MERIDIAN

CASE # 10700 APRIL 8, 1993

EXHIBIT 1

KELLAHIN AND KELLAHIN

ATTORNEYS AT LAW EL PATIO BUILDING

W. THOMAS KELLAHIN*

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

117 NORTH GUADALUPE POST OFFICE BOX 2265

SANTA FE, NEW MEXICO 87504-2265

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

JASON KELLAHIN (RETIRED 1991)

March 15, 1993

Mr. William J. LeMay Oil Conservation Division State Land Office Building 310 Old Santa Fe Trail, Room 219 Santa Fe, New Mexico 87501

HAND DELIVERED

RE: Application of Meridian Oil, Inc. for Downhole Commingling,
San Juan County, New Mexico
Shiotani Federal Com #400 Well

Dear Mr. LeMay:

On behalf of Meridian Oil, Inc. please find enclosed our Application for downhole commingling as referenced above, which we request be set for hearing on the next available Examiner's docket now scheduled for April 8, 1993.

By copy of this letter and application, sent certified mail-return receipt requested, we are notifying all interested parties offsetting the subject well and its proposed spacing and proration unit of their right to appear at the hearing and participate in this case, including the right to present evidence either in support of or in opposition to the application and that failure to appear at the hearing may preclude them from any involvement in this case at a later date. Also, all parties entitled to notice are hereby informed that pursuant to Division requirements all parties appearing in this case are required to file a Pre-Hearing Statement with the Division no later than 4:00 p.m. on Friday, April 2, 1993.

Mr. William J. LeMay March 15, 1993 Page Two

Also enclosed is our suggested advertisement for this case.

W. Thomas Kellahin

WTK/jcl Enclosures

with Enclosures

Alan Alexander - Meridian Oil Inc.

By Certified Mail - Return Receipt
All Parties Listed on Exhibits B & C of Application

ltrt315.330

PROPOSED ADVERTISEMENT FOR THE OCD DOCKET

Case : Application of Meridian Oil Inc. for downhole commingling, San Juan County, New Mexico.

Applicant, in the above-styled cause, seeks approval to downhole commingle Fulcher-Kutz Pictured Cliffs Gas Pool and the Basin-Fruitland Coal Gas Pool production within the wellbore of its Shiotani Federal Com #400 Well which was drilled at a standard gas well location 870 feet FWL and 1630 feet FSL, (Unit L) Section 8, Township 29 North, Range 12 West, NMPM, San Juan County, New Mexico. Said well is dedicated to a standard 325.77-acre gas spacing unit for the Basin-Fruitland Coal Gas Pool being W/2 of Section 8 and is to be dedicated to a standard 164.44-acre gas spacing unit for the Fulcher-Kutz Pictured Cliffs Gas Pool being the SW/4 of Section 8. The well is located approximately 3 miles east from Farmington, New Mexico.



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

IN THE MATTER OF THE HEARING CALLED BY THE OIL CONSERVATION DIVISION FOR THE PURPOSE OF CONSIDERING:

CASE	NO.	

APPLICATION OF MERIDIAN OIL INC. FOR DOWNHOLE COMMINGLING SAN JUAN COUNTY, NEW MEXICO.

APPLICATION

Comes now MERIDIAN OIL INC. ("Meridian"), by and through its attorneys, Kellahin and Kellahin, and applies to the New Mexico Oil Conservation Division for approval to downhole commingle Fulcher-Kutz Pictured Cliffs Gas Pool and the Basin-Fruitland Coal Gas Pool production within the wellbore of its proposed Shiotani Federal Com #400 Well which has been drilled at a standard gas well location 870 feet FWL and 1630 feet FSL, (Unit L) Section 8, Township 29 North, Range 12 West, NMPM, San Juan County, New Mexico and completed in the Basin Fruitland Coal Gas Pool. The W/2 of Section 8 is currently dedicated to the subject well forming a standard 325.77acre gas spacing unit for the Basin-Fruitland Coal Gas Pool. The SW/4 of Section 8 is to be dedicated to the subject well forming a standard 164.44-acre gas spacing unit for the Fulcher-Kutz Pictured Cliffs Gas Pool.

In support of its application, Meridian states:

- (1) Meridian is the operator of the Shiotani Federal Com #400 Well located at a standard gas well location 870 feet FWL and 1630 feet FSL (Unit L), Section 8, Township 29 North, Range 12 West, NMPM, San Juan County, New Mexico as shown on Exhibit "A" attached.
- (2) The Well has been drilled so that production from the Basin-Fruitland Coal Gas Pool and the Fulcher-Kutz Pictured Cliffs Gas Pool can be downhole commingled in the wellbore.
- (3) The W/2 of Section 8, containing 325.77 acres, is dedicated to any production from the Basin Fruitland Coal Gas Pool which is spaced on 320-acre gas spacing units.
- (4) The SW/4 of Section 8, containing 164.44 acres, is to be dedicated to any production from the Fulcher-Kutz Pictured Cliffs Gas Pool which is spaced on 160-acre gas spacing units.
- (5) The ownership is different between these two spacing units.
- (6) In accordance with Division Rule 303-C-1.(b), the Applicant states and will demonstrate at hearing:

- a. That commingling the Basin Fruitland Coal Gas Pool in the Shiotani Federal Com #400 Well with that of the Fulcher-Kutz Pictured Cliffs Gas Pool is necessary because it is not otherwise economic to attempt to drill and complete a separate well for the Pictured Cliffs gas production nor is it economic to attempt to dually complete those formations in the proposed well.
- b. That there will be no crossflow between the two zones commingled.
- c. That while the ownership in each of the two spacing units is not common between the two pools, no impairment of correlative rights will occur.
- d. It is expected that the bottom hole pressure of the lower pressure zone is not less than 50 percent of the bottom hole pressure of the higher pressure zone adjusted to a common datum.
- e. That the value of the commingled production will not be less than the sum of the values of the individual production.
- (6) Both the Pictured Cliffs and Fruitland Coal formations in this area of the basin should be marginally productive.

- (7) Meridian has drilled the proposed well in the SW/4 instead of the NW/4 of Section 8 because that location appears to have a greater opportunity for a successful although marginal Fruitland formation well.
- (8) Due to the nature of the Basin-Fruitland Coal Gas production, straight allocation of gas volumes from both zones is not appropriate. Meridian therefore seeks the adoption of a monthly allocation formula, to be proposed at the hearing in this matter.
- (9) The ownership between the Basin Fruitland Coal Gas Pool spacing unit and the Blanco Pictured Cliffs Pool spacing unit is not identical and accordingly, applicant seeks the approval of the Division after notice and hearing.
- (10) Applicant requests that this matter be docketed for hearing on the Division's Examiner docket now scheduled for April 8, 1993.
- (11) Copy of this application has been sent to all offsetting operators and to the owners of interests in the affected production within the two spacing units as set forth on Exhibits "B" and "C."

WHEREFORE Applicant requests that this matter be set for hearing on April 8, 1993 before a duly appointed Examiner of the Oil Conservation Division and that after notice and hearing as required by law, the Division enter its order granting this application.

Respectfully submitted,

W. Thomas Kellahin KELLAHIN and KELLAHIN

P. O. Box 2265

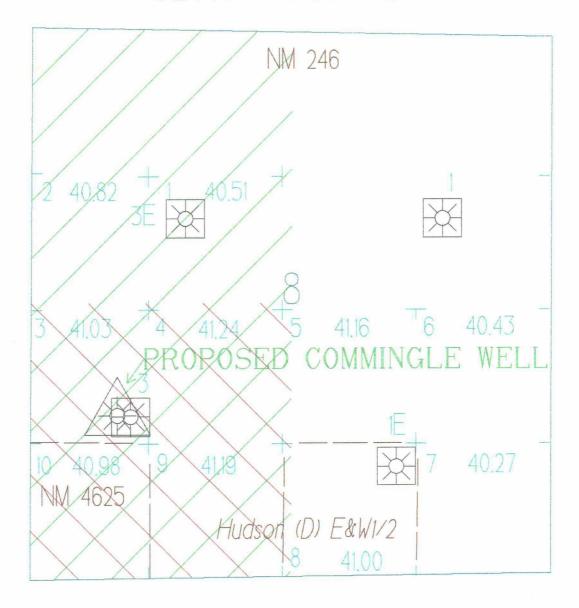
Santa Fe, New Mexico 87501

(505) 982-4285

Attorneys for Applicant

appt315.330

SHIOTANI FEDERAL COM # 400 WELL 870'FWL, 1630'FSL SECTION 8-29N-12W



FRUITLAND COAL WELL

FRUITLAND COAL SPACING UNIT

DAKOTA WELL

PICTURED CLIFFS SPACING

EXHIBIT "B"

SHIOTANI FEDERAL COM #400 W/2 (Fruitland Coal), SW/4 (Pictured Cliffs)

ROYALTY OWNER United States of America

OVERRIDING ROYALTY OWNERS

Amoco Production Company P. O. Box 800 1670 Broadway Denver, CO 80201

Mr. George E. Conley P. O. Box 99 Parker, CO 80134 Sabine Royalty Trust Interfirst Bank Dallas N.A. Department 0887 Dallas, TX 75284-0887

Mr. Ben R. Howard 3807 Cypresswood Dr. Spring, TX 77388-5729

WORKING INTEREST OWNERS

El Paso Production Company c/o Meridian Oil Inc. Attn: Van Goebel P. O. Box 4289 Farmington, NM 87499-4289

Conoco, Inc. Attn: James W. Fitzpatrick 10 Desta Drive West Midland, TX 79705

Mr. Frederick Eugene Turner One Energy Square, #852 4925 Greenville Avenue Dallas, TX 75206-4079

Mr. John Lee Turner 5801 Branding Green Plano, TX 75093

Ms. Elizabeth J. Turner Calloway 4801 St. Johns Dallas, TX 75205

Mr. James Glenn Turner, Jr. 3131 Turtle Creek Blvd., Suite 1201 Dallas, TX 75219 Mr. Frank A Shultz Attn: Aaron L. Colvin Lincoln Plaza Suite 2160 LB-1 500 North Akard Dallas, TX 75201-3318

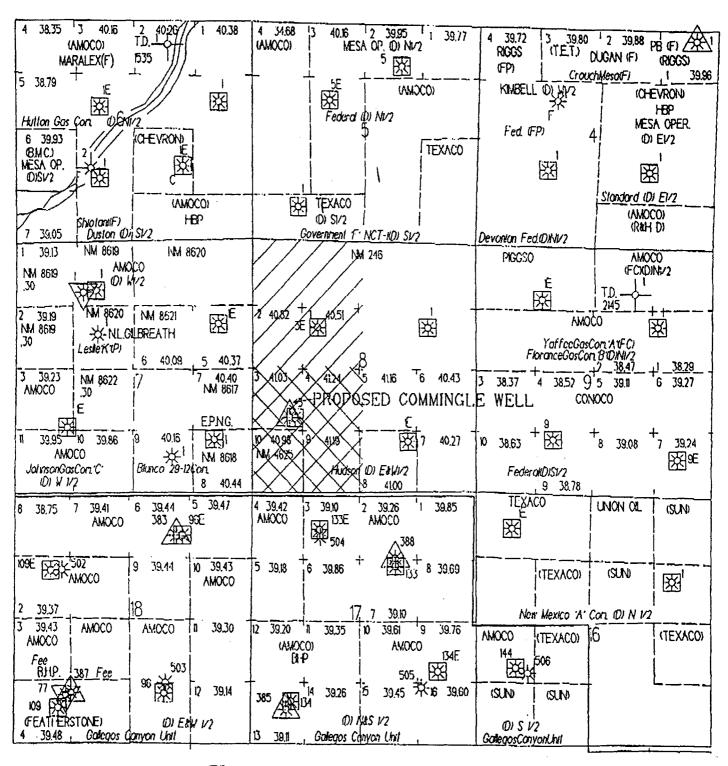
Ms. Virginia Long Linthicum Attn: R. J. Smith 2626 Cole Avenue, Suite 603 Dallas, TX 75204

C. W. Murchison Estate Trust B c/o C. W. Murchison III 6116 N. Central Expressway Suite 1300 Dallas, TX 75206

Mary Frances Turner Trust Attn: Iris Gleiser 1201 Elm Street, 31st Floor Dallas, TX 75270

Mr. William Webb 1525 Elm Street, 2nd Floor Dallas, TX 75201

SHIOTANI FEDERAL COM # 400 WELL 870'FWL, 1630'FSL SECTION 8-29N-12W



** PICTURED CLIFFS WELL ** DAKOTA WELL **

FRUITLAND COAL WELL **

FRUITLAND SAND WELL



FRUITLAND COAL SPACING UNIT



PICTURED CLIFFS SPACING

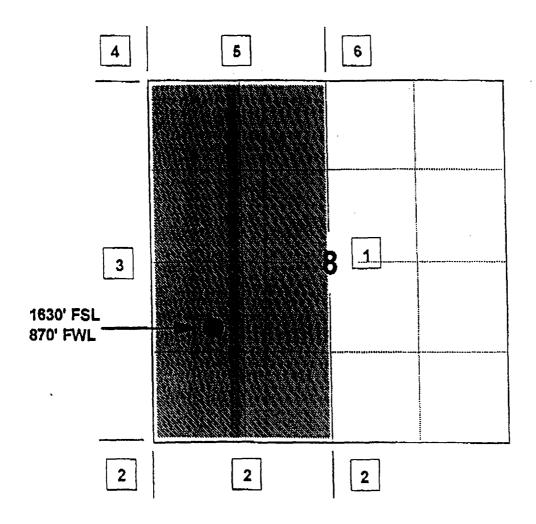
MERIDIAN OIL INC

SHIOTANI FEDERAL #400

OFFSET OPERATOR \ OWNER PLAT

Fruitland Coal / Pictured Cliffs Formations Commingle

Township 29 North, Range 12 West



See Attached List.		 	·		,
					
		 		· · · · · · · · · · · · · · · · · · ·	
	······································	 · · · · · · · · · · · · · · · · · · ·			
		 	·		
•					****
					····

Meridian Oil Inc. P.O. Box 4289 Farmington, NM 87499-4289

Amoco Production Company P.O. Box 800 Denver, CO 80201

Norman L. Gilbreath P.O. Box 208 Aztee, NM 87410

Dugan Production Corp. P.O. Box 420 Farmington, NM 87499

John J. Redfern P.O. Box 50896 Midland, TX 79710

John J. Christman 1500 Broadway, Suite 800 Lubbock, TX 79401

Jack Markham 1st Nat'l-Pioneer Bldg., Suite 500 1500 Broadway Lubbock, TX 79401

J. H. Herd P.O. Box 130 Midland, TX 79701

Texaco Exploration & Producing Inc. P.O. Box 46555
Denver, CO 80201-6555

Conoco, Inc. 10 Desta Drive, Suite 100W Midland, TX 79705-4500

Palmer Oil & Gas Company P.O. Box 1257 Billings, MT 59103

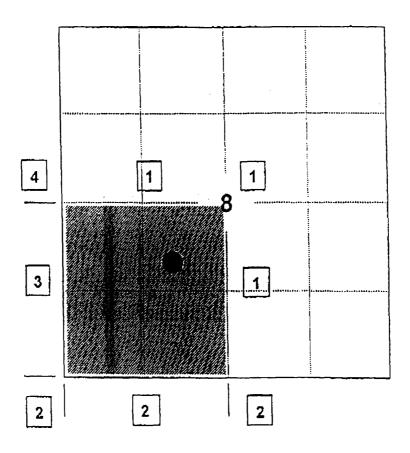
MERIDIAN OIL INC

SHIOTANI FEDERAL #400

OFFSET OPERATOR PLAT

Fruitland Coal \ Pictured Clliffs Comingle

Township 29 North, Range 12 West



See Attached List			
	···		
····			

EXHIBIT "C" Page 5 of 5

Meridian Oil Inc.
 P.O. Box 4289
 Farmington, NM 87499-4289

Conoco Inc. 10 Desta Drive, Suite 100W Midland, TX 79705-4500

Frank A. Schultz Attn: Mr. Aaron L. Colvin Lincoln Plaza, Suite 2160 LB-1, 500 North Akard Dallas, TX 75201-3318

Elizabeth Jeanne Turner Calloway 4801 St. Johns Drive Dallas, TX 75205

J. Glenn Turner Jr. 3131 Turtle Creek Blvd. Suite 1201 Dallas, TX 75219

Frederick Eugene Turner One Energy Square, Suite 853, 4925 Greenville Ave. Dallas, TX 75205

John Lee Turner
P.O. Box 797215
Dallas, TX 75379-7215

Mary Frances Turner Jr. c/o MBank Dallas, Trustee (Trust #3095) P.O. Box 951412 Dallas, TX 75395-1412

William G. Webb 1525 Elm Street, Second Floor Dallas, TX 75201

Estate of C. W. Murchison Bankers Trust Company of Texas 1445 Ross Ave. Ste 2600 LB 201 Dallas, TX 75202

Virgina L. Linthicum Attn: R. J. Smith, Jr. 2626 Cole Ave., Suite 603LB 63 Dallas, TX 75204 Amoco Production Company
 P.O. Box 800
 Denver, CO 80201

3.) Norman L. Gilbreath P.O. Box 208
Aztec, NM 87401

4.) Amoco Production Company
P.O. Box 800
Denver, CO 80201

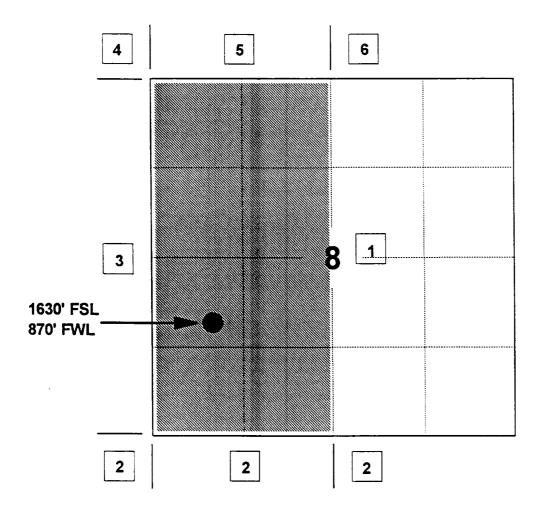
Dugan Production Corp. P.O. Box 420 Farmington, NM 87499 EXHIBIT 2

MERIDIAN OIL INC

SHIOTANI FEDERAL #400 OFFSET OPERATOR \ OWNER PLAT

Fruitland Coal / Pictured Cliffs Formations Commingle

Township 29 North, Range 12 West



See Attached List			
	•		
		- 	

Meridian Oil Inc. P.O. Box 4289 Farmington, NM 87499-4289

Amoco Production Company P.O. Box 800 Denver, CO 80201

Norman L. Gilbreath P.O. Box 208 Aztec, NM 87410

Dugan Production Corp. P.O. Box 420 Farmington, NM 87499

John J. Redfern P.O. Box 50896 Midland, TX 79710

John J. Christman 1500 Broadway, Suite 800 Lubbock, TX 79401

Jack Markham 1st Nat'l-Pioneer Bldg., Suite 500 1500 Broadway Lubbock, TX 79401

J. H. Herd P.O. Box 130 Midland, TX 79701

Texaco Exploration & Producing Inc. P.O. Box 46555
Denver, CO 80201-6555

Conoco, Inc. 10 Desta Drive, Suite 100W Midland, TX 79705-4500

Palmer Oil & Gas Company P.O. Box 1257 Billings, MT 59103

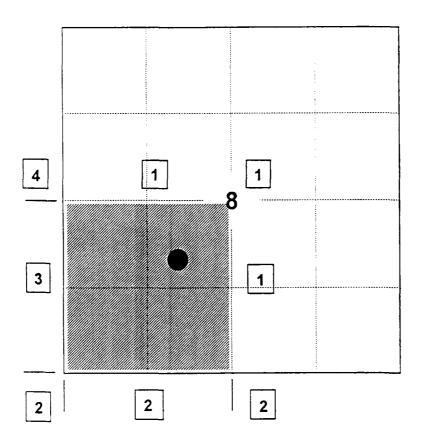
MERIDIAN OIL INC

SHIOTANI FEDERAL #400

OFFSET OPERATOR PLAT

Fruitland Coal \ Pictured Clliffs Comingle

Township 29 North, Range 12 West



See Attached L	ist			·	
-					
				<u></u>	
				<u></u>	
					· · · · · · · · · · · · · · · · · · ·

1.) Meridian Oil Inc. P.O. Box 4289 Farmington, NM 87499-4289

> Conoco Inc. 10 Desta Drive, Suite 100W Midland, TX 79705-4500

Frank A. Schultz Attn: Mr. Aaron L. Colvin Lincoln Plaza. Suite 2160 LB-1, 500 North Akard Dallas, TX 75201-3318

Elizabeth Jeanne Turner Calloway 4801 St. Johns Drive Dallas. TX 75205

J. Glenn Turner Jr.
3131 Turtle Creek Blvd.
Suite 1201
Dallas, TX 75219

Frederick Eugene Turner
One Energy Square, Suite 853, 4925 Greenville Ave.
Dallas, TX 75205

John Lee Turner
P.O. Box 797215
Dallas, TX 75379-7215

Mary Frances Turner Jr. c/o MBank Dallas, Trustee (Trust #3095) P.O. Box 951412 Dallas, TX 75395-1412

William G. Webb 1525 Elm Street, Second Floor Dallas, TX 75201

Estate of C. W. Murchison Bankers Trust Company of Texas 1445 Ross Ave. Ste 2600 LB 201 Dallas, TX 75202

Virgina L. Linthicum Attn: R. J. Smith, Jr. 2626 Cole Ave., Suite 603LB 63 Dallas, TX 75204 2.) Amoco Production Company P.O. Box 800 Denver, CO 80201

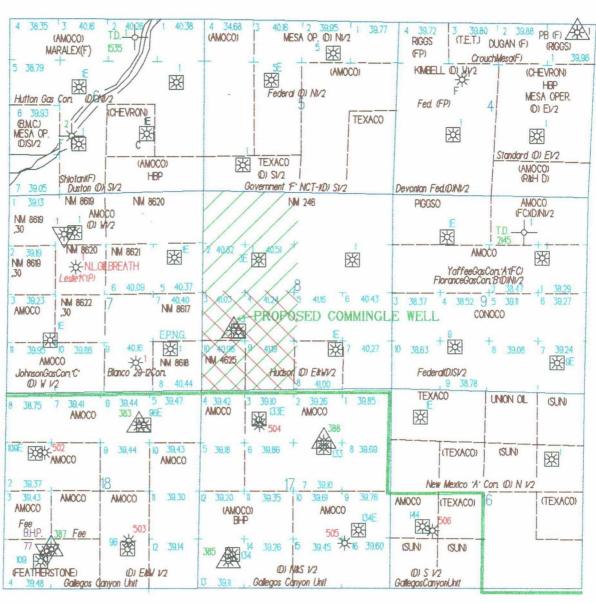
3.) Norman L. Gilbreath P.O. Box 208
Aztec, NM 87401

4.) Amoco Production Company P.O. Box 800 Denver, CO 80201

> Dugan Production Corp. P.O. Box 420 Farmington, NM 87499

EXHIBIT 3

SHIOTANI FEDERAL COM # 400 WELL 870'FWL, 1630'FSL SECTION 8-29N-12W



** PICTURED CLIFFS WELL ** DAKOTA WELL **

FRUITLAND COAL WELL **

FRUITLAND SAND WELL

FRUITLAND COAL SPACING UNIT

PICTURED CLIFFS SPACING

EXHIBIT "A"

Attached to and made a part of that certain Operating Agreement dated December 3, 1992, between Meridian Oil Inc., as Operator, and Non-Operators.

I. LANDS SUBJECT TO OPERATING AGREEMENT:

Township 29 North, Range 12 West

Section 8:

W/2 (325.77 acres), SW/4 (164.44 acres),

E/2 (322.86 acres), NE/4 (160.00 acres)

II. RESTRICTIONS, IF ANY, AS TO DEPTHS OR FORMATIONS:

Limited in depth from the surface to the base of the Pictured Cliffs formation.

III. ADDRESSES AND PERCENTAGES OR FRACTIONAL INTERESTS OF PARTIES TO THIS AGREEMENT:

FRUITLAND COAL FORMATION (W/2, E/2) AND PICTURED CLIFFS FORMATION (SW/4, NE/4)

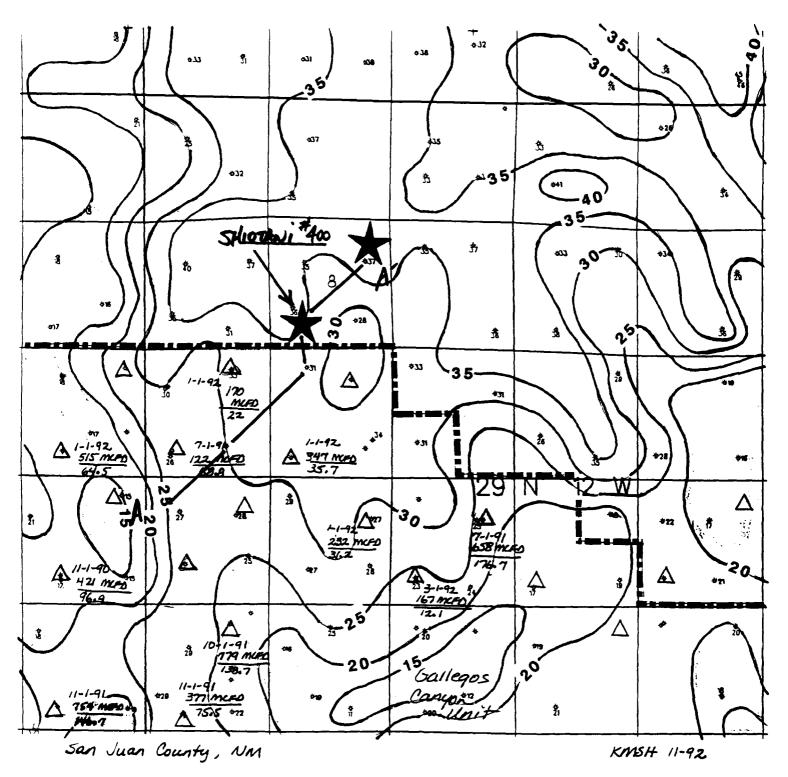
Meridian Oil Inc. c/o Land Department P.O. Box 4289 Farmington, New Mexico 87499-4289

OPERATOR

WOF	KING INTEREST O Shiotani Feder	Sh'iotani Federal #500		
El Paso Production Company c/o Meridian Oil Inc. Attn: Van Goebel P.O. Box 4289 Farmington, NM 87499-4289 505-326-9759	W/2 (FC) 61.718750%	SW/4 (PC) 67.187500%	E/2 (FC) & <u>NE/4 (PC)</u> 56.250000%	
Conoco Inc. Attn: Steve Klein 10 Desta Drive West Midland, TX 79705	21.875000%	18.750000%	25.000000%	
Mr. Frederick Eugene Turner One Energy Square, #852 4925 Greenville Avenue Dallas, TX 75206-4079 214-361-7010	1.039063%	0.890625%	1.187500%	
Mr. John Lee Turner 5801 Branding Green Plano, Texas 75093 214-248-9077	1.039062%	0.890625%	1.187500%	
Ms. Elizabeth J. Turner Calloway 4801 St. Johns Dallas, Texas 75205 214-969-7422	1.039062%	0.890625%	1.187500%	

E	XHIBIT "A" CON		Shotani Federal
Mr. James Glenn Turner, Jr. 3131 Turtle Creek Blvd., Suite 12 Dallas, Texas 75219 214-521-2800	Shiotani Feolera W/2 (FC) 1.039062% 01	SW/4 (PC) 0.890625%	E/2 (FC) & NE/4 (PC) 1.187500%
Mary Frances Turner Trust Attn: Iris Gleiser 1201 Elm Street, 31st Floor Dallas, TX 75270 214-712-3460	1.039063%	0.890625%	1.187500%
Mr. William Webb 1525 Elm Street, 2nd Floor Dallas, TX 75201 214-954-0989	0.273438%	0.234375%	0.312500%
Mr. Frank A. Shultz Attn: Aaron L. Colvin Lincoln Plaza Suite 2160 LB-1 500 North Akard Dallas, TX 75201-3318 214-954-0030	5.468750%	4.687500%	6.250000%
Virginia Long Linthicum Attn: Mr. R. J. Smith 2626 Cole Avenue, Suite 603 Dallas, TX 75204	2.734375%	2.343750%	3.125000%
C. W. Murchison Estate Trust B c/o C. W. Murchison III 6116 N. Central Expressway Suite 1300 Dallas, TX 75206	<u>2.734375%</u>	<u>2.343750%</u>	3.125000%
TOTAL	100.000000	100.000000%	100.000000%

EXHIBIT 4



FRUITLAND COAL I sopach Map Net Clean Coal Thickness CI = 5 Feet

Production Map 1-1-92 = date of first production

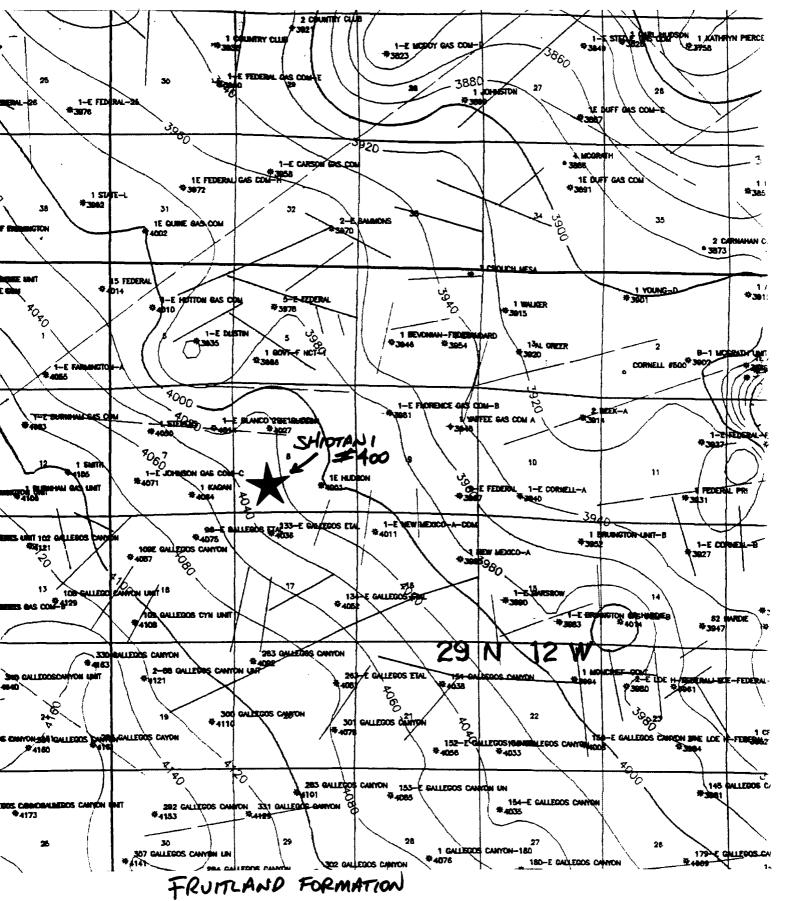
· May 1992 ave daily rate · Cum frod through 5.92 MMCF

/sopach

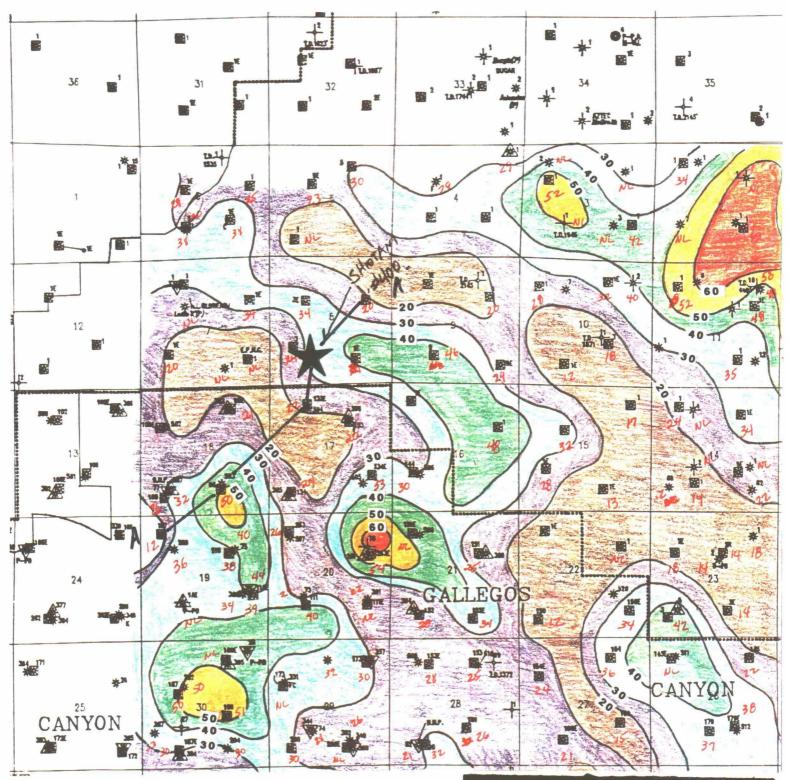
☐ 0-10 Rest

10-20 feet

20-30 feet 30-40 feet



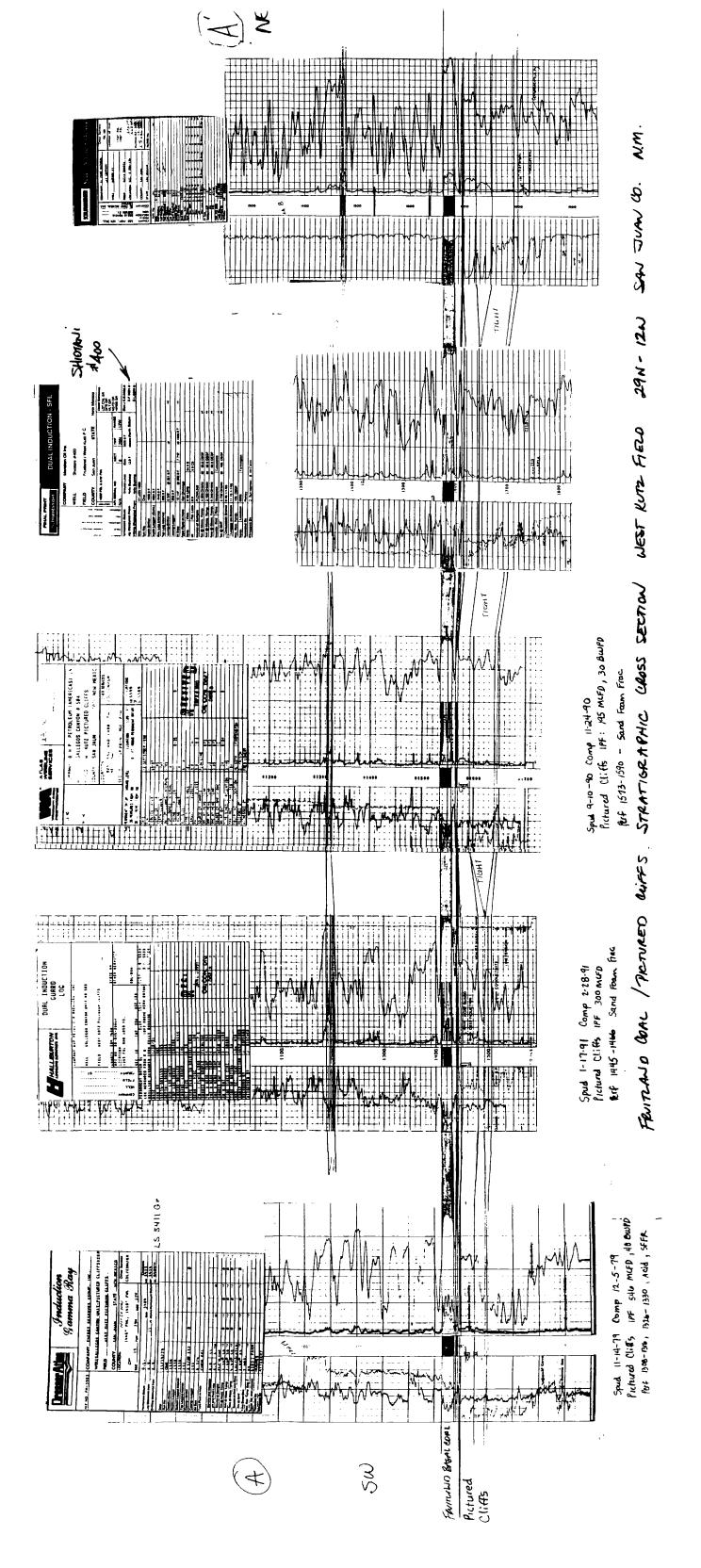
BASE OF COAL STRUCTURE MAP 1"=4000' CONTOUT INTERVAL ZO FT



MERIDIAN OIL

PICTURE CLIFFS FM NET PAY ISOPACH R+> SHALE BASELINE SP> (-) 10 MV

CONTOUR INTERVAL = 10 FT



ì

SHIOTANI FEDERAL #400

MONTHLY GAS PRODUCTION ALLOCATION FORMULA

GENERAL EQUATION:

Qt = Qftc + Qpc

WHERE: Qt = TOTAL MONTHLY PRODUCTION (MCF/MONTH)

Qftc = FRUITLAND COAL (FTC) MONTHLY PRODUCTION (MCF/MONTH)

Qpc = PICTURED CLIFFS (PC) MONTHLY PRODUCTION (MCF/MONTH)

REARRANGING THE EQUATION TO SOLVE FOR Qftc:

Qftc = Qt - Qpc

ANY PRODUCTION RATE OVER WHAT IS CALCULATED FOR THE PICTURED CLIFFS (PC) USING THE APPLIED FORMULA IS FRUITLAND COAL (FTC) PRODUCTION.

PICTURED CLIFFS (PC) FORMATION PRODUCTION FORMULA IS:

 $Qpc = Qpci * e^{-(Dpc)*(t)}$

WHERE: Qpci = INITIAL PC MONTHLY FLOW RATE (CALCULATED FROM FLOW TEST)

Dpc = PICTURED CLIFFS MONTHLY DECLINE RATE DETERMINED FROM:

MATERIAL BALANCE (FIELD ANALOGY): VOLUMETRIC RESERVES (LOG ANALYSIS) G f(P*)= 0.83 MMCF/PSI x P*x Rf

P* = INITIAL RESERVOIR PRESSURE (7 DAY SIBHP Rf = RECOVERY (FIELD ANALOGY):= 0.85

THUS: Qftc = Qt - Qpci * $e^{-(Dpc)}(t)$

WHERE: (t) IS IN MONTHS

REFERENCE: Thompson, R. S., and Wright, J. D., "Oil Property Evaluation", pages 5-2, 5-3.

SHIOTANI FEDERAL #400

DETERMINATION OF Qpci: (INITIAL PICTURED CLIFFS MONTHLY PRODUCTION)

 $Qpci = Qt(1) * Qpc(p) \setminus \{Qpc(p) + Qftc(p)\}$

WHERE:

Qt(1) = FIRST MONTH TOTAL PRODUCTION (MCF)

Qpc(p)= FINAL PICTURED CLIFFS FLOW TEST (MCFPD)

Qftc(p)= FINAL FRUITLAND COAL FLOW TEST (MCFPD)

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

IN THE MATTER OF THE HEARING CALLED BY THE OIL CONSERVATION DIVISION FOR THE PURPOSE OF CONSIDERING:

CASE NO. 10700

APPLICATION OF MERIDIAN OIL INC. FOR DOWNHOLE COMMINGLING, SAN JUAN COUNTY, NEW MEXICO.

CERTIFICATE OF MAILING

AND

COMPLIANCE WITH ORDER R-8054

W. THOMAS KELLAHIN, attorney in fact and authorized representative of MERIDIAN OIL INC., states that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on March 17, 1993, I caused to be mailed by certified mail return-receipt requested notice of this hearing and a copy of the application for the above referenced case along with the cover letter, at least twenty days prior to the hearing set for April 8, 1993, to the parties shown in the application as evidenced by the attached copies of return receipt cards, and that pursuant to Division Rule 1207, notice has been given at the correct addresses provided by such rule.

W. Thomas Kellahin

SUBSCRIBED AND SWOR April, 1993.	N to before me this 57% day of
	Notary Public
My Commission Expires:	BEFORE EXAMIN

cert402.330

DEFORE EXAMINER CATANACH

OIL CONSERVATION DIVISION

Meridia EXHIBIT NO.

CASE NO. 10700

Receipt for Certified Mail No Insurance Coverage Provided

Amoco Production Company P.O. Box 800 1670 Broadway Denver, CO 80202

	· 14 34	\$
ļ	.exig≘ a	1,
	Series on the first	
	Restricts a Delivina Feri	
ת מ	Reform Reselpt ontwing to World is Date Selvered	1. —
June	Herum Rei e.pt. Showing to Whom: Date, and Addresses v Address	
	TOTAL Postage & Fees	\$
S Form Soud,	Moud Shota DHC 3/16/0	ii 400 13

E 25 SEA EEL 9

Rece Cert

Receipt for Certified Mail

L . No Insurance Coverage Provided

Sabine Royalty Trust Interfirst Bank Dallas Department 0887 Dallas, TX 75284-0887

	Adstage	\$						
Ì	Cernit va Fee	1.						
	Suena Dervery Ree							
une 1991	Restricted Delivery Fee							
	Raturn Receipt Snowing to Whom & Date Delivered	1						
	Return Receipt Showing to Whom Date, and Addressee's Address							
ر. ا	TOTAL Postage & Fees	\$						
PS Form 3800 , June 199	Mend - Shotani 400 DHC - 3/16/93							

complete items 1 and/or 2 for additional services. Complete items 3 and 4s & b. Ifficially the card to you. Signature (Addressee)

Thank you tot using Return Receipt Service.									٠.					
	I also wish to receive the	following services (for an extra fee):	1. Addressee's Address	2. Restricted Delivery Consult postmaster for fee	4a. Article Number	33 833 254	4b. Service Type		Express Mail	7. Date of Delivery	-3/19/93 M	8. Addressee's/Address (Only if requested and fee is paid)		DOMESTIC RETURN RECEIPT
	SENDER:	We complete items 3, and 4a & b. We see Print your name and address on the reverse of this form so that we can be accompanied to the contract of the contract	A Attach this form to the front of the maliplace, or on the back if space	With The Therming Receipt Requested" on the mailpiece below the article number. The Therm Receipt will show to whom the article was delivered and the date collinered.	5. Article Addressed to:	Mr George B Con Son		Parker, CO 80134	Expre	7. Date	Mars Ship ami	Signature Noderessee)	Significate (Agent)	PS Form 3811, December 1991 # U.S.G.P.O.: 1992-307-530 DC

Form 3811 December 1991 u.S.G.P.O. 1992-307-530 DOMESTIC RETURN RECEIPT

1.0

3 5 AM

《全国教育》	。"李丽等这 有 是一个分子的也是是有一种的主义是一个
SENDER:	It also wish to receive the
Complete frems: Land/or 2 for additional services.	
" Cookpere here Stend 4e & b	following services (for an extra 60
The collection said address on the reverse of this torm so the reverse of this torm so the reverse of this control of the mailplece. Of on the back	
Wine 'Return Receipt Requested' on the mailpiece below the ar	ticle number 3 2 D Restricted Delivery
The Figure Receipt will show to whom the article was delivered delivered.	and the date Gonsult postmaster for fee.
3. Article Addressed to:	4a. Article Number
Tagle Mawlehau	4b. Service Type
Jack Markham	4b. Service Type
1st Nat. Pioneer Bldg 1500 Broadway, #500	Hegistered Linsured
Lubbock, TX 79401	Certified
	Express Mail Return Receipt for 5
	7. Date of Delivery
Mena Shirtens	3-22-23
5. Signature (Addressee)	8. Addressee's Address (Only if requested
Manus Denee	and fee is paid)
6. Signature (X) (gent)	7. · · · · · · · · · · · · · · · · · · ·
	and the same of the same of the same of
'S Form 3811, December 1991 4 U.S.G.P.O. 1992-3	07-530 DOMESTIC RETURN RECEIPT
(1) 大学 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	17.130.130.130.130.130.130.130.130.130.130
HELDER TO BE STORE THE STORE OF	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
SENDER:	also wish to receive the
W. T. Complete stamp? and As L hall this was a second	
Print your name and address on the reverse of this form so the return this card to you.	at we can fee):
Attach this form to the front of the mailpiece, or on the back	if space 1. Addressee's Address
does not permit. Write "Return Receipt Requested" on the mailpiece below the an	ticle number 2. Restricted Delivery
 The Return Receipt will show to whom the article was delivered a delivered. 	and the date
3. Article Addressed to:	Consult postmaster for fee.
C.W. Murchison Estate	# 133 - 832 260 \$ 4b. Service Type
Trust B/C.W. MurchisonIII	4b. Şervice Type
Trust B/C.W. MurchisonIII 6116 N. Central Exprsway	I in neglistered to thisured?
	Express Mail Return Receipt for
Dallas, TX 75206	
Suite 1300 Dallas, TX 75206	7. Date of Delivery
Maid Shiptoni	3//9/93 a
5. Signature (Addressee)	8. Addressee's Address (Only if requested
	and fee is paid)
5. Signature (Addressee) 6. Signature (Agent) Cultif	
PS Form 3811, December 1991 & U.S.G.P.O.: 1992-30	7-530 DOMESTIC RETURN RECEIPT
SENDER: Complete items 1 and/or 2 for additional services.	
	I also wish to receive the
• Print your name and address on the reverse of this form so the	following services (for an extra
Print your name and address on the reverse of this form so the return this card to you. Attach this form to the front of the mailpiece, or on the back does not permit.	
o	6
Write "Return Receipt Requested" on the mailpiece below the art The Return Receipt will show to whom the article was delivered a	and the date 2. Restricted Delivery
5 delivered. 3. Article Addressed to:	Consult postmaster for fee.
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	4a. Article Number
delivered. 3. Article Addressed to: C.W. Murchison Estate c/o Bankers Trust Co. 1445 Ross Ave Suite 2600 LB 201 Dallas, TX 75202	Ab Service Time
C.W. Murchison Estate c/o Bankers Trust Co.	4b. Service Type ☐ Registered ☐ Insured
1445 Ross Ave	Certified COD
Suite 2600 LB 201	Express Mail Return Receipt for
Dallas, TX 75202	Merchandise 7. Date of Delivery
X	MAD 2-2 1000
5. Signature (Addressee)	8 Addresses's Address (Only 18
2 (Y Bush	8. Addressee's Address (Only if requested and fee is paid)
6. Signature (Agent)	1
PS Form 3811, December 1991 # NUS. GPO: 1992-323	HOS DOMESTIC PETUDA PROFILE
MA MINISTER OF THE PROPERTY OF THE PROPERTY AND	

SENDER: LEAN TO THE SECOND	
☑ Complete items 1 and/o 2 (or add	
Proprovous raine no scenes and	
= return this care to your 22	
Attack this form to the form of the control of	A CONTRACTOR OF THE PROPERTY O
C does not permit.	
Write "Return Receipt Requested" on the melipiecs below the	Za a flesing relation of
E delivered.	Consult postmaster for fee
3. Article Addressed to:	4a. Article Number
	0122 837 777 5
	100000000
Palmer Oil & Gas Co.	4b. Service Type
n o Boy 1257	☐ Registered & ☐ Insured # 34 34 34 34 34 34 34 34 34 34 34 34 34
P.O. BOX 123	Contified COD COD
Billings, MT 59103	Estidum Reserve on a
Billings, MT 59103	Merchandise
	7. Date of Delivery
Mend Shirtani	1 5-75-75 T 8
5. Signature (Addressee)	8. Addressee's Address (Only it requested -
5 Of Digitators (Addresses)	and fee is paid
I 6. Signature (Agent)	The state of the s
DC Corm 2011 Document 10018 1000	
PS Form 381.1 , December 1991. *U.S.G.P.O.; 1992.	ASSESSIONES IN HEIGHWITE GENERAL
· · · · · · · · · · · · · · · · · · ·	
SENDER:	
Complete trans 1 and/or 2 for 1 and 2 and 3	The decided with the tensor are the S
Complete items 1 and/or 2 for as a troy a service : Complete items 3, and 4e & 6. Print your name and address on the diverse of injections.	and and residuous services are sure to the
Print your name and address on the reverse of this formula	The second secon
Tetum this card to you	
Attach this form to the front of the maliplece, or on the be does not permit.	eck if space 🕳 👺 🗓 🔼 Addressee s Address 👙 🚜
Write "Return Receipt Requested" on the mailpiece below the	
The Return Receipt will show to whom the article was deliver	article number. Z Restricted Delivery
delivered.	Consult postmaster for fee.
3. Article Addressed to:	4a Article Number
John J. Redfern	P133,832 276 1
전	
John J. Redfern	4b. Service Type
	Registered & Insured & C
P.O. Box 50896	Lertified E COD 5
Midland, TX 79710	☐ Express Mail
	Merchandise
Mend Smotani	7. Date of Delivery 100a
Z	The state of the s
5. Signature (Addressee)	8. Addressee's Address (Only if requested
F MILL MAN COUL	and fee is paid)
6 Signature (Agent)	
6. Signature (Agent)	YII X 10 14 24 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
QYou Had to deal the last like the	
p PS Form 3811, December 1991 & U.S.G.P.O. 1992	\$07-530 DOMESTIC RETURN DECEIRT
	Maria Santa
· · · · · · · · · · · · · · · · · · ·	"我们就是我们的,我们是我们的,我们就是我们的。"
SENDER:	AT THE THE PROPERTY OF THE PARTY OF THE PART
• Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b.	also wish to receive the
Print your name and address on the reverse of this form so	following services (for an extra- 🗘
return this card to you.	that we can fee):
Print your name and address on the reverse of this form so return this card to you. Attach this form to the front of the mailpiece, or on the bad does not permit.	ck if space 1. Addressee's Address
	at 1994, play for 1996 the area of the same of the sam
Write "Return Receipt Requested" on the mailplece below the The Return Receipt will show to whom the article was delivered.	article number. 2. Restricted Delivery
delivered.	Consult postmaster for fee
3. Article Addressed to:	4a. Article Number
	12172 921 OCT
Mr. Frank A. Shultz	100 100 100 10 10 10 10 10 10 10 10 10 1
ATTN: Aaron L. Colvin	4b. Service Type
o Alin. Adion ii. Colvin	Registered Insured
Lincoln Plaza #2160 LB1 🖔	Certified COD
500 North Akard	
Dallas, TX 75201-3318	Express Mail Return Receipt for Merchandise
ATTN: Aaron L. Colvin Lincoln Plaza #2160 LB1 500 North Akard Dallas, TX 75201-3318	7. Paterof Belivern
Man A Chirtain	MAN A TIDOU
5. Signature (Addressed)	
5. Signature (Addressee)	8. Addressee Address (Only in requested
5. Signature (Addressee) is	8. Addressee s Address (Only intercuested Case and recits rold)

PS Form 381// December 1951 B-USGP OF 59-30 4504 DOMESTIC RETURNING DEP

 Complete items 1 and/or 2 for additional services. Complete items 3, and 4a & b. 	
• Complete items 3, and 4a & b	I also wish to receive the
 Print your name and address on the reverse of this form so the 	following services (for an extra
return this card to you.	
 Attach this form to the front of the mailpiece, or on the back does not permit. 	if space 1. 🗐 Addressee's Address
 Write "Return Receipt Requested" on the mailpiece below the ar 	
The Return Receipt will show to whom the article was delivered delivered.	and the date Consult postmaster for fee.
delivered. 3. Article Addressed to:	4a. Article Number
	P133 832 262
Mary Frances Turner Trust	
ATTN: Iris Gleiser	4b. Service Type Registered Insured
1201 Elm Street	
31st Floor	Dertified COD
Dalla- ma	Express Mail Return Receipt for Merchandise
Dallas, TX 75270	7 0
Meng Shrotani	MAR 22 1993
5. Signature (Addressee) <	8. Addressee's Address (Only if requeste
3. Signature (Addresse)	and fee is paid)
	-
6. Signature (Agent)	•
~ /	
PS Form 3811 , December 1991 ☆ U.S.G.P.O.: 1992-3	307-530 DOMESTIC RETURN RECEIP
SENDER:	
SENDER: Complete items 1 and/or 2 for additional services.	I also wish to receive the
 Complete items 3, and 4a & b. 	following services (for an extra
 Print your name and address on the reverse of this form so the return this card to you. 	hat we can fee):
return this card to you. Attach this form to the front of the mailpiece, or on the back	· _
does not permit.	
 Write "Return Receipt Requested" on the mailpiece below the ar The Return Receipt will show to whom the article was delivered 	rticle number. 2. Restricted Delivery
delivered.	Consult postmaster for fee.
3. Article Addressed to:	4a. 'Article Number /
	P133 832 264
Mr. William Webb	4b. Service Type
1525 Elm Street	Registered Insured
2nd Floor	Certified COD
Dallas, TX 75201	
barras, in 19201	Express Mail Return Receipt for Merchandise
_	7. Date of Delivery
mend Shiotan	1 7 - 22 5 7
5. Signature (Addressee)	8. Addressee's Address (Only if requeste
5. Signature (Addressee)	Addressee's Address (Only if requeste and fee is paid)
5. Signature (Addressee)	Addressee's Address (Only if requeste and fee is paid)
5. Signature (Addressee)	Addressee's Address (Only if requeste and fee is paid)
5. Signature (Addressee) 6. Signature (Agent) Lawara CovAv	and fee is paid)
5. Signature (Addressee) 6. Signature (Agent) Lawrence CovAv	and fee is paid)
5. Signature (Addressee) 6. Signature (Agent) Lawara CovAv	and fee is paid)
5. Signature (Addressee) 6. Signature (Agent) Lawrence CovAv	and fee is paid)
5. Signature (Addressee) 6. Signature (Agent) White PS Form 3811, December 1991 Jus.G.P.O.: 1992-30	and fee is paid)
5. Signature (Addressee) 6. Signature (Agent) Lawrence CovAv	and fee is paid)
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991	and fee is paid) 07-530 DOMESTIC RETURN RECEIP I also wish to receive the following services (for an extra
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 ** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so	and fee is paid) 07-530 DOMESTIC RETURN RECEIP I also wish to receive the following services (for an extra
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 ** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bar	ond fee is paid) O7-530 DOMESTIC RETURN RECEIP I also wish to receive the following services (for an extraction fee):
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 ** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddoes not permit.	and fee is paid) 07-530 DOMESTIC RETURN RECEIP I also wish to receive th following services (for an extraction fee): 1. \(\text{Addressee's Address} \)
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 ** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the	and fee is paid) 07-530 DOMESTIC RETURN RECEIP I also wish to receive th following services (for an extreme): 1. Addressee's Addresse article number and the date 2. Restricted Delivery
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number and and the date) I also wish to receive the following services (for an extraction number and the date) I also wish to receive the following services (for an extraction number and the date) I also wish to receive the following services (for an extraction number and the date) I also wish to receive the following services (for an extraction number and the date) I also wish to receive the following services (for an extraction number and nu
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number and and the date) 1. Addressee's Address exampled and the date 2. Restricted Delivery Consult postmaster for fee.
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number and and the date) I also wish to receive the following services (for an extraction number and the date) I also wish to receive the following services (for an extraction number and the date) I also wish to receive the following services (for an extraction number and the date) I also wish to receive the following services (for an extraction number and the date) I also wish to receive the following services (for an extraction number and nu
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number and and the date) 1. Addressee's Address exampled and the date 2. Restricted Delivery Consult postmaster for fee.
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number end and the date) 1. Addressee's Addressed and the date 2. Restricted Delivery Consult postmaster for fee. 4a. Article Number Consult postmaster for fee. 4b. Service Type Registered Insured
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number end and the date) 1. Addressee's Addressed and the date 2. Restricted Delivery Consult postmaster for fee. 4a. Article Number Consult postmaster for fee. 4b. Service Type Registered Insured
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number ed and the date of the service services (for an extraction number ed and the date of the service servi
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number ed and the date) 1. Addressee's Addressed and the date 2. Restricted Delivery Consult postmaster for fee. 4a. Article Number Consult postmaster for fee. 4b. Service Type Registered Insured COD Return Receipt for Merchandise
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	or-530 DOMESTIC RETURN RECEIP I also wish to receive the following services (for an extraction number ed and the date) 1. Addressee's Address earticle number consult postmäster for fee. 4a. Article Number consult postmäster for fee. 4b. Service Type Registered Insured consult postmäster for fee. Express Mail Return Receipt for Receipt
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the The Return Receipt will show to whom the article was delivered.	I also wish to receive the following services (for an extraction number ed and the date) 1. Addressee's Addressed and the date 2. Restricted Delivery Consult postmaster for fee. 4a. Article Number Consult postmaster for fee. 4b. Service Type Registered Insured COD Return Receipt for Merchandise
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 **JU.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bad does not permit. • Write "Return Receipt Requested" on the mailpiece below the endivered. • The Return Receipt will show to whom the article was delivered delivered. 3. Article Addressed to: Elizabeth J. Turner CALLOWAY 4801 St. Johns	I also wish to receive the following services (for an extraction fee): 1. Addressee's Address earticle number ed and the date 2. Restricted Delivery Consult postmaster for fee. 4a. Article Number Consult postmaster for fee. 4b. Service Type Registered Insured Express Mail Return Receipt for Merchandise 7. Date of Delivery 8. Addressee's Address (Only if reques
6. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 *** U.S.G.P.O.: 1992-30 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the baddes not permit. • Write "Return Receipt Requested" on the mailpiece below the the Return Receipt will show to whom the article was delivered.	or-530 DOMESTIC RETURN RECEIP I also wish to receive the following services (for an extraction number and the date) 1. Addressee's Addresse article number. 2. Restricted Delivery Consult postmaster for fee. 4a. Article Number 2. Restricted Delivery 2. Restricted Delivery 3. 832 4b. Service Type Registered Insured Certified COD Express Mail Return Receipt for Merchandise 7. Date of Delivery 3. 19.93

PS Form 3811, December 1991 × U.S.G.P.O.: 1992-307-530 DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and/or 2 for additional services.		I also wish to receive the
		following services (for an extra
 Print your name and address on the reverse of this form so that 	at we can	fee):
return this card to you. • Attach this form to the front of the mailpiece, or on the back if the part permit.	f space	following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icle Number 5 568 378 rvice Type
does not permit. Write "Return Receipt Requested" on the mailpiece below the arti		2. Restricted Delivery
Write "Return Receipt Requested on the mainless book and the The Return Receipt will show to whom the article was delivered a	ind the date	Consult postmaster for fee.
delivered.		icle Number
3. Article Addressed to:	P35	5 568 378
5		rvice Type
John Lee Turner	Regi	intered Insured
P.O. Box 797215	Cert	
Dallas. TX 75379-7215		
John Lee Turner P.O. Box 797215 Dallas. TX 75379-7215 Signature Addresseel Signature (Agent)		Mérchandise
men i Shotani	7. Dat	e of Delivery
A Trum a suctum		
5. Signature Addresseel	8. Add	dressee's Address Only if reguested
5 Com 2 ~ Mun	allu	Hee is paid)
6. Signature (Agent)		F
A Cignotate Kings		
PS Form 3811, December 1991 &U.S. GPO: 1992-33	23-402 [OMESTIC RETURN RECEIPT
ν		
SENDER: Complete items 1 and/or 2 for additional services. Complete items 3, and 4a & b.		I also wish to receive the
		following services (for an extra
 Print your name and address on the reverse of this form s return this card to you. 	so that we	^{can} fee):
 Attach this form to the front of the mailpiece, or on the b 	ack if spac	e 1. 🗆 Addressee's Address
	na articla nu	mher a Classical and a constant and
 The Return Receipt will show to whom the article was delive 		date 2. Li Restricted Delivery
5 delivered. 3. Article Addressed to:	140	Consult postmaster for fee. Article Number
Mr. John Lee Turner 5801 Branding Green Plano, TX 75093	10	133 831 261
Mr. John Lee Turner	1	133 875 ZOI
5801 Branding Green		
Plano, TX 75093		Certified COD
99		Certified COD Express Mail Return Receipt for Merchandise Date of Delivery
NC NC	<u> </u>	Merchandise
	7.	Date of Delivery
The month of the same		3=19-73
5. Signature (Addressee	8.€	Address (Only if requested
	/ st	and fee is paid)
6 Signatur (Aromi)	[v]	3.(
o The follow	/ 3	NU S
2 P8 Form 3811 - December 1991	2 -307-530∕	NDOMESTIC RETURN RECEIPT
+ /	_	
-		· · · ·
C:		
SENDER: • Complete items 1 and/or 2 for additional services.		I also wish to receive the
• Complete items 3, and 4a & b.		
• Print your name and address on the reverse of this form so to return this card to you.	that we car	fee):
• Attach this form to the front of the mailpiece, or on the bac	k if space	following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. article Number 355 56 379 Fervice Type
O - With the property Description and the second second second	article numb	er a Danier in
 The Return Receipt will show to whom the article was delivered 		er 2. Restricted Delivery te
delivered.	\ A = -	Consult postmaster for fee.
3. Article Addressed to:	4a. A	article Number
e d	12	355 568 379
Ē		ervice Type
8 Mary F. Turner, Jr.		gistered Insured
MBank Dallas, Trustee	4	~ D . D
P.O. Box 951412	∐ Ex	press Mail Return Receipt for Herchandise
Dallas, TX 75395-1412	7. Da	ate/of Del/verv
Mary F. Turner, Jr. MBank Dallas, Trustee P.O. Box 951412 Dallas, TX 75395-1412 S. Signature (Addressee) Mary F. Turner, Jr. MBank Dallas, Trustee P.O. Box 951412 Dallas, TX 75395-1412 Must Shirtum 6. Signature (Agent)	1 3	3/22/93
5. Sign sture (Addressee) /	8. Ac	dressee's Address (Only if requested
2 / Yulsinhor.	an	d fee is paid)
6. Signature (Agent)		ž F
AND THE PROPERTY OF THE PARTY O	1	

SENDER: Complete items 1 and/or 2 for additional services.		I also wish to receive the
Complete items 3, and 4a & b.		following services (for an extra
 Print your name and address on the reverse of this form so th 		fee):
return this card to you.	1	1. Addressee's Address
 Attach this form to the front of the mailpiece, or on the back does not permit. 	II Space	1. Addlessee a Address
 Write "Feturn Receipt Requested" on the mailpiece below the art 	icle number.	2. Restricted Delivery
 The Return Receipt will show to whom the article was delivered a 	and the date	
delivered.		Consult postmaster for fee.
3. Article Addressed to:		2 020 175
	P13	3 832 275
Texaco Exploration	4b. Serv	ice Type
& Production Co.	│	tered Insured
P.O. Box 46555	Certif	ied /³□ COD
	Expre	ss Mail Return Receipt for
Denver, CO 80201-6555	· .	Merchandise
	7. Date	of Delivery
maid Shottani	1	`シ// ヂ
5. Signature (Addressee)	8. Addr	ssee's Address (Only if requested
	and f	ee is paid)
C. Simonia (Amonta)	4	ied COD ss Mail Return Receipt for Merchandise of Delivery ssee's Address (Only if requested ee is paid)
6. Signature (Agent)		
PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-30	7-530 DC	MESTIC RETURN RECEIPT
SENDER:		
Complete items 1 and/or 2 for additional services.		I also wish to receive the
Complete items 3, and 4a & b.		following services (for an extra
 Print your name and address on the reverse of this form so return this card to you. 	hat we can	fee):
· Attach this form to the front of the mailpiece, or on the back	k if space	1. Addressee's Address
does not permit.		
 Write "Return Receipt Requested" on the mailpiece below the a The Return Receipt will show to whom the article was delivered 		2. Restricted Delivery
delivered.	and the date	Consult postmaster for fee.
3. Article Addressed to:	4a. Art	cle Number
	P13	3 832 259
Exadoriak Eugano Murnar	1	vice Type
Frederick Eugene Turner	Regi	
One Energy Square, #852	3DCert	
4925 Greenville Avenue	1-	
Dallas, TX 75206-4079	☐ Expr	ess Mail Return Receipt for Merchandise
	7. Date	of Delivery
, A.—.		
M. Jelina	>	
5 Significan (Addressed) Mend Shittlem	0 84d	rosponia Addreso Dalviš roguanta
5. Signature (Addressee)		ressee's Address (Only if requested
		ressee's Address (Only if requested fee is paid)
5. Signature (Addressee)		
5. Signature (Addressee) 6. Signature (Agent)	and	fee is paid)
5. Signature (Addressee)	and	
5. Signature (Addressee) 6. Signature (Agent)	and	fee is paid)
5. Signature (Addressee) 6. Signature (Agent)	and	fee is paid)
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 & U.S.G.P.O.: 1992-3	and	fee is paid)
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 & U.S.G.P.O.: 1992-3 SENDER: • Complete items 1 and/or 2 for additional services.	and	OMESTIC RETURN RECEIPT I also wish to receive the
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 & U.S.G.P.O.: 1992-3 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b.	and	OMESTIC RETURN RECEIPT I also wish to receive the following services (for an extra
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-3 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so	and	OMESTIC RETURN RECEIPT I also wish to receive the
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 & U.S.G.P.O.: 1992-3 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac	and 107-530 D	OMESTIC RETURN RECEIPT I also wish to receive the following services (for an extra
5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, December 1991 ☆ U.S.G.P.O.: 1992-3 SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bacdoes not permit.	and both and that we can k if space	I also wish to receive the following services (for an extra fee): 1. Addressee's Address
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	and 107-530 Di	I also wish to receive the following services (for an extra fee): 1. Addressee's Address
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	and 107-530 Di	I also wish to receive the following services (for an extra fee): 1. Addressee's Address
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and and the date	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee.
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space article number d and the date	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icle Number 3.3 832 265
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art PIZ	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icle Number 3.3.832.265 rvice Type
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art P 3	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icle Number 3 3 8 3 2 265 rvice Type istered Insured
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art Pb. Se	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icide Number 3 3 8 3 2 265 rvice Type stered Insured ified COD
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art Pb. Se	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icle Number 3 3 3 2 265 rvice Type istered Insured ified COD ress Mail Return Receipt for
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art P 3 3 4b. Se Reg	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icicle Number 3.3 832 265 rvice Type istered Insured iffied COD ress Mail Return Receipt for Merchandise
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art P 3 3 4b. Se Reg	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icle Number 3 3 3 2 265 rvice Type istered Insured ified COD ress Mail Return Receipt for
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art P 3 4b. Se Reg Cert Exp. 7. Date	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. cicle Number 3.3 8.3.2 265 rvice Type istered Insured ified COD ress Mail Return Receipt for Merchandise a of Delivery
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art P 3 4b. Se Reg Exp. 7. Date 8. Add	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icicle Number 3.3 8.3 2 265 rvice Type istered Insured iffied COD ress Mail Return Receipt for Merchandise at Delivery ressee's Address (Only if requeste
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art P 3 4b. Se Reg Exp. 7. Date 8. Add	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. cicle Number 3.3 8.3.2 265 rvice Type istered Insured ified COD ress Mail Return Receipt for Merchandise a of Delivery
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bac does not permit. • Write "Beturn Receipt Requested" on the mailpiece below the.	that we can k if space and the date 4a. Art P 3 4b. Se Reg Exp. 7. Date 8. Add	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icicle Number 3.3 8.3 2 265 rvice Type istered Insured iffied COD ress Mail Return Receipt for Merchandise at Delivery ressee's Address (Only if requeste
SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so return this card to you. • Attach this form to the front of the mailpiece, or on the bacdoes not permit. • Write "Return Receipt Requested" on the mailpiece below the. • The Return Receipt will show to whom the article was delivere delivered. 3. Article Addressed to: James Glenn Turner, Jr. 3131 Turtle Creek Blvd. Suite 1201 DAllas, TX 75219	that we can k if space and the date 4a. Art P 3 4b. Se Reg Exp. 7. Date 8. Add	I also wish to receive the following services (for an extra fee): 1. Addressee's Address 2. Restricted Delivery Consult postmaster for fee. icicle Number 3.3 8.3 2 265 rvice Type istered Insured iffied COD ress Mail Return Receipt for Merchandise at Delivery ressee's Address (Only if requeste