

1 STATE OF NEW MEXICO
2 ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT
3 OIL CONSERVATION DIVISION
4 STATE LAND OFFICE BUILDING
5 SANTA FE, NEW MEXICO

6 15 March 1989

7 EXAMINER HEARING

8 IN THE MATTER OF:

9 Application of Amoco Production Company CASE
10 for six non-standard gas proration units, 9621
11 San Juan County, New Mexico.

12 BEFORE: Michael E. Stogner, Examiner
13
14

15 TRANSCRIPT OF HEARING
16

17 A P P E A R A N C E S
18

19 For the Division:

Robert G. Stovall
Attorney at Law
Legal Counsel to the Division
State Land Office Bldg.
Santa Fe, New Mexico

20
21
22 For Amoco Production
Company:

William F. Carr
Attorney at Law
CAMPBELL and BLACK, P. A.
P. O. Box 2208
Santa Fe, New Mexico 87501
23
24
25

I N D E X

C, ALAN WOOD

Direct Examination by Mr. Carr 3

Cross Examination by Mr. Stogner 11

E X H I B I T S

Amoco Exhibit One, Plat 6

Amoco Exhibit Two, Tabulation 8

Amoco Exhibit Three, Land Office Survey 9

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1 MR. STOGNER: Call next Case
2 Number 9621.

3 MR. STOVALL: Application of
4 Amoco Production Company for six nonstandard gas prora-
5 tion units, San Juan County, New Mexico.

6 MR. STOGNER: Call for appear-
7 ances.

8 MR. CARR: May it please the
9 Examiner, my name is William F. Carr, with the law firm
10 Campbell & Black, P. A. of Santa Fe. We represent Amoco
11 Production Company and I have one witness.

12 MR. STOGNER: Are there any
13 other appearances?

14 Mr. Carr?

15
16 (Witness sworn.)

17
18 C. ALAN WOOD,
19 being called as a witness and being duly sworn upon his
20 oath, testified as follows, to-wit:

21
22 DIRECT EXAMINATION

23 BY MR. CARR:

24 Q Will you state your full name for the
25 record, please?

1 A C. Alan Wood.

2 Q Mr. Wood, where do you reside?

3 A Denver, Colorado.

4 Q By whom are you employed and in what
5 capacity?

6 A I'm employed by Amoco Production Com-
7 pany as the Denver Region Proration Unitization Manager.

8 Q Have you previously testified before
9 this Division and had your credentials accepted and made a
10 matter of record?

11 A Yes, I have.

12 Q How were you qualified at that time, as
13 an engineer?

14 A As a petroleum engineer.

15 Q Are you familiar with the application
16 filed in this case on behalf of Amoco Production Company?

17 A Yes, I am.

18 Q And are you familiar with the nonstand-
19 ard proration units which are the subject of this applica-
20 tion?

21 A Yes, I am.

22 MR. CARR: Are the witness'
23 qualifications acceptable?

24 MR. STOGNER: They are.

25 Q Mr. Wood, would you briefly state what

1 Amoco is seeking in this case?

2 A Amoco is requesting that the Division
3 approve six nonstandard gas proration units in San Juan
4 County, New Mexico, as exceptions to Division Order R-8768,
5 which established the Basin Fruitland Gas Pool.

6 Q Mr. Wood, did Amoco originally seek ad-
7 ministrative approval of these nonstandard units?

8 A By letter dated December 30th, 1988, we
9 contacted the Aztec Office of the Division and indicated we
10 were going to file an application with the Division seeking
11 approval of the nonstandard units.

12 Q And was an application filed in this
13 matter dated February 17, 1989?

14 A Yes, it was.

15 Q And what the reason, to your understand-
16 ing, that this matter was required to come before the Div-
17 ision for hearing?

18 A The Basin Fruitland Coal Gas Pool order
19 created 320-acre spacing or, excuse me, proration units.
20 It granted an acreage tolerance of 75 to 125 percent of
21 that 320-acre figure.

22 Within that particular order exceptions
23 were provided for variations in legal subdivisions of the
24 public survey when a number of criteria was met. In parti-
25 cular that the unit consist of contiguous 40-acre tracts

1 and that the unit was completely within the governmental
2 section.

3 Our request was precipitated
4 because of the nonstandard proration units as we are re-
5 commending them actually crossed section lines and there-
6 for would be an exception to the terms of the Basin Fruit-
7 land Coal Gas Pool order.

8 Q Have you prepared certain exhibits for
9 introduction in this case?

10 A Yes, I have.

11 Q Would you refer to what has been marked
12 as Amoco Exhibit Number One, identify that, and review it
13 for Mr. Stogner?

14 A Exhibit Number One is a plat showing the
15 six recommended nonstandard gas proration units, as well as
16 the other governmental sections in the immediate area. On
17 the plat itself we have indicated with a dashed line the
18 area that we are recommending be looked at for the creation
19 of six nonstandard units and within that by the slashed
20 line and also by virtue of the letter designation, are the
21 six nonstandard proration units that we are recommending.

22 In conjunction with that we've also in-
23 dicated on this particular exhibit the ownership of the
24 acreage within the six nonstandard proration units as well
25 as the offsetting governmental sections.

1 Q How many wells currently exist on these
2 nonstandard units?

3 A There's only one coal well existing at
4 this point in time within the six recommended nonstandard
5 proration units and that would be found in Tract C and
6 I've indicated the location of that well with a gas well
7 symbol.

8 Q Is that well at a standard location?

9 A Yes, it is. That well is the Salmon Gas
10 Com J No. 1. It was completed on January 22 of 1988. It's
11 currently producing approximately 150 MCFD. The footage
12 distance from the south line of Unit C is approximately
13 1185 feet, which is in excess of 790-foot setback required
14 under the terms of the spacing order.

15 Q Now, Mr. Wood, are there nonstandard
16 units -- are these nonstandard units approved for other
17 formations in the -- in this area?

18 A Yes, they are. There's been a number of
19 Division orders that have been entered that have created
20 very similar, if not exactly the same, nonstandard prora-
21 tion units for both the Dakota formation and also the Mesa-
22 verde.

23 More specifically, Commission Order
24 R-564 issued December 20th, 1954, created nonstandard pro-
25 ration units for the Mesaverde formation which would equate

1 to what we are recommending on Exhibit One as Tracts A and
2 B.

3 Also, in March -- on March 12th, 1956,
4 under Division Order R-771, a similar nonstandard prora-
5 tion unit was created for what we refer to as Tract C in
6 our Exhibit Number One.

7 Tract D was created for the Mesaverde
8 under Division Order R-1096, entered December 18th, 1957;
9 Tract E was created for the Mesaverde under Division Or-
10 der R-1097, entered December 18th, 1957; and Tract F was
11 also created for the Mesaverde under Division Order 1098,
12 also entered December 18th, 1957.

13 In conjunction, under Order R-2046, en-
14 tered August 14th, 1961, similar nonstandard proration
15 units were created for the Dakota formation.

16 Q Would you now refer to Amoco Exhibit
17 Number Two, identify that and review that, please?

18 A Exhibit Number Two is a tabulation of
19 the tracts by letter designation that we are recommending
20 for the nonstandard proration units. We've indicated the
21 actual acreage content within each one of those, the sec-
22 tion in which the acreage would be found, and then a de-
23 scription of the acreage that would comprise the nonstand-
24 ard gas proration unit.

25 Q All right, would you now identify Amoco

1 Exhibit Number Three?

2 A Okay. Amoco's Exhibit Number Three is a
3 copy of the government land office survey dated July 2nd,
4 1952. This is for the township that contains the six non-
5 standard gas proration units. They are found in Sections
6 6, 7, 18, 19 and 30, which are the far western tier of
7 sections indicated on this plat.

8 This plat would also indicate the acre-
9 age content of each one of those sections and it does show
10 the fact that these are nonstandard governmental sections.

11 Q Attached to the February 17, 1989, ap-
12 plication was a list of all offsetting owners to whom
13 notice is required to be given under Rule 1207, is that
14 correct?

15 A Yes, it is.

16 Q Is Exhibit Number Four a copy of the
17 either return letters or return receipts from each of the
18 interest owners set forth on that list that was attached to
19 the original application?

20 A We have furnished this Exhibit Number
21 Four, copies or in fact the originals of the return re-
22 ceipts for all of the ones that we have received. There
23 were also two individuals that we did not or we have, I
24 guess, the entire mailing returned. We were unable to lo-
25 cate a different address for those individuals.

1 There is one individual indicated on the
2 attachment to the original application that we have not yet
3 received a return receipt from.

4 Q And who is that?

5 A That was the Mary Frances Turner, Jr.
6 Trust.

7 Q In your opinion has Amoco made a good
8 faith effort to locate all of the affected interest owners
9 and provide the notice that is required by the Division
10 rules?

11 A Yes, it has.

12 Q In your opinion will granting this ap-
13 plication be in the best interest of conservation, the
14 prevention of waste and the protection of correlative
15 rights?

16 A Yes, it will.

17 Q Were Exhibits One through Four either
18 prepared by you or compiled under your direction and super-
19 vision?

20 A Yes, they were.

21 Q Do you have anything further to present
22 in this case?

23 A No, I don't.

24 MR. CARR: Mr. Stogner, we
25 move the admission of Amoco Exhibits One through Four.

1 MR. STOGNER: Exhibits One
2 through Four will be admitted into evidence at this time.

3 MR. CARR: That concludes my
4 direct examination of Mr. Wood.

5
6 CROSS EXAMINATION

7 BY MR. STOGNER:

8 Q Mr. Wood, do you have the footage loca-
9 tion again for that Salmon Well No. 1?

10 A With regard from the southern line of
11 Unit C, Mr. Stogner, I've calculated that to be 1,185 foot
12 -- feet.

13 Q Do you have that location as respect to
14 the north and east lines of Section would that be 18?

15 A Yes, just a minute. The footage loca-
16 tion for the Salmon Gas Com J No. 1 was 790 feet from the
17 north line of Section 18 and 1,070 feet from the east line
18 of Section 18.

19 Q Mr. Wood, about four of these proration
20 units are split up, I don't know how we can say this, but
21 the -- a half of a half of a section. Now that's somewhat
22 abnormal. Do you know the reasoning back in the fifties
23 why this was done? Was there any lease line boundaries or
24 any such thing as that?

25 A Mr. Stogner, we really don't know.

1 Because of the date of the hearings we could speculate as
2 to why the Division saw fit to grant that request and why
3 the applicant made that. Certainly, in my opinion, when
4 you can get as close to 320 acres as you can, there is a
5 benefit in doing that and it eliminates the drilling of
6 unnecessary wells and it provides for the protection of
7 correlative rights. I would speculate that at the point in
8 time that the original application back in the mid-fifties,
9 early sixties was made, another consideration was the ac-
10 reage component within the proration formula.

11 Q Now all these tracts have been -- have
12 -- have had production since the early sixties and late
13 fifties from other formations, either the Mesaverde or the
14 Blanco.

15 A That's my understanding, yes.

16 Q Or, I'm sorry, Blanco Mesaverde or Basin
17 --

18 A The Dakota.

19 Q -- Dakota. And this would essentially
20 just overlap those existing proration units --

21 A That is correct.

22 Q -- in the Fruitland Coal. Are there im-
23 mediate plans to place wells in the undrilled tracts or the
24 unproducing tracts in the Fruitland Coal at this time,
25 those being A, B, D, E and F?

1 A We've certainly got the one well that is
2 located on Tract C. I believe we'd like to see some ex-
3 tended performance on that before we commit some additional
4 funds for developing acreage, although this area is cur-
5 rently active

6 Q In your Exhibit Number One I see two
7 rivers coming together. What, what are those rivers?
8 I also see a potential of a lot of unorthodox locations, if
9 I can get myself geographically oriented here.

10 A It appears that the river that is run-
11 ning north/south through Tracts E, D, C, B and portions of
12 A would be the San Juan River.

13 The channel indicating an east/west
14 direction -- I'm looking for the Examiner's information at
15 a government land office survey dated 1881 -- appears to be
16 the Canyon Largo Rio?

17 Q Okay.

18 MR. STOGNER: I have no other
19 questions of this witness at this time.

20 Are there any other questions?

21 MR. CARR: Nothing further.

22 MR. STOGNER: He may be ex-
23 cused.

24 Mr. Carr?

25 MR. CARR: Nothing further in

1 this case, Mr. Stogner.

2 MR. STOGNER: Does anybody
3 else have anything further in Case Number 9621?

4 The case will be taken under
5 advisement.

6
7 (Hearing concluded.)

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C E R T I F I C A T E

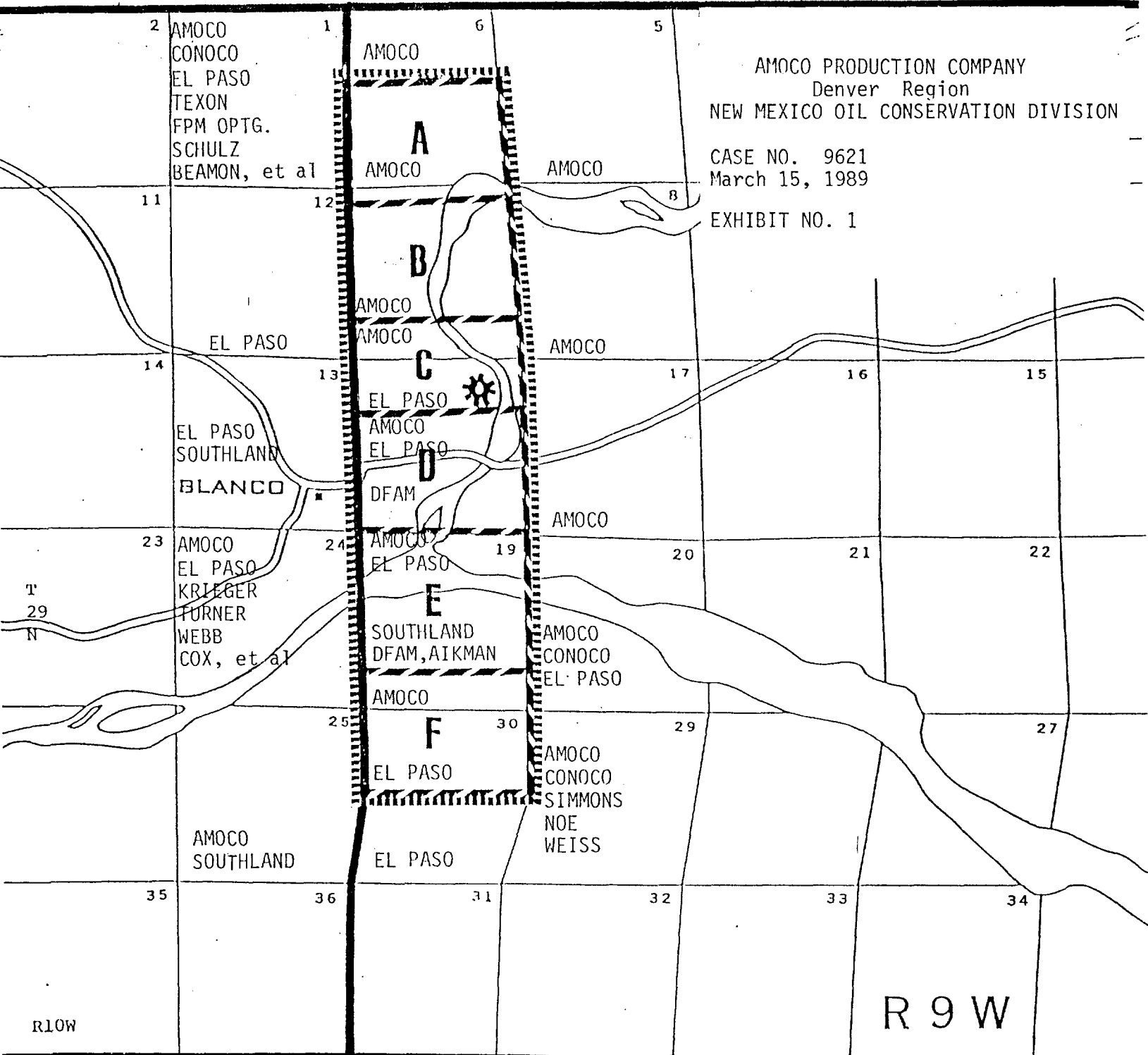
I, SALLY W. BOYD, C. S. R. DO HEREBY
CERTIFY that the foregoing Transcript of Hearing before the
Oil Conservation Division (Commission) was reported by me;
that the said transcript is a full, true and correct record
of the hearing, prepared by me to the best of my ability.

Sally W. Boyd CSR

I do hereby certify that the foregoing is
a complete record of the proceedings in
the Examiner hearing of Case No. 9621,
heard by me on 15 March 1989.

Michael P. Stoyars, Examiner
Oil Conservation Division

EXHIBIT NO. 1



BASIN FRUITLAND COAL GAS POOL
Non-standard Proration Units
T29N, R9W, NMPM
San Juan County, New Mexico

【来源】《中国植物志》第11卷第2册第115页。

Area of Proposed Non-standard Units



Sammons Gas Com J #1 Well
(Existing Fruitland Coal Well)

Incomplete Set

BASIN FRUITLAND COAL GAS POOL
Non-Standard Proration Units
San Juan County, New Mexico

TOWNSHIP 29 NORTH, RANGE 9 WEST

<u>Tract</u>	<u>Acreage</u>	<u>Section</u>	
A	334.14	6	S/2
		7	N/2 N/2 N/2
B	336.66	7	S/2 N/2 N/2, S/2 N/2, N/2 S/2
C	331.68	7	S/2 S/2
		18	N/2 N/2, N/2 S/2 N/2
D	330.98	18	S/2 S/2 N/2, S/2
E	409.24	19	N/2, N/2 S/2
F	407.56	19	S/2 S/2
		30	N/2

AMOCO PRODUCTION COMPANY
Denver Region
NEW MEXICO OIL CONSERVATION DIVISION

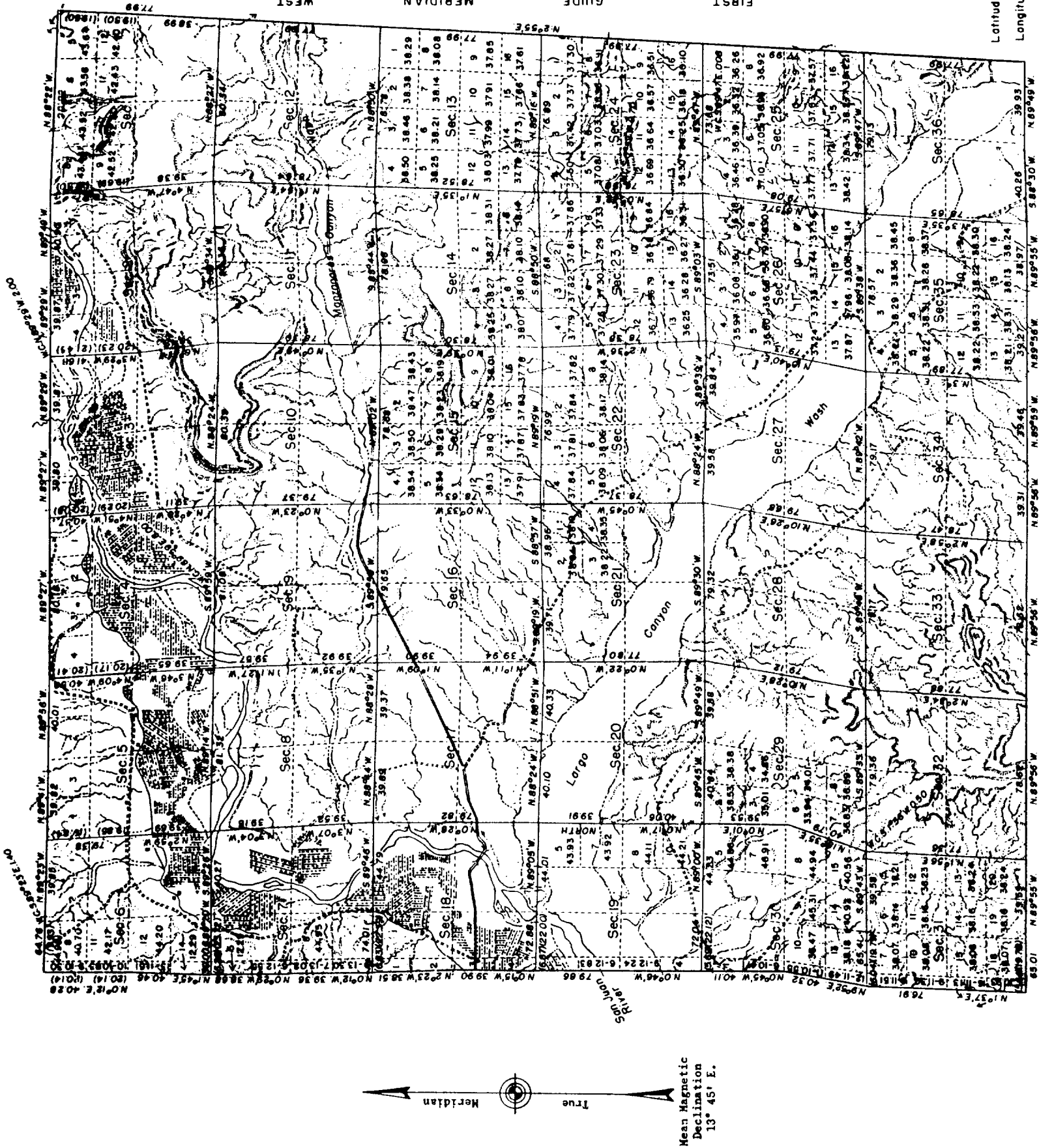
CASE NO. 9621
March 15, 1989

EXHIBIT NO. 2

mec18

TOWNSHIP No.29 NORTH, RANGE No.9 WEST OF THE NEW MEXICO PRINCIPAL MERIDIAN, NEW MEXICO

Dependent Resurvey

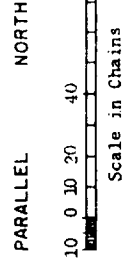


This plat represents the re-tracement and reestablishment of the township boundaries, and sub-divisional lines in their original locations according to the best available evidence. Reference will be made to the original plat approved April 19, 1881 for lottings and areas not shown hereon.

Mean Magnetic Declination 13° 45' E.

BEFORE EXAMINER STOPPED
US. CO. COMMISSIONER GENERAL
Aulco COUNTY NO. 3
CASE NO. 942-1

Latitude: 36°40'32"N.
Longitude: 107°43'28"W.



UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Washington, D. C., July 2, 1952

South boundary resurveyed by Lee S. Miller

This plat is strictly conformable to the approved field notes, and the

● **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. ☒ Registered
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

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

4. Article Number
P-495869714

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature - Address

X

6. Signature - Agent

X *[Signature]*

7. Date of Delivery

2.23.89

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

● **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. ☒ Registered
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Noe Enterprises, Inc.
c/o KNOE TV Station
Monroe, LA 71201

4. Article Number
P-492869718

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature - Address

X

6. Signature - Agent

X *[Signature]*

7. Date of Delivery

FEB 24 1989

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

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1. ☒ Registered
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Lucille O. Quigley Trust
P. O. Box 1107
Salem, OR 97308

4. Article Number
P-492869723

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2/23/89

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

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CERTIFIED MAIL-RETURN RECEIPT

FMP Operating Company ATX Ltd.
P. O. Box 60004
New Orleans, LA 70160

4. Article Number

Type of Service:

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

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

FEB 23 1989

PS Form 3811, Mar. 1988

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DOMESTIC RETURN RECEIPT

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CERTIFIED MAIL-RETURN RECEIPT

Robert E. Beamon, III
Suite 473, Three Riverway
Houston, TX 77056

4. Article Number

Type of Service:

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

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2/23/89

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

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CERTIFIED MAIL-RETURN RECEIPT

Cecil L. Johnson
R.R. 2
Surgionsville, TN 37873

4. Article Number

Type of Service:

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

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2-24-89 - Dill

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

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. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Claud E. Aikman
1190 One First City Center
500 W. Texas Ave.
Midland, TX 79701

b. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2-24

4. Article Number

P-492869716

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
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1. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Candace L. Kelton Cox
324 Sudbury Road
Concord, MA 01742

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2-28-89

4. Article Number

P-492869719

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

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1. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Anthony F. Zarlengo
303 E. 17th Ave, Suite 700
Denver, CO 80203

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2-22-89

4. Article Number

P-492869722

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

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CERTIFIED MAIL-RETURN RECEIPT

John L. Turner
8585 North Stemmons
Suite 925N
Dallas, TX 75247

4. Article Number
P-492869741

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature — Address
X

6. Signature — Agent
X *Sharon Milke*

7. Date of Delivery
2-27-89 *75*

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

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.

CERTIFIED MAIL-RETURN RECEIPT

Conoco Inc.
P. O. Box 460
Hobbs, NM 88240

4. Article Number
P-492869715

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature — Address
X *Julene Ray*

6. Signature — Agent
X

7. Date of Delivery
2-23-89

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

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.

CERTIFIED MAIL-RETURN RECEIPT

Seymour Weiss
c/o KNOE TV Station
Monroe, LA 71201

4. Article Number
P-492869718

Type of Service:
☐ Registered ☐ Insured
☒ Certified ☐ COD
☐ Express Mail ☐ Return Receipt for Merchandise

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature — Address
X

6. Signature — Agent
X *Frank Wade*

7. Date of Delivery
2-24-89

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

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. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Southland Royalty Company
c/o Meridian Oil Prod., Inc.
P. O. Box 4289
Farmington, NM 87499-4289 ✓

5. Signature — Address

X

6. Signature — Agent

X

7. Date of Delivery

2-23-89

4. Article Number

P-492869721

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED**.

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

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. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Texon Energy Corporation
333 North Belt, Suite 390
Houston, TX 77060 ✓

5. Signature — Address

X

6. Signature — Agent

X

7. Date of Delivery

2/24/89

4. Article Number

P-492869724

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED**.

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

1989
FEB
24

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

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. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Pattie Ann Beamon Lundell
1616 South Voss Rd. #870
Houston, TX 77057 ✓

5. Signature — Address

X

6. Signature — Agent

X

7. Date of Delivery

2-24-89

4. Article Number

P-492869726

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED**.

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

● **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.

CERTIFIED MAIL-RETURN RECEIPT

Cecil L. Johnson
P. O. Box 587
Clarksville, AK 72830

5. Signature - Address

X *Cecil L. Johnson*

6. Signature - Agent

X

7. Date of Delivery

2-24-89

4. Article Number

P-492869729

Type of Service:

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

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

● **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. 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to:

*DFAM CORPORATION
C/O BART DARROW
REALTY
P.O. Box 4145
ALBUQUERQUE, N.M. 87186*

4. Article Number

P-492869776

Type of Service:

- ☐ Registered ☐ Insured
☐ Certified ☐ COD
☐ Express Mail

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

5. Signature - Addressee

X *B. Darrow*

6. Signature - Agent

X

7. Date of Delivery

2/7/89

PS Form 3811, Mar. 1987

★ U.S.G.P.O. 1987-178-268

DOMESTIC RETURN RECEIPT

● **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.

CERTIFIED MAIL-RETURN RECEIPT

L.G. Krieger Testamentary Trs
Margery M. Krieger & Peoples
Bank Trust Co., Trustees
9635 Montview Blvd.
Aurora, CO 80010

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

4. Article Number

P-492869734

Type of Service:

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

Always obtain signature of addressee or agent and **DATE DELIVERED**.

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

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. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Georgia Kelton Fergen
R.R. 4, Box 826
Lubbock, TX 79424

4. Article Number

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2-22-89

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

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. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

J. Glenn Turner, Jr.
500 LTV Center
2001 Ross Ave.
Dallas, TX 75201

4. Article Number

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2-24-89

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

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. ☐ Registered Delivery
2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Fred E. Turner
4925 Greenville Ave.
One Energy Square, Suite 852
Dallas, TX 75206

4. Article Number

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2-23-89

PS Form 3811, Mar. 1988

* U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

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. ☐ Registered Delivery
(Extra charge) 2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

H. J. Bleakley
4251 Gulf Shore Blvd. N.
Apt. 4C
Naples, FL 33940

4. Article Number

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature — Address

X

6. Signature — Agent

H. J. Bleakley
7. Date of Delivery
2-24-89

PS Form 3811, Mar. 1988

U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.

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1. ☐ Registered Delivery
(Extra charge) 2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

William G. Webb
2200 Ross Avenue, Suite 2200
Dallas, TX 75201-6776

4. Article Number

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature — Address

X

6. Signature — Agent

X

7. Date of Delivery

FEB 24 1989

PS Form 3811, Mar. 1988

U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

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. ☐ Registered Delivery
(Extra charge) 2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Frank A. Schultz
Lincoln Plaza
Suite 2160 LB-1
500 N. Akard St.
Dallas, TX 75201

4. Article Number

Type of Service:

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

Always obtain signature of addressee
or agent and **DATE DELIVERED.**

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

5. Signature — Address

X

6. Signature — Agent

X

7. Date of Delivery

2-24-89

PS Form 3811, Mar. 1988

U.S.G.P.O. 1988-212-865

DOMESTIC RETURN RECEIPT

● **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.

address. 2. ☐ Restricted Delivery
(Extra charge)

CERTIFIED MAIL-RETURN RECEIPT

Betty Turner Calloway
4801 St. Johns Drive
Dallas, TX 75205

4. Article Number

7-492869740

Type of Service:

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

Always obtain signature of addressee
or agent and DATE DELIVERED.

5. Signature - Address

X

6. Signature - Agent

X

7. Date of Delivery

2-23-89

