

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

IN THE MATTER OF THE APPLICATION  
OF BIRD CREEK RESOURCES, INC.  
FOR COMPULSORY POOLING,  
EDDY COUNTY, NEW MEXICO

CASE NO. ~~9959~~

CERTIFICATE OF MAILING  
AND  
COMPLIANCE WITH ORDER R-8054

In Accordance with Division Rule 1207 (Order R-8054) I hereby certify that on May 23, 1990, notice of the hearing and a copy of the Application for the above referenced case was mailed by certified mail return-receipt, at least twenty days prior to the hearing set for June 13, 1990, to the parties shown in the Application as evidenced by the attached copies of return-receipt cards.

  
W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me this 12 day  
of June, 1990.

  
Notary Public

My Commission Expires:

7-6-91

BEFORE EXAMINER STOGNER


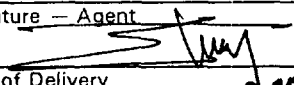
Oil Conservation Division

Bird Creek Exhibit No. 1

Case No. ~~9959~~ 9960

**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: Amoco Production Co P.O. Box 3092 Houston, TX 77253  Re: Bird Creek FP NW/4NE/4, Sec 15, T23S, R28E Eddy Co (KA))	4. Article Number P 572 125 173  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  Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)  
6. Signature — Agent X 	
7. Date of Delivery <b>MAY 29 1990</b>	

PS Form 3811, Apr. 1989 \*U.S.G.P.O. 1989-238-815 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.

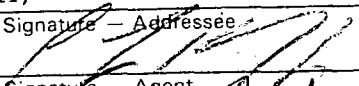
1. ☐ Show to whom delivered, date, and addressee's address. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: Santa Fe Energy Operating Partners, L.P. 500 W. Illinois, 5th Floor Midland, TX 79702 (KA)  Re: Bird Creek FPNW/4NE/4 Sec 15, T23S, R28E, Eddy Co	4. Article Number P 572 125 179  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  Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X <i>Wanda Wade</i>	
7. Date of Delivery <i>5-25-90</i>	<b>RECEIVED MAY 29 1990</b>

PS Form 3811, Apr. 1989 \*U.S.G.P.O. 1989-238-815 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. (Extra charge) 2. ☐ Restricted Delivery (Extra charge)

3. Article Addressed to: James E. Kiehne 210 W. Wall Avenue Midland, TX 79701  Re: Bird Creek FP NW/4NE/4 Sec 15, T23S, R28E Eddy Co (KA)	4. Article Number P 572 125 177  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  Always obtain signature of addressee or agent and <u>DATE DELIVERED</u> .
5. Signature — Addressee X 	8. Addressee's Address (ONLY if requested and fee paid)  <b>RECEIVED MAY 29 1990</b>
6. Signature — Agent X <i>Donna Fortson</i>	
7. Date of Delivery <i>5-25-90</i>	

PS Form 3811, Apr. 1989 \*U.S.G.P.O. 1989-238-815 DOMESTIC RETURN RECEIPT

P 572 125 174

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED

NOT FOR INTERNATIONAL MAIL

(See Reverse)

U.S.G.P.O. 1989-234-555

P.S. Form 3800, June 1985

Sent to AW Dugan	
Street and No 1415 Louisiana, Ste 3100	
P.O., State and ZIP Code Houston, TX 77002	
Postage	\$ .45
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	\$ 2.20
Postmark or Date (KA) Bird Creek FP NW/4NE/4 Sec 15, T23S, R28E Eddy Co 5-23-90	