *[Signature]* B. Date of Delivery *8-20-81*
- C. Signature *[Signature]* D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

PS Form 3811, July 1999

Domestic Return Receipt

10255-00-M-0952

PS Form 3811, July 1999

Domestic Return Receipt

10255-00-M-0952

SENDER: COMPLETE THIS SECTION

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

Article Addressed to:

James Murphy

2817 St. 17

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery
- C. Signature *[Signature]* D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

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.

Article Addressed to:

Strometric Extension Program Foundation, Inc.

COMPLETE THIS SECTION ON DELIVERY

- A. Received by (Please Print Clearly) B. Date of Delivery *8/20/81*
- C. Signature *[Signature]* D. Is delivery address different from item 1? ☐ Yes ☒ No
- If YES, enter delivery address below:

PS Form 3811, July 1999

Domestic Return Receipt

10255-00-M-0952

PS Form 3811, July 1999

Domestic Return Receipt

10255-00-M-0952



Marathon Oil Company
P.O. Box 862, Midland, Texas 79702-0862

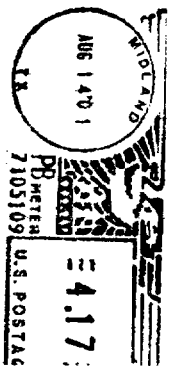


7099 3220 0005 1240 7004



Jeffrey D. Landua
P.O. Box 2296
Brenham, TX 77834-2296

8-16
84-121
8-31



Marathon Oil Company
P.O. Box 552, Midland, Texas 79702-0552

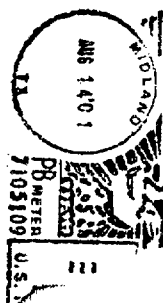
7099 3220 0005 1140 6724



U.K.S.S.

The Donald B. Anderson Foundation
C/O Anderson Oil Company
1060 Thrice Park Central
Denver, CO 80202

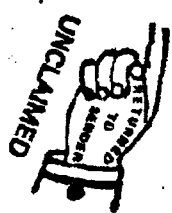
ADDRESSEE UNKNOWN



Marathon Oil Company
P.O. Box 552, Midland, Texas 79702-0552

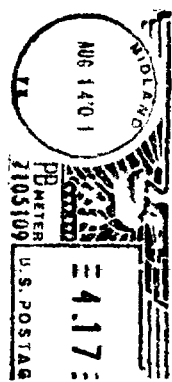


7099 3220 0005 1140 6960



Dorothy C. Frenzel
130 Abell Hanger Circle
Midland, TX 79707-6140

FILED
mail



8-16
8-23
9



LTR



Job separation sheet

Examiner Hearing – September 20, 2001
Docket No. 31-01
Page 5 of 9

Unit Well No. 44. 1980 feet FNL & 1070 feet FWL, Section 3, T17S, R28E
Unit Well No. 46. 2310 feet FNL & 2267 feet FWL, Section 3, T18S, R28E
Unit Well No. 54. 1654 feet FSL & 2272 feet FWL, Section 3, T18S, R28E
Unit Well No. 57. 1570 feet FSL & 1070 feet FWL, Section 3, T18S, R28E

CASE 12721: Continued from September 6, 2001, Examiner Hearing.

Application of Marathon Oil Company to amend Division Order R-11186, Eddy County, New Mexico. Applicant seeks an amendment of Division Order R-11186 to expand its Indian Hills Unit Centralized Facility to include its Indian Hills Unit Well No. 32 in Unit M of Section 16 and any future wells producing from the Indian Basin-Upper Pennsylvanian Gas Pool and/or the Indian Basin-Upper Pennsylvanian Associated Pool within Sections 16, 17 and 19, Township 21 South, Range 24 East. This order currently permits surface commingling, off-lease measurement and storage of Indian Basin-Upper Pennsylvanian Gas Pool and Indian Basin-Upper Pennsylvanian Associated Pool production from its Indian Basin "32" State Lease in Section 32 with its Indian Hills Unit covering parts of Sections 20, 21, 28, 29 and 33, all in Township 21 South, Range 24 East which shall be stored and measured at its centralized facility located in Unit P, Section 19, Township 21 South, Range 24 East. This facility is located approximately 18 miles east of Carlsbad, New Mexico.

CASE 12731: Application of TMBR/Sharp Drilling, Inc. for an order staying Division approval of two applications for permit to drill obtained by David H. Arrington Oil & Gas, Inc., Lea County, New Mexico. Applicant seeks an order staying David H. Arrington Oil & Gas, Inc.'s applications for permit to drill the Triple Hackle Dragon 25 Well No. 1, W/2 of Section 25, Township 16 South, Range 35 East and the Blue Drake 23 Well No. 1, E/2 of Section 23, Township 16 South, Range 35 East, pending a final adjudication of ownership. These wells are located approximately 4 miles north of the center of the City of Lovington, New Mexico.

CASE 12693: Continued from July 12, 2001, Examiner Hearing.

Application of McElvain Oil & Gas Properties, Inc. for compulsory pooling, Rio Arriba County, New Mexico. Applicant seeks an order pooling all mineral interests in all formations from the base of the Pictured Cliffs formation to the base of the Mesaverde formation in the E/2 of Section 5, Township 25 North, Range 2 West, for all formations and/or pools developed on 320-acre spacing within this vertical extent. Said unit is to be dedicated to its Cougar Com 5 Well No. 2 to be drilled to a depth sufficient to test all formations to the base of the Mesaverde formation, Blanco-Mesaverde Gas Pool, at a standard location in the SE/4 of said Section 5. Also to be considered will be the cost of drilling and completing said well and the allocation of the cost thereof as well as actual operating costs and charges for supervision, designation of applicant as operator of the well and a charge for risk involved in drilling said well. Said area is located approximately 10.5 miles northwest of Lindrith, New Mexico.

CASE 12732: In the matter of the hearing of the Oil Conservation Division for an order creating and extending certain pools in Eddy and Lea Counties, New Mexico.

- (a) CREATE a new pool in Lea County, New Mexico classified as a gas pool for Morrow production and designated as the Northeast Greenwood-Morrow Gas Pool. The discovery well is the Marbob Energy Corporation Lusk Deep Unit A Well No. 19 located in Unit N of Section 17, Township 19 South, Range 32 East, NMPM. Said pool would comprise:

TOWNSHIP 19 SOUTH, RANGE 32 EAST, NMPM

Section 17: S/2

- (b) CREATE a new pool in Lea County, New Mexico classified as a gas pool for Atoka production and designated as the Northwest Leamex-Atoka Gas Pool. The discovery well is the Phillips Petroleum Company West Maljamar Well No. 7 located in Unit J of Section 7, Township 17 South, Range 33 East, NMPM. Said pool would comprise:

TOWNSHIP 17 SOUTH, RANGE 33 EAST, NMPM

Section 7: S/2

- (c) CREATE a new pool in Lea County, New Mexico classified as an oil pool for Wolfcamp production and designated as the Northwest Leamex-Wolfcamp Pool. The discovery well is the Phillips Petroleum Company West Maljamar 7 Well No. 1 located in Unit J of Section 7, Township 17 South, Range 33 East, NMPM. Said pool would comprise:

TOWNSHIP 17 SOUTH, RANGE 33 EAST, NMPM

Section 7: SE/4

- (d) CREATE a new pool in Lea County, New Mexico classified as a gas pool for Atoka production and designated as the Southwest Osudo-Atoka Gas Pool. The discovery well is the Phillips Petroleum Company State R Well No. 1 located in Unit F of Section 1, Township 21 South, Range 34 East, NMPM. Said pool would comprise:

TOWNSHIP 21 SOUTH, RANGE 34 EAST, NMPM

Section 1: Lots 1, 2, 3, 4, 5, 6, 7 and 8

- (e) CREATE a new pool in Lea County, New Mexico classified as a gas pool for Morrow production and designated as the West Sawyer-Morrow Gas Pool. The discovery well is the Ricks Exploration Inc. Big Kahuna Well No. 1 located in Unit J of Section 21, Township 9 South, Range 37 East, NMPM. Said pool would comprise:

TOWNSHIP 9 SOUTH, RANGE 37 EAST, NMPM

Section 21: S/2

- (f) EXTEND the Anderson Ranch-Morrow Gas Pool in Lea County, New Mexico to include:

TOWNSHIP 15 SOUTH, RANGE 32 EAST, NMPM

Section 33: W/2

- (g) EXTEND the Anderson Ranch-Wolfcamp Pool in Lea County, New Mexico to include:

TOWNSHIP 16 SOUTH, RANGE 32 EAST, NMPM

Section 22: NE/4

- (h) EXTEND the Bootleg Ridge-Morrow Gas Pool in Lea County, New Mexico to include:

TOWNSHIP 22 SOUTH, RANGE 32 EAST, NMPM

Section 13: SE/4