STATE OF NEW MEXICO

ENERGY, MINERALS AND NATURAL RESOURCES DEPARTMENT

OIL CONSERVATION DIVISION

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

CASE: 9750

CERTIFICATE OF MAILING

AND

COMPLIANCE WITH ORDER R-8054

In accordance with Division Rule 1207 (Order R-8054), I hereby certify that on September 13, 1989, I caused to be mailed by certified mail, return receipt, a notice of this hearing and a copy of the first ammended application for the above referenced case along with the cover letter, at least twenty days prior to the hearing set for October 4, 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 met This October 2, 1989 by W. Thomas Kellahin, attorney for applicant.

My Commission Expires:

July 25, 1993

BEFORE EXAMINER STOGNER

Oil Conservation Devision

MARILLIA Exhabit No. 9

Case No. 9750 Amradod

Oct 4th

KELLAHIN, KELLAHIN and AUBREY

Attorneys at Law

W. Thomas Kellahin Karen Aubrey

Jason Kellahin Of Counsel El Patio - 117 North Guadalupe Post Office Box 2265

Santa Fé, New Mexico 87504-2265

September 12, 1989

Telephone 982-4285

Area Code 505 Fax: 505/982-2047

RECEIVED

SEP 12 1989

OIL CONSERVATION DIVISION

HAND-DELIVERED

Mr. William LeMay
Oil Conservation Division
Post Office Box 2088
Santa Fe, New Mexico 87504

Re: First Amended Application of Meridian Oil, Inc.

for Compulsory Pooling,

Well Name: Allison Unit Well No. 135

San Juan County, New Mexico

Dear Mr. LeMay:

On behalf of Meridian Oil, Inc. please find enclosed our First Amended Application for Compulsory Pooling which we would request be set for hearing on the next available Examiner's docket now scheduled for October 4, 1989. This amends our application heard at the Examiner's hearing held on September 6, 1989.

By copy of this letter to all parties to be pooled, we are notifying them by certified mail, return-receipt requested, that they have the right to appear at the hearing, to make a statement to the Division, to present evidence and cross-examine witnesses either in support of or in opposition to the application. In addition, they are advised that the entry of a Compulsory Pooling Order will affect their rights to share in the production from the subject well.

Very truly yours,

. Thomas Kellah.

WTK/lw Encl.

cc: Mr. Alan Alexander - Federal Express
Mr. Owen Lopez, Esq. - Federal Express
P.O. Drawer 2068
Santa Fe, New Mexico 87501

Certified Mail Return-Receipt all parties listed on Exhibit "A" of the Application, w/encl.

EXHIBIT "A"

Attached to and made a part of that certain Operating Agreement dated August 11, 1989, between RL PASO NATURAL GAS COMPANY, as Operator, and Non-Operators.

I. LANDS SUBJECT TO OPERATING AGREEMENT:

Township 32 North, Range 6 West

Section 9: 5W/4, S/2 NW/4, Lots 3, 4 Containing 278.20 acres, more or less

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

This Agreement shall cover only the Fruitland Coal formation.

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

B1 Paso Natural Gas Company c/o Land Department Meridian Oil Inc. P.O. Box 4289 Farmington, New Mexico 87499-4289

Operator

Allison Unit Working Interest Owners c/o Land Department Meridian Oil Inc. P.O. Box 4289 Farmington, New Mexico 87499-4289

25.161754%

Southland Royalty Company c/o Land Department Meridian 0:1 Inc. P.O. Box 4289 Farmington, New Mexico 87499-4289

3.594536%

*T. H. McElvain Oil and Gas Properties 220 Shelby Street P.O. Box 2148 Santa Fe, New Mexico 87504-2148

55.934941%

*Richmond-Hogue Oil and Gas Company 2651 North Harwood, Suite 360 Dallas, Texas 75201

Judy G. Zweiback 9008 Pacific Omaha, NE 68114

1.797268%

Myrna G. Raffkind 3800 Danbury Amarillo, TX 79109

1.797268%

Barbara Ann Witten 535 Rast 86th Street New York, NY 10028

3.594536%

Robert C. Witten 535 East 86th Street New York, NY 10028

3.594536x }

Vicki Mizel 101 West Broadway, #1300 San Diago, CA 92101

0.898634%

EXHIBIT "A" (CONTINUED)

III.	ADDRESSES AND PERCENTAGES OR THIS AGREEMENT (CONTINUED):	FRACTIONAL	INTERESTS	OF PARTIES TO
	Gary Dean Mizel c/o Pamela Staeck 3801 East Florida Ave., #605 Denver, CO 80210			0.898634%
	Steven Mayer Mizel c/o Kaufmann Alsberg & Co. 20 Broad Street 27th Floor New York, NY 10005			0.898634%
	Larry Mizel 3600 Yosemite Street Suite 1040 Denver, CO 80281			0.898634%
	Lance Brewster Reemstma 57 Edgecroft Road #A Kensington, California 94707			0.336988%
	Malcolm E. Smith 803 S. Edgefield Ave. Dallas, Texas 75208			0.449317%
	Jessie Mae Wakeland 603 W. Peter Smith Fort Worth, Texas 76104			0.112329%
	Edgar John Layland 102 Hutchunson Drive			0.031991%

Smyrna, Tennessee

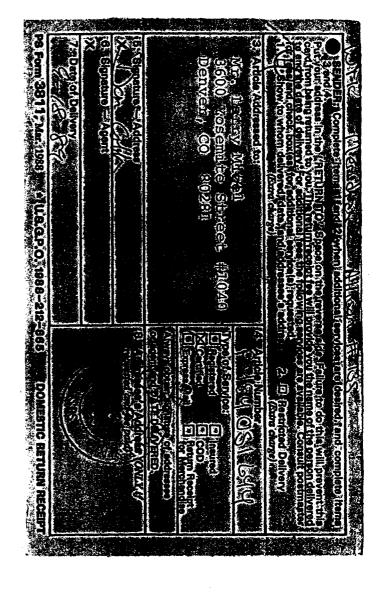
37167

5. Signature Address 8. Addressée's Address (ONLY if X (UNIV) — Agent X Pate of Delivery SEP 18 1989 7. Date of Delivery SEP 18 1989 PS Form 3811, Mar. 1988 * U.S.Q.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 service(a) requested. To keep and check box(es) for additional service(a) requested. The show to whom delivered, date, and addressee's address. Article Addressed to: Mr. Steven Mayer Mizel: C/o Kaufmann Alsberg & Co. 20 Broad Street - 27th Floor New York, NY 10005 Always obtain signature of addressee or agent and DATE DELIVERED.	■ SEIGNEET: 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 few will browlds you the name of the persondelivered to end from being returned to you. The return receipt few will browlds you the name of the persondelivered to end from being returned to you. The return receipt few will browlds you the name of the persondelivered to end from being returned to end from being services are wealable. Consult postmaster for yea, and the person delivery 3. Article Addressed to: Mr. Robert C. Witten 535 Past 86th/Street New York, NY 10028 Fast 86th/Street New York, NY 10028 B. Signature Address F. Signature Addre
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P 155 279 089

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P-484 051 650

RECEIPT FOR CERTIFIED MAIL

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#### P-484 051 649

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### · P-484 051 646

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#### P-484 D51 647

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## P-484 051 644

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## RECEIPT FOR CERTIFIED MAIL

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#### P-484 051 642

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#### P-484 051 643

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### P-484 051 641

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED

NOT FOR INTERNATIONAL MAIL

(See Reverse)

506	Sent lo Yessie Mae Wa	teloid
. 153	Street and No. W. Peter	Smith
U.S.G.P.O. 153-506	P. C. State and ZIP Code The	76104
U.S	Postage	s .25
	Certified Fee	. 8<
٠.	Special Delivery Fee	
!	Restricted Delivery Fee	
10	Return Receipt showing to whom and Date Delivered	· 90
e 1985	Return Receipt showing to whom, Date, and Address of Delivery	
June	TOTAL Postage and Fees	5.200
3800,	Postmark or Date  Will Meridian	
PS Form 3800,	Allison # 185	-

### P-484 051 640

RECEIPT FOR CERTIFIED MAIL
NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL (See Reverse)

carre 1	,
Edger John La	bishing
Street and No. 1 Lachung	,0,
P.O. State and ZIP Code	37167
Postage	s .25
Certified Fee	. 85
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt showing to whom and Date Delivered	. 90
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	\$200
Postmark or Datem Periodica Allison # 135	
	Postage  Certified Fee  Special Delivery Fee  Restricted Delivery Fee  Return Receipt showing to whom and Date Delivery  TOTAL Postage and Fees  Postmark or Date  Cartified Fee  Postmark or Date  Postmark or Date  Postmark or Date

#### 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 NO. 9750** 

#### CERTIFICATE OF MAILING

#### AND

#### COMPLIANCE WITH ORDER R-8054

In accordance with Division Rule 1207 (Order R-8054) I hereby certify that on August 16, 1989, 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 September 6, 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 5th day of September, 1989.

Notary Public

My Commission Expires:

Oct 28, 1989

BEFORE EXAMINER STOGNER
CIL CONSERVATION DIVISION

MORICIANEXHIBIT NO.

CASE NO. 9750

#### SUPPLEMENTAL LIST OF PARTIES TO BE POOLED

The Estate of John A. Pierce, Deceased:

Martin A. Pierce Post Office Box AA Aztec, NM 87410

David A. Pierce Box 2802 Farmington, NM 87401

John B. Pierce Post Office Box AA Aztec, NM 87410

Susan Leigh Pierce Nelson 107 West 30th Farmington, NM 87401

 Lance Brewster Reemstma 937 Bathurst Street Toronto, Ontario, Canada

Dick Vanhorn Reemstma 706 E. 3rd Street, #12 Salt Lake City, UT 84102

Belinda Lopez 97 Beach Drive Pittsburg, CA 94565

Judy C. Zweiback 9008 Pacific Omaha, NE 68114

Myrna G. Raffkind 3800 Danbury Amarillo, TX 79109

Barbara Ann Witten 535 East 86th Street New York, NY 10028 Robert C. Witten 535 East 86th Street New York, NY 10028

Vicky Mizel 101 West Broadway, #1300 San Diego, CA 92101

Gary Dean Mizel c/o Pamela Staeck 3801 East Florida Ave, #605 Denver, CO 80210

Steven Mayer Mizel c/o Kaufmann Alsberg & Co. 20 Broad Street 27th Floor New York, NY 10005

Larry Mizel 3600 Yosemite Street Suite 1040 Denver, CO 80281

#### Exhibit "A"

T.H. McElvain Oil and Gas Properties 220 Shelby Street Post Office Box 2148 Santa Fe, New Mexico 87504-2148 40.943592%

*Richmond-Hogue Oil and Gas Partnership 2651 North Harwood, Suite 360 Dallas, Texas 75201

*Subject to Farmout Agreement with Richmond-Hogue Oil and Gas Company.

#### P 155 278 637

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

Sent to			
Steven Myer Mizel			
Succied Naufman, A	lsberg	&	C
PO State and ZIP Code 27th NY, NY 10005	Floor		
Postage	S		
Certified Fee	.85		
Special Delivery Fee			
Restricted Delivery Fee			
Return Receipt showing to whom and Date Delivered	,70		
Return Receipt showing to whom, Date, and Address of Delivery			
TOTAL Postage and Fees	S		
Postmark or Date			
WTK/Meridian/A	llison		

#### P 155 278 636

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

Sent to Gary Dean Mi	zel
Street 200 10 Pamela St	taeck
P.O., State and ZIP Code Denver, CO	ida #60 30210
Postage	S
Certified Fee	,85
Special Delivery Fee	
Restricted Delivery Fee	90
Return Receipt showing to whom and Date Delivered	
Return Receipt showing to whom, Date, and Address of Delivery	
TOTAL Postage and Fees	S
Postmark or Date	
WTK/Meridian/	Allison
	Gary Dean Mix Street and Mo Pamela St  3801 E Flor  P.O. State and ZIP Code Denver, CO  Postage  Certified Fee  Special Delivery Fee  Restricted Delivery Fee  Return Receipt showing to whom and Date Delivered  Return Receipt showing to whom. Date, and Address of Delivery  TOTAL Postage and Fees

#### P 155 278 635

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

_				
	Sent to Vicky Mizel			
	In the land wo Broadway, #1300			
	San Diego, CA 9 P.O., State and ZIP Code	2101		
	P.O., State and ZIP Code			
	Postage	S		
	Certified Fee	,85		
	Special Delivery Fee			
	Restricted Delivery Fee	.90		
2	Return Receipt showing to whom and Date Delivered			
June 1985	Return Receipt showing to whom, Date, and Address of Delivery			
	TOTAL Postage and Fees	S		
3800,	Postmark or Date	:		
S Form 3800,	WTK/Meridian/All	lison		

#### REGISTERED NO. **POSTMARK OF** Special Reg. Fee \$ / Delivery Office pletion Handling Return Entries MUST be in Ball Point or Typed Charge Receipt Restricted \$ Post Postage "11"\$ Delivery Received by ointle Customer must declare in the ca ☐ With:Postal ☐ Without Post-Full value \$ e appropriate (Insurance of a al Insurance \$25,000 Domestic Ins. Limit Completion se Print) FROM tomer ( te between bei REGIST TERNATIONAL cronto PS Form 3806, RECEIPT FOR REGISTERED MAIL (Customer Copy) June 1986 (See Information on Reverse)

#### P 155 278 638

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

_		
	Sent to Farry Mizel	
	Strengto Vosemite S	Steeet
	P.O. State and ZP Code Denver, CO 8028	31
Ī	Postage	S
	Certified Fee	.85
	Special Delivery Fee	
	Restricted Delivery Fee	.90
	Return Receipt showing to whom and Date Delivered	
June 1985	Return Receipt showing to whom, Date, and Address of Delivery	
-	TOTAL Postage and Fees	S
orm 3800,	Postmark or Date	
eru.	WTK/Meridian/A	llison

S

#### P 155 278 632

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

	Sent to Myrna G. Raffkii	nd
	SALL Danbury Amarillo, TX 79	9109
	P.O., State and ZIP Code	
	Postage	S
	Certified Fee	,85
	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt showing to whom and Date Delivered	.90
June 1985	Return Receipt showing to whom, Date, and Address of Delivery	
3	TOTAL Postage and Fees	S
3800	Postmark or Date	
PS Form 3800	WTK/Meridian/Ali	lison
PS		

#### P 155 278 629

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

_	(++++++++++++++++++++++++++++++++++++++	
	Sent to L Belina Lopez	
	sugarang Weach Dr.	
	Pittsburg, CA P.O., State and ZIP Code	94565
	Postage	S
	Certified Fee	.85
	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt showing to whom and Date Delivered	.90
June 1985	Return Receipt showing to whom, Date, and Address of Delivery	·
	TOTAL Postage and Fees	S
8	Postmark or Date	
PS Form 3800,	WTK/Meridian/Al	lison
٠.		

#### P 155 278 628

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

	Sention R	eemstm	a.
	Street She NE. 3rd St, Salt Lake City	#12 . UT	34₹
	P.O., State and ZIP Code	84	110
	Postage	S	
	Certified Fee	8	
	Special Delivery Fee		
	Restricted Delivery Fee		
	Return Receipt showing to whom and Date Delivered	.90	
198	Return Receipt showing to whom, Date, and Address of Delivery		
June	TOTAL Postage and Fees	S	
S Form 3800, June 1985	Postmark or Date		
WTK/Meridian/Allison			

#### P 155 278 634

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

	Sent to Robert C. Witten	
į	Salen ald No.86th St	
	IY, NY 10028	-
	P.O., State and ZIP Code	
	Postage	S
	Certified Fee	. 85
	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt showing to whom and Date Delivered	,90
	Return Receipt showing to whom, Date, and Address of Delivery	
	TOTAL Postage and Fees	\$
	Postmark or Date	
ł	TK/Meridian/ All	ison

### P 155 278 633

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

	Sent to Barbara Ann Witten		
	Suaged Wast 86th St New York, NY 10028		
,F	P.O., State and ZIP Code		
	Postage	\$ .	
	Certified Fee	.85	
	Special Delivery Fee		
	Restricted Delivery Fee		
2	Return Receipt showing to whom and Date Delivered	.90	
e 198	Return Receipt showing to whom, Date, and Address of Delivery		
Jun,	TOTAL Postage and Fees	S	
3800,	Postmark or Date		
PS Form 3800, June 1985	WTK/Meridian/A	llison	

#### P 155 278 631

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

	Sent to Judy C. Zweiba	ack	
	Stree 940 Pacific Omaha, NE 68114		
-	P.O., State and ZIP Code		
	Postage	S	
	Certified Fee	.85	
	Special Delivery Fee		
	Restricted Delivery Fee	_	
6	Return Receipt showing to whom and Date Delivered	,90	
June 1985	Return Receipt showing to whom, Date, and Address of Delivery		
	TOTAL Postage and Fees	S	
3800,	Postmark or Date		
5 Form 3800,	WTK/Meridian/	Allison	

PS

#### P 155 278 624

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

Sent to Martin A. Pier	ce	
Sure AZtec, NM 874	1.0	
P.O., State and ZIP Code	10	
Postage	s	
Certified Fee	,85	
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt showing to whom and Date Delivered	,90	
Return Receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees S		
Postmark or Date		
WTK/Meridian/Al	lison	

#### P 155 278 623

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

١	Sent to	\ca D+=
	Richmond-Hogue C	Ste 36
	Po Sale and Zip Code 7520	)1
	Postage	S
	Certified Fee	.85
	Special Delivery Fee	
	Restricted Delivery Fee	
	Return Receipt showing to whom and Date Delivered	.90
June 1965	Return Receipt showing to whom, Date, and Address of Delivery	
חחר	TOTAL Postage and Fees	S
Form 3800,	Postmark or Date	
Forn	WTK/Meridian/Al	lison

#### P 155 278 622

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

Sent to				
	T.H. McElvain O	&G_	Pro	)
- {	Speel Ond NBOx 2148		- 1	
	Santa Fe NM 8 P.O., State and ZIP Code	750	4-2	
	Postage	5 4	5	
	Certified Fee	,	Ś	
	Special Delivery Fee			l
	Restricted Delivery Fee			
<u>ر</u>	Return Receipt showing to whom and Date Delivered	. 6	0	
3 198	Return Receipt showing to whom, Date, and Address of Delivery			
Jun	TOTAL Postage and Fees	え	8	
Form 3800, June 1985	Postmark or Date			
E  WTK/Meridian/CP-All			lisc	1

#### P 155 278 627

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

·	Sent to Susan Leigh Pierce N Strenged W. 30th Farmington NM 8740			
	Postage	S		
	Certified Fee	,85	:	
	Special Delivery Fee			
	Restricted Delivery Fee			
	Return Receipt showing to whom and Date Delivered	.90	į	
198	Return Receipt showing to whom, Date, and Address of Delivery			
June	TOTAL Postage and Fees	S		
3800,	Postmark or Date			
Return Receipt showing to whom. Date, and Address of Delivery  TOTAL Postage and Fees  Postmark or Date  WTK/Meridian/Alliso.			,	

#### P 155 278 626

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#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

	John B. Pierce		
	Rive and ROX AA		
	Aztec, NM 87410		
	P.O., State and ZIP Code		
	Postage	S	
	Certified Fee	185	
Special Delivery Fee  Restricted Delivery Fee			
	Return Receipt showing to whom, Date, and Address of Delivery	1.1 1.1 2.1	
	TOTAL Postage and Fees	S	
3	Postmark or Date		
5	WTK/Maridian/All	ison	

#### P 155 278 625

#### RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED NOT FOR INTERNATIONAL MAIL (See Reverse)

Sent to David A. Pierce		
Bokand 28.02 Farmington, NM 87401		
P.O., State and ZIP Code		
Postage	S	
Certified Fee	.85	
Special Delivery Fee		
Restricted Delivery Fee		
Return Receipt showing to whom and Date Delivered	,90	
Return Receipt showing to whom, Date, and Address of Delivery		
TOTAL Postage and Fees	5	
Postmark or Date		
Maridian / Al	ligon	

orm 3800, June

S

PS

e Addressed to:  ry Mizel  Nosemite St, Ste 1040  Wer; CO 80181  Meridian/Allison  Meridian/Allison  Meridian/Allison  Anny objected  For Merchands  or ageny and DATY ONLY or  ture - Agent  The Delivery  10 5 Nosemite  10 5 Nosemite  11 10 10 10 10 10 10 10 10 10 10 10 10 1	DER: Complete Items 1 and 2 when additional services are desired, and complete Items 4.  4. address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent this being returned to you. The return receipt fee will provide you the name of the person delivered and check box(es) for additional services is provided and check box(es) for additional services are available. Consult postmaster and check box(es) for additional service(s) requested. The serviced Delivery and charge) when to whom delivered, date, and addressee's address. 2. [Restricted Delivery for the service (s) requested. The service of the service o	DER: Complete "items 1 and 2 when additional services are desired, and complete items 1 and 2 when additional services are desired, and complete items address in the "RETURN ITO" Space on the reverse side. Falluration of the person delivered address of the feet the following services are available. Consult postmaster and check box(es) for additional feet the following services are available. Consult postmaster and check box(es) for additional service(s) requested. *** 2. The feeting darge) ***  • Addressed to:  irra Lopez  • Addressed to:  irra Lopez  • Addressed to:    Pal55 278 629
3. Article Addressed to: Barbara AnnWitten  Barbara AnnWitten  Barbara AnnWitten  Dais 5278 8638  Light Street  New York, NY 10028  NTR/Meridian/Allison  Anny Soun Soun Soun of address  Copyright Sound of Address (ONLY for Manual and for gath)  B. Signature - Agent  Copyright Sound of Delivery  Copyright Sound of Soun	URN TO'. Space on the reverse of the return receipt fee will prove additional across the following a radditional service (a) request radditional service (a) request red, date, and addresses add care, and addresses add care, and addresses add care charge)	SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. S.

= m 3811, Mar. 1988 → U.S.Q.P.O. 1988 – 212 – 865 → DOMESTIC RETURN RECEIPT orm 3811, Mar. 1988 Signature - Address Date of Delivery Signature our address in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this from being returned to you. The return receipt fee will provide you the name of the person delivered to date of delivery. For additional fees the following services are available. Consult postmaster of the date of delivery. For additional service(s) bequested. The service of the date of delivery. The service of the date of the d Signature - Address Article Addressed to: SENDER: Complete items 1 and 2 when additional services are destred; and complete items 3 and 4.

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6 how to whom delivered date; and addresses a address.

7 Carra charge) SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4. Signature Article Addressed to: W. Broadway, #1300 9008 Pacific Judy C. Zweiback WTK/Meridian/Allison Omaha, ME 68114 /Meridian/Allison RECEIVED iego, CA RECEIVED AUG 25 belivery V Agent AUG 25 11989 + U.S.G.P.O. 1988-212-865 DOMESTIC RETURN RECEIPT 92101 Mon-Fri 8:30-5:00, Sat 8:30-No 1232-5096 8. Addressee's Address (ONLY II Always obtain signature of addressee in the same of addressee in the sa Type of Service: Insured Insur or agent and DATE DELIVERED. Always obtain signature of addressee P 155 278 631 4. Article Number requested and fee paid) 8. Addressee's Address (ONLY i) 815 "E" St. 92101

PS Form 3811, Mar. 1988 18.4, U.S.G.P.O. 1988-212-865 6. Signature — Agent c/orPamela Staeck 7 LP40 PECEIVED AUG 25 1989 WTK/Merid,an/All Gary, Dean Mize Signature -The date of delivery. For additional fees the following services and check box(es) for additional service(s) requested. Show to whom delivered, date, and addresses's address Show to whom delivered, date, and addressed a address. 122 III Restricted Delivery (Extra charge) (Extra charge) (Extra charge) in the "RETURN TO" Space on the reverse side. Failure to do this will prevented to you. The return receipt fee will provide you the name of the person d items 1 and 2 when additional services are desired, and complete son 💮 Type of Service: Insured Insur Always obtain signature of addressee or agent and DATE DELIVERED TIC RETURN RECEIPT

6. Sign 5. Signature — Address SENDER: Complete Items 1 and 2 when additional services are desired, and complete 3 and 4.

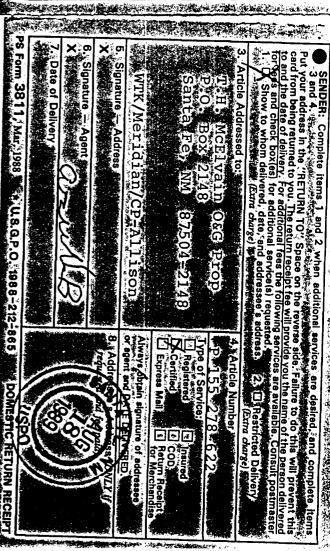
Put your address in the "RETURN TO" Space on the reverse side. Failure to do this will prevent from being returned to you. The return receipt fee will provide you the name of the person do to end-the date of delivery. For additional fees the following services are evallable. Consult post for your face, box (es) for additional service(s) requested.

The sind check box (es) for additional service(s) requested.

The sind check box (es) for additional service(s) requested. 報告を強 /. Date of /U WTK/Meridian/Allison Uyery AUG 21 1989 Agent MAN AND THE PARTY OF THE RECEIVED AT IX S Commed Well 1459 18140 1511 et 2) @ Hostricted Delivory

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

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Aways Abrain signature of addresses or agent and DATE DELIVERED.  B. Addressee a Address (ONLY & requested and fee paid)  T. JOO D. H. N. L. A. J.	services are desired, and complete items as side. Failure to do this will prevent this roylde you the hame of the person delivered services are evallable. Consult postmaster ted.  The stricted Delivery (Extra charge)  4. Ardicle Number (Extra charge)  4. Ardicle Number (Extra charge)  A Ardicle Number (Extra charge)  1. Particle (Extra charge)  1. Particle (Extra charge)  1. Particle (Extra charge)  1. Resturn	or agent and DATE DELIVERED.  B. Addressee's Address (ONLY if Asserted and fee paid)  FOR MOT PAIC  B. Addressee's Address (ONLY if Asserted and fee paid)  FOR MOT PAIC  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Address (ONLY if Asserted and fee paid)  B. Addressee's Asserted and fee paid)  B	ditional services are desired, and complete items the reverse side. Failure to do this will prevent this fee will provide you the name of the person delivered following services are available. Consult postmaster is requested. 2. Restricted Delivery 1. See a address. 2. Restricted Delivery 1. See a diress. 2. Restricted Delivery 1. See a diress. 2. Restricted Delivery 1. Restricted 1. Rest
5. Signatu X Signatu X 7. Date of	SENDE 3 and A Put your ad card from b to end then 1.1 Show 3. Article / 3. Article / 3. Da	5. Signatur X Signatur 6. Signatur 7. Date of I 98 Form 381	SENDE 3 and 4 Put your ac card from be to and the c to Yes and 1. Asho 3. Article D.O San San San



Complete items 1 and 2 when additional services are desired, and complete items in the "RETURN TO". Space on the reverse side. Failure to do this will prevent this ing returned to you. The return receipt fee will provide you the name of the person delivered ite of delivery. For additional fees the following services are available. Consult postmaster check box(es) for additional service(s) requested. The stricted Delivery to whom delivered date, and addressed address. 2.1 Restricted Delivery to whom delivered date, and addressed address. 1, Mar. 1988 🔆 🛊 U.S.G.P.O. 1988-212-865 🍰 DOMESTIC RETURN RECEIPT / elivery AUG 2 1 1989 ressed to: Mejerdken/feib-Arts 130n Department of the second of th 4.3 Article Number