

requested, postage prepaid envelopes, addressed to the following named parties:

Amoco Production Company
P. O. Box 3092
Houston, Texas 77253

Texaco Producing, Inc.
P. O. Box 3109
Midland, Texas 79702

Marathon Oil Company
P. O. Box 3128
Houston, Texas 77253

Bureau of Land Management
P. O. Box 1449
Santa Fe, New Mexico 87504-1449

Bureau of Land Management
P. O. Box 1397
Roswell, New Mexico 88202

on the 18th day of February, 1988, as reflected by the copies of the letters transmitting such copies of the application and the return receipts executed on behalf of the addressees, attached hereto.



Patti Wier

SUBSCRIBED AND SWORN TO before me this 18th day of February, 1988.

My commission expires:
1-2-90



Notary Public

DICKERSON, FISK & VANDIVER
ATTORNEYS AT LAW
SEVENTH & MAHONE / SUITE E
ARTESIA, NEW MEXICO 88210
(505) 746-9841

CHAD DICKERSON
JOHN FISK
DAVID R. VANDIVER
REBECCA REESE DICKERSON

February 18, 1988

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Amoco Production Company
P. O. Box 3092
Houston, Texas 77253

Re: Eland "AFC" Federal Com. No. 1 Well
Township 20 South, Range 29 East, NMPM
Section 13: W/2
Eddy County, New Mexico

Gentlemen:

Enclosed, please find a copy of the Application of Yates Petroleum Corporation for an Unorthodox Well Location, Eddy County, New Mexico.

Hearing is scheduled before the New Mexico Oil Conservation Division, in Santa Fe, New Mexico, on March 16, 1988.

Please contact the undersigned if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER



Chad Dickerson

CD:pvw
Enclosure

cc: Mr. Ray Beck
Ms. Janet Richardson

DICKERSON, FISK & VANDIVER

ATTORNEYS AT LAW

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Texaco Producing, Inc.
P. O. Box 3109
Midland, Texas 79702

Re: Eland "AFC" Federal Com. No. 1 Well
Township 20 South, Range 29 East, NMPM
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cc: Mr. Ray Beck
Ms. Janet Richardson

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February 18, 1988

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Marathon Oil Company
P. O. Box 3128
Houston, Texas 77253

Re: Eland "AFC" Federal Com. No. 1 Well
Township 20 South, Range 29 East, NMPM
Section 13: W/2
Eddy County, New Mexico

Gentlemen:

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cc: Mr. Ray Beck
Ms. Janet Richardson

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February 18, 1988

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Bureau of Land Management
P. O. Box 1449
Santa Fe, New Mexico 87504-1449

Re: Eland "AFC" Federal Com. No. 1 Well
Township 20 South, Range 29 East, NMPM
Section 13: W/2
Eddy County, New Mexico

Gentlemen:

Enclosed, please find a copy of the Application of Yates Petroleum Corporation for an Unorthodox Well Location, Eddy County, New Mexico.

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Please contact the undersigned if you have any questions regarding this application.

Sincerely yours,

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Chad Dickerson

CD:pw
Enclosure

cc: Mr. Ray Beck
Ms. Janet Richardson

DICKERSON, FISK & VANDIVER

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February 18, 1988

CERTIFIED MAIL
RETURN RECEIPT REQUESTED

Bureau of Land Management
P. O. Box 1397
Roswell, New Mexico 88202

Re: Eland "AFC" Federal Com. No. 1 Well
Township 20 South, Range 29 East, NMPM
Section 13: W/2
Eddy County, New Mexico

Gentlemen:

Enclosed, please find a copy of the Application of Yates Petroleum Corporation for an Unorthodox Well Location, Eddy County, New Mexico.

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Please contact the undersigned if you have any questions regarding this application.

Sincerely yours,

DICKERSON, FISK & VANDIVER


Chad Dickerson

CD:pvw
Enclosure

cc: Mr. Ray Beck
Ms. Janet Richardson

P 728 600 515

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Atfco Production Co.	
Street and No. P. O. Box 3092	
P.O. State and ZIP Code Houston, TX 77253	
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	\$
Postmark or Date	

PS Form 3800, June 1985

P 728 600 516

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Texaco Producing, Inc.	
Street and No. P. O. Box 3109	
P.O. State and ZIP Code Midland, TX 79702	
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	\$
Postmark or Date	

PS Form 3800, June 1985

P 728 600 517

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Marathon Oil Co.	
Street and No. P. O. Box 3128	
P.O. State and ZIP Code Houston, TX 77253	
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	\$
Postmark or Date	

PS Form 3800, June 1985

P 728 600 518

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

(See Reverse)

Sent to Bureau of Land Management	
Street and No. P. O. Box 1449	
P.O. State and ZIP Code Santa Fe, NM 87504-1449	
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	\$
Postmark or Date	

PS Form 3800, June 1985

P 728 600 519

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED
NOT FOR INTERNATIONAL MAIL

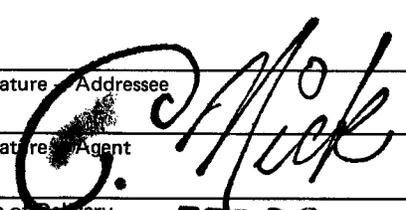
(See Reverse)

Sent to Bureau of Land Management	
Street and No. P. O. Box 1397	
P.O. State and ZIP Code Roswell, NM 88202	
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	\$
Postmark or Date	

PS Form 3800, June 1985

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.

3. Article Addressed to: Amoco Production Company P. O. Box 3092 Houston, Texas 77253	4. Article Number P 728 600 515
	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
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee X 	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X	
7. Date of Delivery FEB 22 1988	

PS Form 3811, Feb. 1986

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.

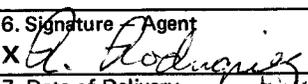
3. Article Addressed to: Texaco Producing, Inc. P. O. Box 3109 Midland, Texas 79702	4. Article Number P 728 600 516
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid) 2-19-88
6. Signature - Agent X 	
7. Date of Delivery	

PS Form 3811, Feb. 1986

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.

3. Article Addressed to: Marathon Oil Company P. O. Box 3128 Houston, Texas 77253	4. Article Number P 728 600 517
	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
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature - Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature - Agent X 	
7. Date of Delivery FEB 22 1988	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery.

3. Article Addressed to: Bureau of Land Management P. O. Box 1449 Santa Fe, NM 87504-1449	4. Article Number P 728 600 518
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> COD <input type="checkbox"/> Express Mail
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature — Addressee X	8. Addressee's Address (<i>ONLY if requested and fee paid</i>)
6. Signature — Agent X	
7. Date of Delivery	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT

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1. Show to whom delivered, date, and addressee's address. 2. Restricted Delivery.

3. Article Addressed to: Bureau of Land Management P. O. Box 1397 Roswell, New Mexico 88202	4. Article Number P 728 600 519
	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
Always obtain signature of addressee or agent and DATE DELIVERED.	
5. Signature — Addressee X	8. Addressee's Address (<i>ONLY if requested and fee paid</i>)
6. Signature — Agent X <i>Cathy Annwoody</i>	
7. Date of Delivery <i>12-19-88</i>	

PS Form 3811, Feb. 1986

DOMESTIC RETURN RECEIPT