

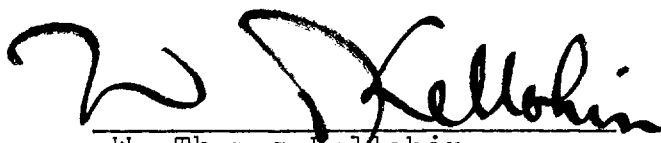
STATE OF NEW MEXICO
ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
OIL CONSERVATION DIVISION

IN THE MATTER OF THE
APPLICATION OF MERIDIAN OIL, INC.
FOR COMPULSORY POOLING,
SAN JUAN COUNTY, NEW MEXICO

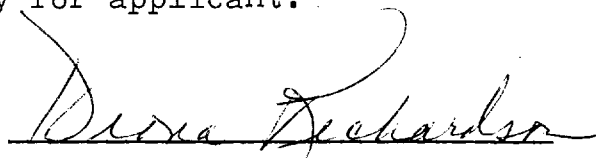
CASE: 9599

CERTIFICATE OF MAILING
AND
COMPLIANCE WITH ORDER R-8054

In accordance with Division Rule 1207 (Order R-8054) I hereby certify that on January 4, 1989, I caused to be mailed by certified mail, return receipt, a 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 February 1, 1989 to the parties shown in the Application as evidenced by the attached copy of the return receipt cards.


W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me this February 1, 1989
by W. Thomas Kellahin, attorney for applicant.


Notary Public

My Commission Expires:

Oct 28, 1989

Tom - Meridian Stanolind Com 300

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☒ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: BHP Petroleum (Americas) Inc 5613 DTC Parkway, Suite 600 Englewood, Colorado 80111 Attn: Land Department	4. Article Number P-484 059 649
5. Signature - Address X <i>D. Comer</i>	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery JAN 10 1989	8. Addressee's Address (ONLY if requested and fee paid)

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT

Tom - Meridian Stanolind Com 300

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this card from being returned to you. The return receipt fee will provide you the name of the person delivered to and the date of delivery. For additional fees the following services are available. Consult postmaster for fees and check box(es) for additional service(s) requested.

1. ☒ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Mesa Operating L ⁴⁶ Prtnship P.O. Box 2009 Amarillo, TX 79189 Attn: Mr. Mark Seale	4. Article Number P-484 059 651
5. Signature - Address X	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail <input type="checkbox"/> Return Receipt for Merchandise
6. Signature - Agent X <i>R. Seale</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
7. Date of Delivery JAN 26 1989	8. Addressee's Address (ONLY if requested and fee paid) <i>Fee not Paid</i>

PS Form 3811, Mar. 1988 * U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT