

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 a Prehearing Statement substantially in the form prescribed should be filed by 4:00 o'clock p.m. on the Friday before

Very truly yours
Paul R. Owen
Paul R. Owen
Attorney for

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)

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(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

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

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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 y
Paul R.
Paul R. Owen
Attorney for

PRO/jr
Enclosure
cc: Great Western Drilling Company

7002 0510 0003 4612 9037

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
Sent To: David H. Arrington Oil & Gas Inc.	
Street, Apt. No.: Post Office Box 2071	
City, State, ZIP+4: Midland, Texas 79702	
PS Form 3800, January 2001	
See Reverse for Instructions	

SANTA FE, NM
SEP 19 2002
Postmark Here
USPS - 87501

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
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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 y
Paul R. Owen
Paul R. Owen
Attorney for

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

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

Paul R. Owen
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Santa Fe, New Mexico 87504-2307
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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:

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 a Prehearing Statement substantially in the form prescribed should be filed by 4:00 o'clock p.m. on the Friday before

Very truly
Paul R. Owen
Paul R. Owen
Attorney for

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
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	

PS Form 3800, January 2001 See Reverse for Instructions

MONTGOMERY & ANDREWS
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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*

Dear Gentlemen:

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Parties appearing in cases have been requested by 1
a Prehearing Statement substantially in the form prescribed
should be filed by 4:00 o'clock p.m. on the Friday before

Very truly y
Paul R. Owen
Paul R. Owen
Attorney for

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)	
David Petroleum Company	
Street, Apt. No., or PO Box No.	
116 West First Street	
City, State, ZIP+4	
Roswell, New Mexico 88201	

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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:

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 y

Paul R. Owen

Paul R. Owen
Attorney for

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; Care to be completed by mailer)

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

PS Form 3800, February 2000

See Reverse for Instructions

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

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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:

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,
Paul R. Owen
Paul R. Owen
Attorney for

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
Sent To	
Mr. Dale Douglas	
Post Office Box 10187	
Midland, Texas 79702	
PS Form 3800, January 2001	
See Reverse for Instructions	

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
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325 Paseo de Peralta
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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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this application, you may appear and present testimony.
a party of record will preclude you from challenging th

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a Prehearing Statement substantially in the form prescribe
should be filed by 4:00 o'clock p.m. on the Friday bef

Very truly

Paul R. Owen
Paul R. Owen
Attorney for

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

Postmark
SEP 19 2002
SANTA FE NM
PS 87501

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

MONTGOMERY & ANDREWS
PROFESSIONAL ASSOCIATION
ATTORNEYS AND COUNSELORS AT LAW

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powen@montand.com

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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:

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:

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
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	
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

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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

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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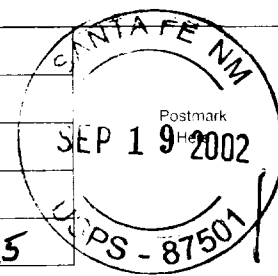
Very truly yours,

Paul R. Owen
Attorney for

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.
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

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*

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Very truly yours

Paul R. Owen

Paul R. Owen
Attorney for

PRO/jr

Enclosure

cc: Great Western Drilling Company

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

PRO

Postage \$

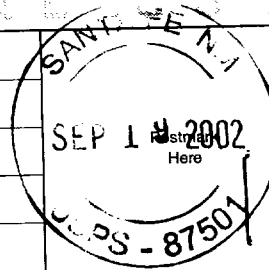
Certified Fee

Return Receipt Fee
(Endorsement Required)

Restricted Delivery Fee
(Endorsement Required)

Total Postage & Fees

\$ 4.65



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

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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:

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Very truly y

Paul R. Owen

Paul R. Owen
Attorney for

PRO/jr

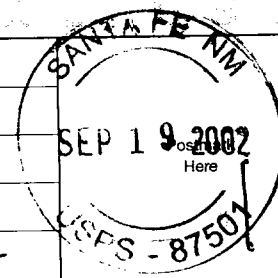
Enclosure

cc: Great Western Drilling Company

U.S. Postal Service
CERTIFIED MAIL RECEIPT
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PRO

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

PS Form 3800, January 2001

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MONTGOMERY & ANDREWS
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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.

This application has been set for hearing before a Division Examiner on October 10, 2002. You are not required to attend this hearing, but as an owner of this application, you may appear and present testimony. If a party of record will preclude you from challenging the

Parties appearing in cases have been requested by the court to file a Prehearing Statement substantially in the form prescribed should be filed by 4:00 o'clock p.m. on the Friday before the hearing.

Very truly yours,
Paul R. Owen
Paul R. Owen
Attorney for

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

Postmark: SEP 19 2002
SANTA FE NM
USPS - 87501

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

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 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.

This application has been set for hearing before a Division Examiner on October 10, 2002. You are not required to attend this hearing, but as an owner of this application, you may appear and present testimony. Failure to appear as a party of record will preclude you from challenging the

Parties appearing in cases have been requested by the Division to file a Prehearing Statement substantially in the form prescribed by the Division. The Prehearing Statement should be filed by 4:00 o'clock p.m. on the Friday before the hearing.

Very truly yours,

Paul R. Owen

Paul R. Owen
Attorney for

PRO/jr

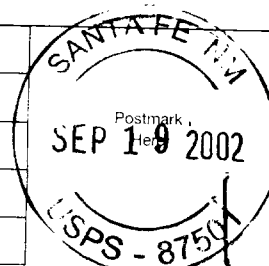
Enclosure

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



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*

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.

This application has been set for hearing before a Division Examiner on October 10, 2002. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the

Parties appearing in cases have been requested by a Prehearing Statement substantially in the form prescribed should be filed by 4:00 o'clock p.m. on the Friday before

Very truly,
Paul R. Owen
Paul R. Owen
Attorney for

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

Postmark
SEP 19 2002
SANTA FE NM
USPS 87501

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

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

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.

This application has been set for hearing before a Division Examiner on October 10, 2002. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging th

Parties appearing in cases have been requested by a Prehearing Statement substantially in the form prescribed should be filed by 4:00 o'clock p.m. on the Friday before

Very truly
Paul R. Owen
Paul R. Owen
Attorney for

PRO/jr
Enclosure
cc: Great Western Drilling Company

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

PRO

Postage \$

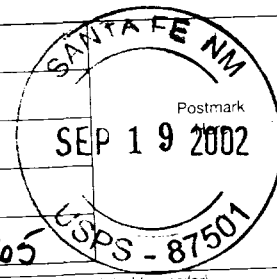
Certified Fee

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
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

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*

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.

This application has been set for hearing before a Division Examiner on October 10, 2002. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

Very truly y

Paul R. Owen

Paul R. Owen
Attorney for

PRO/jr

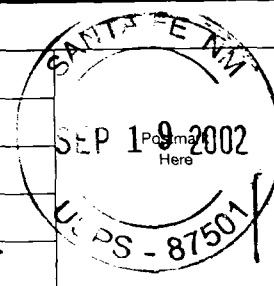
Enclosure

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



Sent To: Yates Drilling Company
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**

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:

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.

This application has been set for hearing before a Division Examiner on October 10, 2002. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear as a party of record will preclude you from challenging the

Parties appearing in cases have been requested by 1296B
a Prehearing Statement substantially in the form prescribed 2194B
should be filed by 4:00 o'clock p.m. on the Friday before 0000
0510 0003 4612 8962

Very truly y

Paul R. Owen

Paul R. Owen
Attorney for

PRO/jr

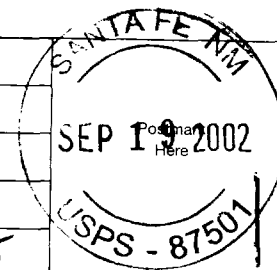
Enclosure

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



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

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:

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.

This application has been set for hearing before a Division Examiner on October 10, 2002. You are not required to attend this hearing, but as an owner of an interest that may be affected by this application, you may appear and present testimony. Failure to appear at that time and become a party of record will preclude you from challenging the matter at a later date.

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

Very truly

Paul R. Owen

Paul R. Owen
Attorney for

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
Postmark SEP 19 2002 USPS - 87501	
Recipient's Name (Please Print Clearly. To be completed by mailer)	
Yates Petroleum Corporation	
Street, Apt. No. or P.O. Box No.	
105 South Fourth Street	
City, State, ZIP+4	
Artesia, New Mexico 88210	

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:

Abo Petroleum Co
105 South Fourth Street
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)

PATTI CARLILE

6. Signature: (Addressee or Agent)

X

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:

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

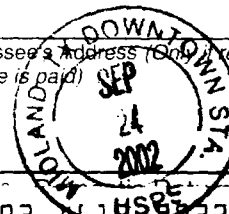
6. Signature: (Addressee or Agent)

X *[Signature]*

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

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:

- 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:

Tom Brown, Inc.
Post Office Box 2608
Midland, Texas 79702

4a. Article Number

7000 1670 0000 0605 6036

4b. Service Type

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

7. Date of Delivery

SEP 23 2002

5. Received By: (Print Name)

Bob R. Brown

6. Signature: (Addressee or Agent)

X

Bob R. Brown

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:

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

4a. Article Number

7001 1140 0002 5605 9316

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

Edward N. David

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

PS Form 3811, December

7001 1140 0002 5605 9316

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 Petroleum Company 116 West First Street Roswell, New Mexico 88201		4a. Article Number 7000 1670 0000 0605 6079	
		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>Elmer L. Berger</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: Davoil, Inc. Post Office Box 122269 Fort Worth, Texas 76121		4a. Article Number 7000 1670 0000 0605 6093	
		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) <i>M. McCallister</i>		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) X <i>M. McCallister</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:

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

4a. Article Number

7002 0510 0003 4612 8942

4b. Service Type

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

7. Date of Delivery

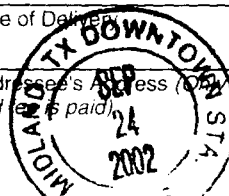
5. Received By: (Print Name)

Whitney Bowlin

6. Signature: (Addressee or Agent)

X W. Bowlin

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



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:

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

4a. Article Number

7001 1140 0002 5605 9830

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 Keith E. McKamey

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

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)

6. Signature: (Addressee or Agent)

X

Elana Lamberger

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

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.
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- 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)

6. Signature: (Addressee or Agent)

X

Robert L. Lamberger

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: McMillan Ventures, L.L.C. 116 West First Street Roswell, New Mexico 88201		4a. Article Number 7001 1140 0002 5605 9793	
		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 [Signature]			

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: <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: Myco Industries, Inc. 105 South Fourth Street Artesia, New Mexico 88210		4a. Article Number 7001 1140 0002 5605 9786	
		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 09 23 02	
5. Received By: (Print Name) DATTI CARLILE		8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) [Signature] X			

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.
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- 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...

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

7. Date of Delivery

23

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

5. Received By: (Print Name)

C Rivera

6. Signature: (Addressee or Agent)

X C Rivera

PS Form 3811, Decem 7002 0510 0003 4612 8955 n 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.
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- 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

7. Date of Delivery

9-23-02

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

5. Received By: (Print Name)

6. Signature: (Addressee or Agent)

X William B. Owen

PS Form 3811, Decembe 7002 0510 0003 4612 8931 Receipt

Thank you for using Return Receipt Service.

Is your RETURN ADDRESS completed on the reverse side?

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

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

Consult postmaster for fee.

3. Article Addressed to:

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)

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

6. Signature: (Addressee or Agent)

X *William G. Owen*

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:

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- 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)

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

6. Signature: (Addressee or Agent)

X *William G. Owen*

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: Yates Drilling Company 105 South Fourth Street Artesia, New Mexico 88210	4a. Article Number 7002 0510 0003 4612 9020	Thank you for using Return Receipt Service.
	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) PATL CARLILE	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 9020 pt

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: Yates Drilling Corporation Attention: Mr. Randy Patterson 105 South Fourth Street Artesia, New Mexico 88210	4a. Article Number 7002 0510 0003 4612 8962	Thank you for using Return Receipt Service.
	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) PATL CARLILE	8. Addressee's Address (Only if requested and fee is paid)	
6. Signature: (Addressee or Agent) X		
PS Form 3811, Decembe		7002 0510 0003 4612 8962 Receipt

Is your RETURN ADDRESS completed on the reverse side?

SENDER:

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- 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

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

7. Date of Delivery

092307

5. Received By: (Print Name)

PATTI CARLILE

6. Signature (Addressee or Agent)

X

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.