

STATE OF NEW MEXICO
DEPARTMENT OF ENERGY, MINERALS AND NATURAL RESOURCES
OIL CONSERVATION DIVISION

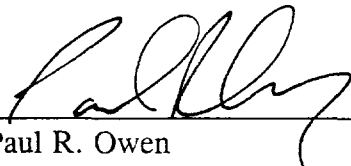
IN THE MATTER OF THE APPLICATION OF GREAT
WESTERN DRILLING COMPANY FOR COMPULSORY
POOLING, LEA COUNTY, NEW MEXICO.

CASE NO. 12943

AFFIDAVIT

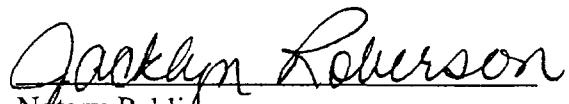
STATE OF NEW MEXICO)
) ss.
COUNTY OF SANTA FE)

Paul R. Owen, attorney in fact and authorized representative of Great Western Drilling Company, the applicant herein, being first duly sworn, upon oath, states that notice has been given to all interested parties entitled to receive notice of this application under Oil Conservation Division rules, and that notice has been given at the addresses shown on Exhibit "A" attached hereto.



Paul R. Owen

SUBSCRIBED AND SWORN to before this 9th day of October, 2002, by Paul R. Owen



Notary Public

My Commission Expires: April 1, 2006

**BEFORE THE OIL CONSERVATION
DIVISION**
Santa Fe, New Mexico
Case No. 12943 Exhibit No. 8
Submitted by: Great Western Drilling Company
Hearing Date: October 10, 2002

OIL CONSERVATION DIVISION

RE: IN THE MATTER OF THE
APPLICATION OF GREAT
WESTERN DRILLING
COMPANY

CASE NO. 12943

NOTICE LETTERS
and
CERTIFIED RETURN RECEIPTS

Paul R. Owen
Attorney at Law
Montgomery & Andrews, P.A.
Post Office Box 2307
Santa Fe, New Mexico 87504-2307
(505) 982-3873

Attorneys for Great Western Drilling Company

Exhibit A
to Affidavit of Paul R. Owen
In the Matter of Great Western
Case No. 12943

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Abo Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

This letter is to advise you that Great Western Drilling Company filed the enclosed application with the New Mexico Oil Conservation Division seeking the compulsory pooling of all mineral interests from the surface to the base of the Morrow formation, in certain spacing and proration units in the E/2 of Section 34, Township 15 South, Range 34 East, NMPM, Lea County, New Mexico. Great Western proposes to dedicate the referenced pooled units to its proposed GWDC "34" Federal Well No. 1, to be drilled at a standard location in the NE/4 SE/4 of said Section 34.

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Parties appearing in cases have been requested by the Division (Memorandum 2-90) to file a Prehearing Statement substantially in the form prescribed by the Division. Prehearing statements should be filed by 4:00 o'clock p.m. on the Friday before a scheduled hearing.

Very truly yours,

Paul R. Owen by *sm*

Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

Enclosure

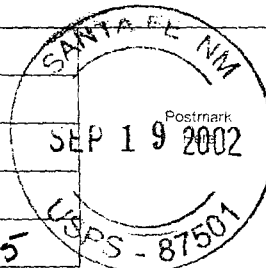
cc: Great Western Drilling Company

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

PRO

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

\$ 4.65



Recipient's Name (Please Print Clearly; to be completed by mailer)

Abo Petroleum Corporation

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

105 South Fourth Street

City, State, ZIP+4

Artesia, New Mexico 88210

PS Form 3800, February 2000

See Reverse for Instructions

7000 1670 0000 0605 5829

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

David H. Arrington Oil & Gas, Inc.
Post Office Box 2071
Midland, Texas 79702

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

This letter is to advise you that Great Western Drilling Company filed the enclosed application with the New Mexico Oil Conservation Division seeking the compulsory pooling of all mineral interests from the surface to the base of the Morrow formation, in certain spacing and proration units in the E/2 of Section 34, Township 15 South, Range 34 East, NMPM, Lea County, New Mexico. Great Western proposes to dedicate the referenced pooled units to its proposed GWDC "34" Federal Well No. 1, to be drilled at a standard location in the NE/4 SE/4 of said Section 34.

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Very truly yours,

Paul R. Owen by *smc*

Paul R. Owen
Attorney for Great Western Drilling Company

PRO/jr

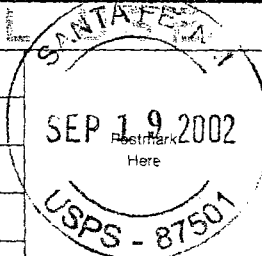
Enclosure

cc: Great Western Drilling Company

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

PRO OFFICIAL

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To	David H. Arrington Oil & Gas Inc.
Street, Apt. No., or PO Box No.	Post Office Box 2071
City, State, ZIP+4	Midland, Texas 79702

PS Form 3800, January 2001

See Reverse for Instructions

7002 0510 0003 4612 2744 9037

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Tom Brown, Inc.
Post Office Box 2601
Midland, Texas 79702

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

This letter is to advise you that Great Western Drilling Company filed the enclosed application with the New Mexico Oil Conservation Division seeking the compulsory pooling of all mineral interests from the surface to the base of the Morrow formation, in certain spacing and proration units in the E/2 of Section 34, Township 15 South, Range 34 East, NMPM, Lea County, New Mexico. Great Western proposes to dedicate the referenced pooled units to its proposed GWDC "34" Federal Well No. 1, to be drilled at a standard location in the NE/4 SE/4 of said Section 34.

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Very truly yours,

Paul R. Owen

Paul R. Owen *by SRS*
Attorney for Great Western Drilling Company

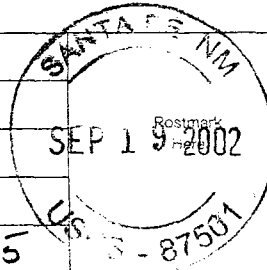
PRO/jr
Enclosure

cc: Great Western Drilling Company

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

PRO

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Recipient's Name (Please Print Clearly) (to be completed by mailer)

Tom Brown, Inc.
Street, Apt. No., or PO Box No.
Post Office Box 2608
City, State, ZIP+4
Midland, Texas 79702

PS Form 3800, February 2000

See Reverse for Instructions

7000 1670 0000 0605 6086

MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Edward N. David
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Mr. David:

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Very truly yours,

Paul R. Owen *ky sas*

Paul R. Owen

Attorney for Great Western Drilling Company

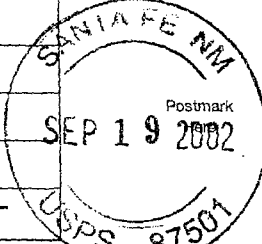
PRO/jr

Enclosure

cc: Great Western Drilling Company

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

PRO F F I C I A L U S E

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.65	

Sent To
Mr. Edward N. David
Street, Apt. No.,
or PO Box No. 116 West First Street
City, State, ZIP+4
Roswell, New Mexico 88201

7001 1140 0002 5605 9816

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

David Petroleum Company
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

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Paul R. Owen by *smc*
Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

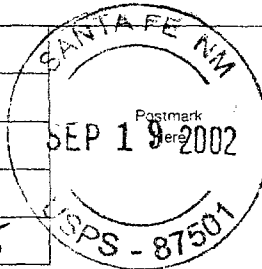
Enclosure

cc: Great Western Drilling Company

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

7000 1670 0000 0605 6079

PRO	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Recipient's Name *(Please Print Clearly) (to be completed by mailer)*
David Petroleum Company
Street, Apt. No., or PO Box No.
116 West First Street
City, State, ZIP+4
Roswell, New Mexico 88201

PS Form 3800, February 2000 See Reverse for Instructions

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

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Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Davoil, Inc.
Post Office Box 122269
Fort Worth, Texas 76121

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

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Paul R. Owen
by *SAS*

Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

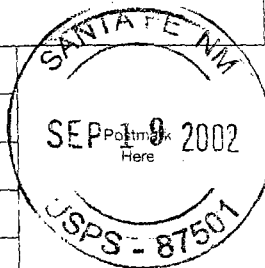
Enclosure

cc: Great Western Drilling Company

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

PRO

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Recipient's Name (Please Print Clearly) (to be completed by mailer)

Davol, Inc.
Post Office Box 122269
Fort Worth, Texas 76121

PS Form 3800, February 2000

See Reverse for Instructions

7000 1670 0000 0605 6093

MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Mr. Dale Douglas
Post Office Box 10187
Midland, Texas 79702

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Mr. Douglas:

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Very truly yours,

Paul R. Owen by *smc*
Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

Enclosure

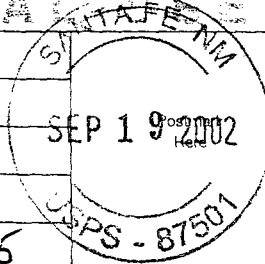
cc: Great Western Drilling Company

7002 0510 0003 4612 8948

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

PROFICIAL

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To

Mr. Dale Douglas
Street, Apt. No.,
or PO Box No. Post Office Box 10187
City, State, ZIP+4
Midland, Texas 79702

PS Form 3800, January 2001

See Reverse for Instructions

MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Mr. Keith E. McKamey
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Mr. McKamey:

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Very truly yours,

Paul R. Owen

Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

Enclosure

cc: Great Western Drilling Company

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

PRO F F I C I A L U S E

Postage \$

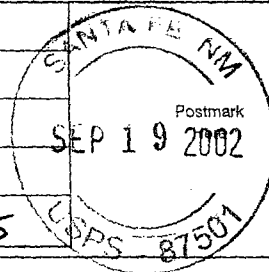
Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$ 4.65



Sent To

Mr. Keith E. McKamey

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

116 West First Street

City, State, ZIP+4

Roswell, New Mexico 88201

PS Form 3800, January 2001

See Reverse for Instructions

0896 5095 2000 0411 1000

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

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powen@montand.com

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325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Mr. Michael A. McMillan
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Mr. McMillan:

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Very truly yours,

Paul R. Owen by [signature]

Paul R. Owen
Attorney for Great Western Drilling Company

PRO/jr
Enclosure
cc: Great Western Drilling Company

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

PRO F F I C I A L U S E

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

\$ 4.65	

SANTAFE NM
SEP 19 2002
USPS - 87501

Sent To
Mr. Michael A. McMillan
Street, Apt. No.,
or PO Box No. 116 West First Street
City, State, ZIP+4 Roswell, New Mexico 88201

7001 1140 0002 5605 9809

MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

McMillan Production Company, Inc.
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

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Very truly yours,

Paul R. Owen by *SMS*
Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

Enclosure

cc: Great Western Drilling Company

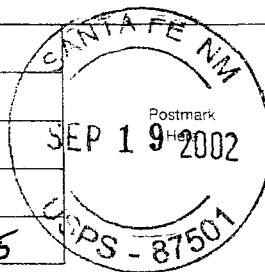
U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

PRO

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

\$

\$ 4.65



Recipient's Name (Please Print Clearly) (to be completed by mailer)

McMillan Production Company, Inc.

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

116 West First Street

City, State, ZIP+4

Roswell, New Mexico 88201

PS Form 3800, February 2000

See Reverse for Instructions

7000 1670 0000 0605 6062

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

McMillan Ventures, L.L.C.
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

This letter is to advise you that Great Western Drilling Company filed the enclosed application with the New Mexico Oil Conservation Division seeking the compulsory pooling of all mineral interests from the surface to the base of the Morrow formation, in certain spacing and proration units in the E/2 of Section 34, Township 15 South, Range 34 East, NMPM, Lea County, New Mexico. Great Western proposes to dedicate the referenced pooled units to its proposed GWDC "34" Federal Well No. 1, to be drilled at a standard location in the NE/4 SE/4 of said Section 34.

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Very truly yours,

Paul R. Owen

Paul R. Owen *by SMS*

Attorney for Great Western Drilling Company

PRO/jr

Enclosure

cc: Great Western Drilling Company

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

PRO F F I C I A L U S E

Postage \$

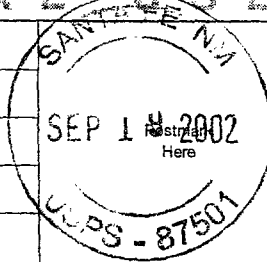
Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$ 4.65



Sent To

McMillan Ventures, L.L.C.

Street, Apt. No.;
or PO Box No.

116 West First Street

City, State, ZIP+4

Roswell, New Mexico 88201

PS Form 3800, January 2001

See Reverse for Instructions

EB26 5095 2000 04TT 1002

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Myco Industries, Inc.
105 South Fourth Street
Artesia, New Mexico 88210

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

This letter is to advise you that Great Western Drilling Company filed the enclosed application with the New Mexico Oil Conservation Division seeking the compulsory pooling of all mineral interests from the surface to the base of the Morrow formation, in certain spacing and proration units in the E/2 of Section 34, Township 15 South, Range 34 East, NMPM, Lea County, New Mexico. Great Western proposes to dedicate the referenced pooled units to its proposed GWDC "34" Federal Well No. 1, to be drilled at a standard location in the NE/4 SE/4 of said Section 34.

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Very truly yours,

Paul R. Owen

Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

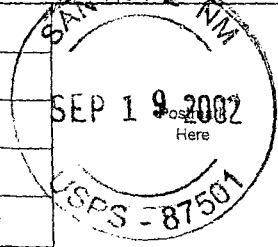
Enclosure

cc: Great Western Drilling Company

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

7001 1140 0002 5605 9786

PRO F F I C I A L U S E

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.65	

Sent To
Myco Industries, Inc.
Street, Apt. No.,
or PO Box No. 105 South Fourth Street
City, State, ZIP+4
Artesia, New Mexico 88210

MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Nearburg Exploration Company, L.L.C.
Post Office Box 823085
Dallas, Texas 75382

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

This letter is to advise you that Great Western Drilling Company filed the enclosed application with the New Mexico Oil Conservation Division seeking the compulsory pooling of all mineral interests from the surface to the base of the Morrow formation, in certain spacing and proration units in the E/2 of Section 34, Township 15 South, Range 34 East, NMPM, Lea County, New Mexico. Great Western proposes to dedicate the referenced pooled units to its proposed GWDC "34" Federal Well No. 1, to be drilled at a standard location in the NE/4 SE/4 of said Section 34.

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Very truly yours,

Paul R. Owen *by SMS*

Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

Enclosure

cc: Great Western Drilling Company

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

PRO OFFICIAL USE

Postage \$

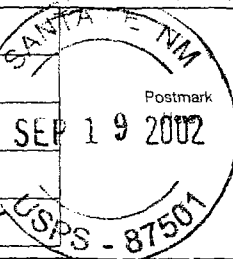
Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$ 4.65



Postmark

Sent To

Nearburg Exploration Company, LLC

Street, Apt. No.,
or PO Box No. Post Office Box 823085

City, State, ZIP+4
Dallas, Texas 75382

PS Form 3800, January 2001

See Reverse for Instructions

2002 0510 0003 4612 8955

MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

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Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Mr. William B. Owen
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Mr. Owen:

This letter is to advise you that Great Western Drilling Company filed the enclosed application with the New Mexico Oil Conservation Division seeking the compulsory pooling of all mineral interests from the surface to the base of the Morrow formation, in certain spacing and proration units in the E/2 of Section 34, Township 15 South, Range 34 East, NMPM, Lea County, New Mexico. Great Western proposes to dedicate the referenced pooled units to its proposed GWDC "34" Federal Well No. 1, to be drilled at a standard location in the NE/4 SE/4 of said Section 34.

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Very truly yours,

Paul R. Owen

Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

Enclosure

cc: Great Western Drilling Company

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

TE68 2194 E000 0150 2002
 2002 0510 0000 4612 8931

PRD 0510 0000 4612 8931	
Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65

SANTA FE NM
 Postmark
 SEP 19 2002
 USPS - 87501

Sent To Mr. William B. Owen	
Street, Apt. No., or PO Box No. 116 West First Street	
City, State, ZIP+4 Roswell, New Mexico 88201	

PS Form 3800, January 2001 See Reverse for Instructions

MONTGOMERY & ANDREWS

PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002

CERTIFIED MAIL

RETURN RECEIPT REQUESTED

Mr. William G. Owen
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

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Very truly yours,

Paul R. Owen

Paul R. Owen

Attorney for Great Western Drilling Company

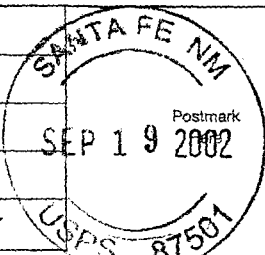
PRO/jr

Enclosure

cc: Great Western Drilling Company

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

PRO F F I C I A L U S E

Postage	\$	
Certified Fee		
Return Receipt Fee (Endorsement Required)		
Restricted Delivery Fee (Endorsement Required)		
Total Postage & Fees	\$ 4.65	

Sent To
Mr. William G. Owen
Street, Apt. No.;
or PO Box No. 116 West First Street
City, State, ZIP+4 Roswell, New Mexico 88201

7001 1140 0002 5605 9523

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

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Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Permian Exploration Corporation
116 West First Street
Roswell, New Mexico 88201

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

This letter is to advise you that Great Western Drilling Company filed the enclosed application with the New Mexico Oil Conservation Division seeking the compulsory pooling of all mineral interests from the surface to the base of the Morrow formation, in certain spacing and proration units in the E/2 of Section 34, Township 15 South, Range 34 East, NMPM, Lea County, New Mexico. Great Western proposes to dedicate the referenced pooled units to its proposed GWDC "34" Federal Well No. 1, to be drilled at a standard location in the NE/4 SE/4 of said Section 34.

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Very truly yours,

Paul R. Owen

Paul R. Owen *by sas*

Attorney for Great Western Drilling Company

PRO/jr
Enclosure

cc: Great Western Drilling Company

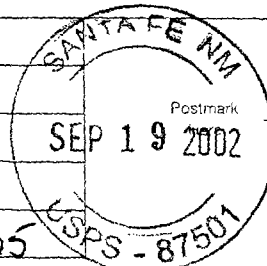
U.S. Postal Service
CERTIFIED MAIL RECEIPT
(Domestic Mail Only; No Insurance Coverage Provided)

PRO

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

\$

\$ 4.65



Recipient's Name (Please Print Clearly) (to be completed by mailer)

Permian Exploration Corporation

116 West First Street

City, State, ZIP+4

Roswell, New Mexico 88201

PS Form 3800, February 2000

See Reverse for Instructions

7000 1670 0000 0605 6055

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Yates Drilling Company
105 South Fourth Street
Artesia, New Mexico 88210

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

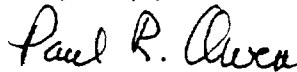
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Paul R. Owen

by SMS
Attorney for Great Western Drilling Company

PRO/jr

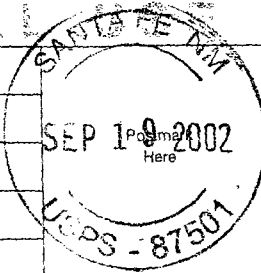
Enclosure

cc: Great Western Drilling Company

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

PRO OFFICIAL

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To: Yates Drilling Company
Street, Apt. No.,
or PO Box No. 105 South Fourth Street
City, State, ZIP+4
Artesia, New Mexico 88210

PS Form 3800, January 2001

See Reverse for instructions

7002 0510 0003 4612 9020

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
power@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Yates Drilling Corporation
105 South Fourth Street
Artesia, New Mexico 88210

Attention: Mr. Randy Patterson

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

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Very truly yours,

Paul R. Owen by SMS

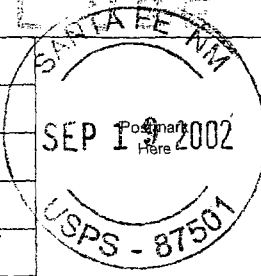
Paul R. Owen
Attorney for Great Western Drilling Company

PRO/jr
Enclosure
cc: Great Western Drilling Company

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

PRO OFFICIAL

Postage	\$
Certified Fee	
Return Receipt Fee (Endorsement Required)	
Restricted Delivery Fee (Endorsement Required)	
Total Postage & Fees	\$ 4.65



Sent To Yates Drilling Corporation
Attention: Randy Patterson
Street, Apt. No. 105 South Fourth Street
or PO Box No.
City, State, ZIP+4 Artesia, New Mexico 88210

PS Form 3800, January 2001

See Reverse for Instructions

7002 0510 0003 4612 8962

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
Direct Dial: (505) 986-2538
powen@montand.com

Post Office Box 2307
Santa Fe, New Mexico 87504-2307
325 Paseo de Peralta
Telephone (505) 982-3873
Fax (505) 982-4289
www.montand.com

September 19, 2002
CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

Re: *Application of Great Western Drilling Company for Compulsory Pooling,
Lea County, New Mexico*

Dear Gentlemen:

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Very truly yours,

Paul R. Owen by gas
Paul R. Owen

Attorney for Great Western Drilling Company

PRO/jr

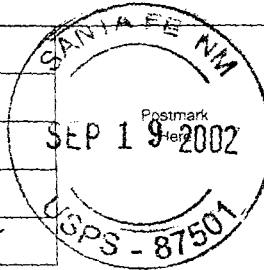
Enclosure

cc: Great Western Drilling Company

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

PRO

Postage \$
Certified Fee
Return Receipt Fee
(Endorsement Required)
Restricted Delivery Fee
(Endorsement Required)
Total Postage & Fees \$ 4.65



Recipient's Name (Please Print Clearly) (to be completed by mailer)

Yates Petroleum Corporation

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

105 South Fourth Street

City, State, ZIP+4

Artesia, New Mexico 88210

PS Form 3800, February 2000

See Reverse for Instructions

9885 5090 0000 0497 0002

Is your RETURN ADDRESS completed on the reverse side?

SENDER: <ul style="list-style-type: none">■ 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Abo Petroleum Co 105 South Fourth St. Artesia, New Mexico 88210		4a. Article Number 7000 1670 0000 0605 5829	
		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 092302	
5. Received By: (Print Name) DATTI CARLILE		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) X			

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: <ul style="list-style-type: none">■ 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: David H. Arrington Oil & Gas, Inc. Post Office Box 2071 Midland, Texas 79702		4a. Article Number 7002 0510 0003-4612 9037	
		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	
5. Received By: (Print Name) Whitney Bowlin		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) X			

PS Form 3811, December 1994 7002 0510 0003 4612 9037

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: <ul style="list-style-type: none">■ 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Tom Brown, Inc. Post Office Box 2608 Midland, Texas 79702		4a. Article Number 7000 1670 0000 0605 6086	
		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 SEP 23 2002	
5. Received By: (Print Name) Bob R. Brown		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) X <i>Bob R. Brown</i>			

PS Form 3811, December 1994 102595-98-B-0229 Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: <ul style="list-style-type: none">■ 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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Mr. Edward N. David 116 West First Street Roswell, New Mexico 88201		4a. Article Number 7001 1140 0002 5605 9316	
		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 9-23-02	
5. Received By: (Print Name)		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) X <i>Edward N. David</i>			

PS Form 3811, December 1994 7001 1140 0002 5605 9816 receipt

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):

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

Consult postmaster for fee.

3. Article Addressed to:

David Petroleum Company
116 West First Street
Roswell, New Mexico 88201

4a. Article Number

7000 1670 0000 0605 6079

4b. Service Type

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

7. Date of Delivery

9-23-02

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

Edna L. Lugo

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

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):

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

Consult postmaster for fee.

3. Article Addressed to:

Davoil, Inc.
Post Office Box 122269
Fort Worth, Texas 76121

4a. Article Number

7000 1670 0000 0605 6093

4b. Service Type

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

7. Date of Delivery

9-23-02

5. Received By: (Print Name)

M. M. M. M. M.

6. Signature: (Addressee or Agent)

X M. M. M. M. M.

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

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: <ul style="list-style-type: none">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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Mr. Dale Douglas Post Office Box 10187 Midland, Texas 79702		4a. Article Number 7002 0510 0003 4612 8942	
		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 SEP 24 2002	
5. Received By: (Print Name) Whitney Bowlin		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) x W. Bowlin			

PS Form 3811, December 1994 7002 0510 0003 4612 8948

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

SENDER: <ul style="list-style-type: none">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. <input type="checkbox"/> Addressee's Address 2. <input type="checkbox"/> Restricted Delivery Consult postmaster for fee.	
3. Article Addressed to: Mr. Keith E. McKamey 116 West First Street Roswell, New Mexico 88201		4a. Article Number 7001 1140 0002 5605 9830	
		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 9-23-02	
5. Received By: (Print Name)		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) x E. L. Lumberger			

PS Form 3811, December 1994 7001 1140 0002 5605 9830

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):

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

Consult postmaster for fee.

3. Article Addressed to:

Mr. Michael A. McMillan
116 West First Street
Roswell, New Mexico 88201

4a. Article Number

7001 1140 0002 5605 9809

4b. Service Type

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

7. Date of Delivery

9-23-02

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *Edna Lemberger*

PS Form 3811, Decemb

7001 1140 0002 5605 9809

Receipt

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):

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

Consult postmaster for fee.

3. Article Addressed to:

McMillan Production Company, Inc.
116 West First Street
Roswell, New Mexico 88201

4a. Article Number

7000 1670 0000 0605 6062

4b. Service Type

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

7. Date of Delivery

9-23-02

5. Received By: (Print Name)

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

6. Signature: (Addressee or Agent)

X *Michael Powell*

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt

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):

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

Consult postmaster for fee.

3. Article Addressed to:

McMillan Ventures, L.L.C.
116 West First Street
Roswell, New Mexico 88201

4a. Article Number

7001 1140 0002 5605 9793

4b. Service Type

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

7. Date of Delivery

9-23-02

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Nickie Howell*

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

PS Form 3811, December

7001 1140 0002 5605 9793

Receipt

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):

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

Consult postmaster for fee.

3. Article Addressed to:

Myco Industries, Inc.
105 South Fourth Street
Artesia, New Mexico 88210

4a. Article Number

7001 1140 0002 5605 9786

4b. Service Type

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

7. Date of Delivery

09-23-02

5. Received By: (Print Name)

BETH CARLILE

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1995

7001 1140 0002 5605 9786

Domestic Return Receipt

Thank you for using Return Receipt Service.

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:

Nearburg Exploration Company, L.P.
Post Office Box 823085
Dallas, Texas 75382

4a. Article Number
7002 0510 0003 4612 8955

4b. Service Type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

5. Received By: (Print Name)
C. Rivera

6. Signature: (Addressee or Agent)
X C. Rivera

7. Date of Delivery
28 2002

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

PS Form 3811, December 2002 7002 0510 0003 4612 8955

Is your RETURN ADDRESS completed on the reverse side?

Thank you for using Return Receipt Service.

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:

Mr. William B. Owen
116 West First Street
Roswell, New Mexico 88201

4a. Article Number
7002 0510 0003 4612 8931

4b. Service Type

☐ Registered ☒ Certified

☐ Express Mail ☐ Insured

☐ Return Receipt for Merchandise ☐ COD

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)
X William B. Owen

7. Date of Delivery
9-23-02

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

PS Form 3811, December 2002 7002 0510 0003 4612 8931

Is your RETURN ADDRESS completed on the reverse side?

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):

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

Consult postmaster for fee.

3. Article Addressed to:

Mr. William G. Owen
116 West First Street
Roswell, New Mexico 88201

4a. Article Number

7001 1140 0002 5605 9823

4b. Service Type

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

7. Date of Delivery

9-23-02

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *E. Owen*

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

PS Form 3811, December 1994

7001 1140 0002 5605 9823

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):

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

Consult postmaster for fee.

3. Article Addressed to:

Permian Exploration Corporation
116 West First Street
Roswell, New Mexico 88201

4a. Article Number

7000 1670 0000 0605 6055

4b. Service Type

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

7. Date of Delivery

9-23-02

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X *Jackie P. Owen*

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

PS Form 3811, December 1994

102595-96-B-0229

Domestic Return Receipt

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):

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

Consult postmaster for fee.

3. Article Addressed to:

Yates Drilling Company
105 South Fourth Street
Artesia, New Mexico 88210

4a. Article Number

7002 0510 0003 4612 9020

4b. Service Type

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

7. Date of Delivery

092302

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

7002 0510 0003 4612 9020

pt

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):

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

Consult postmaster for fee.

3. Article Addressed to:

Yates Drilling Corporation
Attention: Mr. Randy Patterson
105 South Fourth Street
Artesia, New Mexico 88210

4a. Article Number

7002 0510 0003 4612 8962

4b. Service Type

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

7. Date of Delivery

092302

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X

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

PS Form 3811, December 1994

7002 0510 0003 4612 8962

Receipt

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):

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

Consult postmaster for fee.

3. Article Addressed to:

Yates Petroleum Corporation
105 South Fourth Street
Artesia, New Mexico 88210

4a. Article Number

7000 1670 0000 0605 5836

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

092307

5. Received By: (Print Name)

PATTI CARLILE

6. Signature (Addressee or Agent)

Patti Carlile

X

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

Thank you for using Return Receipt Service.

PS Form 3811, December 1994

102595-98-B-0229

Domestic Return Receipt