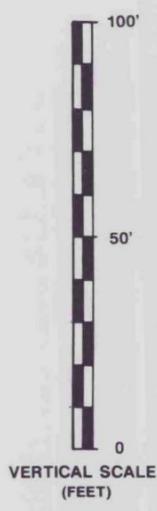
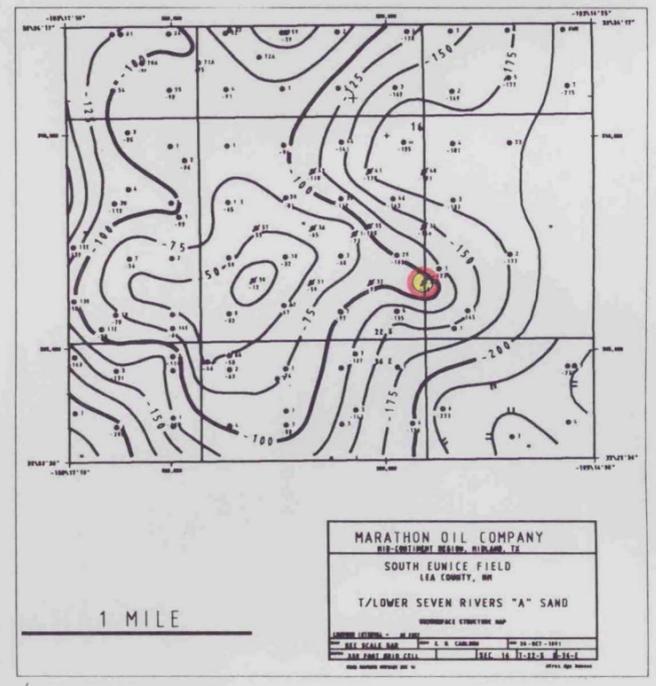


1240 Ft	GR (API units)	KINT	DCAL	
1240 Ft	0.0 150.0 (GAPI)	1000.0 0.0100 (MD)	20.000 (IN) 20.000	
			effective porosity	
		KOIL	50.0000 (PU)	0.0000
		1000.0 0.0100 (MD)	SW	100.0 0.0 (PU)
		KGAS	1000.0 0.0100 (MD)	SXO 100.0 0.0 (PU)
		KWTR	1000.0 0.0100 (MD)	
			water	



Before The
 OIL CONSERVATION COMMISSION
 Santa Fe, New Mexico
 Case No. 10443 Exhibit No. 9
 Submitted by: Marathon Oil Company
 Hearing Date: 3/05/92

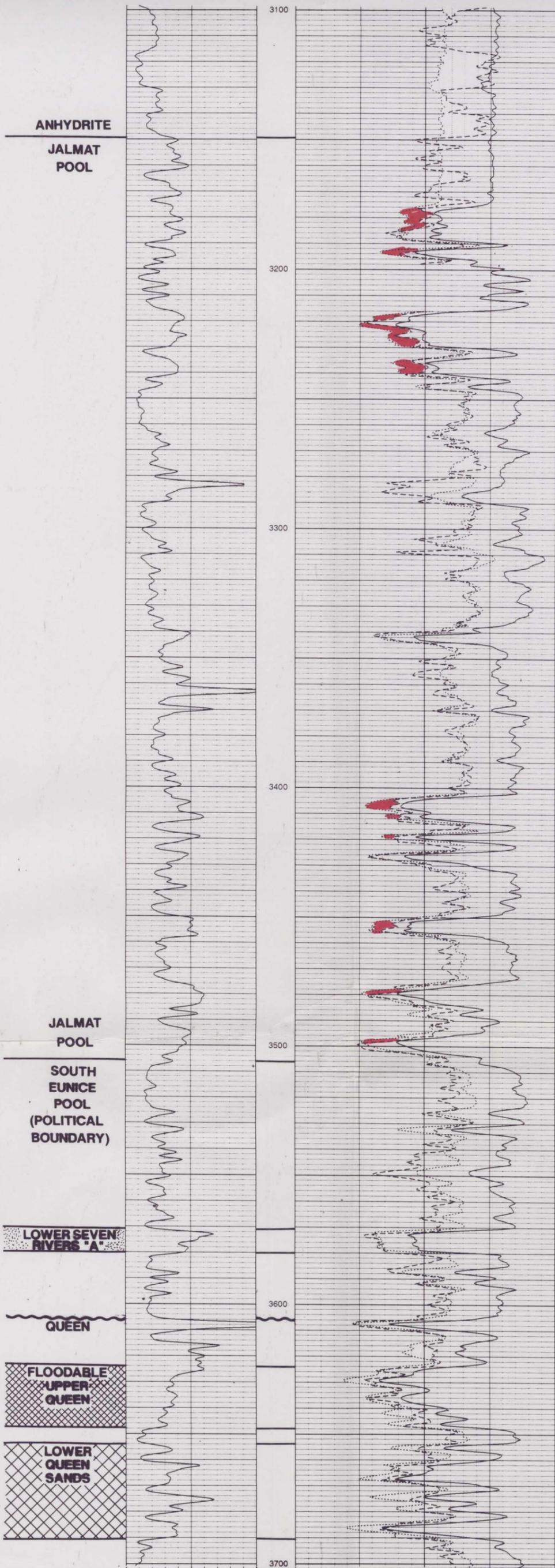
M
 MARATHON OIL COMPANY
 MID-CONTINENT REGION

SOUTH EUNICE POOL
 LEA COUNTY, NEW MEXICO

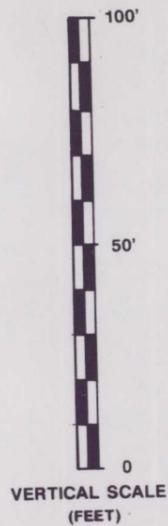
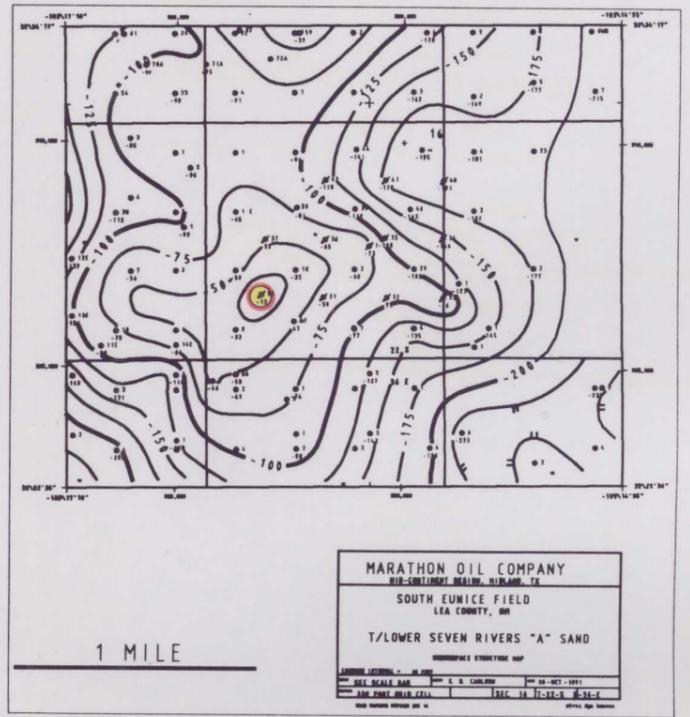
MCDONALD STATE ACCT 1 LEASE, SECTION 16, T-22-S, R-36-E

WELL 33
ELAN (COMPUTED) LOG
 (SCHLUMBERGER)

USED: LDT, CNL, DLL, MSFL GR LOGS



Gamma Ray (API units)	1:240 Ft	DT
0.00 (GAPI) 150.000		100.00 (US/F) 40.000
		matrix corrected pbhc
		30.00 (PU) -10.000
		matrix corrected npht
		30.00 (PU) -10.000



Before The
OIL CONSERVATION COMMISSION
Santa Fe, New Mexico
Case No. 10443 Exhibit No. 10
Submitted by: Marathon Oil Company
Hearing Date: 3/05/92

MARATHON OIL COMPANY
MID-CONTINENT REGION

SOUTH EUNICE POOL
LEA COUNTY, NEW MEXICO

MCDONALD STATE ACCT 1 LEASE; SECTION 16, T-22S, R-36-E

WELL 30
MATRIX-CORRECTED POROSITY LOG
(SCHLUMBERGER)

CASED - HOLE SONIC / CASED - HOLE NEUTRON

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

IN THE MATTER OF THE HEARING CALLED
BY THE OIL CONSERVATION DIVISION
FOR THE PURPOSE OF CONSIDERING:

CASE No. 10443

APPLICATION OF MARATHON OIL COMPANY
FOR AN AMENDMENT TO DIVISION ORDER
R-9503, MCDONALD STATE A/C-1 LEASE
WATERFLOOD PROJECT, LEA COUNTY,
NEW MEXICO

CERTIFICATE OF MAILING

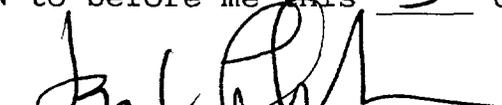
AND

COMPLIANCE WITH ORDER R-8054

W. THOMAS KELLAHIN, attorney in fact and authorized representative of MARATHON OIL COMPANY, states that the notice provisions of Division Rule 1207 (Order R-8054) have been complied with, that Applicant has caused to be conducted a good faith diligent effort to find the correct addresses of all interested parties entitled to receive notice, that on January 24, 1992, 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 March 5, 1992, to the parties shown in the application as evidenced by the attached copies of return receipt cards, and that pursuant to Division Rule 1207, notice has been given at the correct addresses provided by such rule.


W. Thomas Kellahin

SUBSCRIBED AND SWORN to before me this 3RD day of
March, 1992


Notary Public

My Commission Expires:

10/7/95

cert302.092

BEFORE EXAMINER CAYANACH OIL CONSERVATION DIVISION <u>MARATHON</u> EXHIBIT NO. <u>11</u> CASE NO. <u>10443</u>

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: ARCO Oil and Gas Co. P.O. Box 1610 Midland, TX 79702	4. Article Number P 355 567 733
	Type of Service: <input type="checkbox"/> Registered <input type="checkbox"/> Insured <input 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 <i>[Signature]</i>	8. Addressee's Address (ONLY if requested and fee paid)
6. Signature — Agent X	
7. Date of Delivery JAN 28 1989	

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

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: Conoco, Inc. P.O. Box 1959 Midland, TX 79702	4. Article Number P 355 567 734
	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>[Signature]</i>	
7. Date of Delivery JAN 28 1989	

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

SENDER: Complete items 1 and 2 when additional services are desired, and complete items 3 and 4.
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1. Show to whom delivered, date, and addressee's address. (Extra charge) 2. Restricted Delivery (Extra charge)

3. Article Addressed to: Meridian Oil Inc. 21 Desta Drive Midland, TX 79701	4. Article Number P 355 567 735
	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>[Signature]</i>	
7. Date of Delivery 1-29-89	

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

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: Doyle Hartman P.O. Box 10426 Midland, TX 79701	4. Article Number P355 567 73C
	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>[Signature]</i>	
7. Date of Delivery 1-30-92	

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

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: Headington Oil Inc. 7557 Rambler Rd, Ste 1150 Dallas, TX 75231	4. Article Number P355 567 737
	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>[Signature]</i>	
7. Date of Delivery 1-28-92	

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

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: Dallas McCasland P.O. Box 206 Eunice, NM 88231	4. Article Number P355 567 738
	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>[Signature]</i>	
7. Date of Delivery 1-28-92	

HAND DELIVERED TO:

Commissioner of Public Lands
State of New Mexico
State Land Office
310 Old Santa Fe Trail
Santa Fe, New Mexico 87501

<p>● 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.</p> <p>1. <input type="checkbox"/> Show to whom delivered, date, and addressee's address. 2. <input type="checkbox"/> Restricted Delivery (Extra charge)</p>	
3. Article Addressed to: Dasco Land Corp. P.O. Box 2454 Hobbs, NM 88240	4. Article Number 9355 567 740 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
5. Signature - Addressee X <i>John Wallace</i>	Always obtain signature of addressee or agent and DATE DELIVERED.
6. Signature - Agent X	8. Addressee's Address (ONLY if requested and fee paid)
7. Date of Delivery 1-27-92	