POGO PRODUCING COMPANY Case # 9054 December 17, 1986 Exhibit G

Form 3811, July 1983 447-845	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 service(s) requested. 1. Show to whom, date and address of delivery. 2. Restricted Delivery. 3. Article Addressed to: Amoco Production Company Attn: Ms. Julie Talbot P. O. Box 3092 Houston, Texas 77253 4. Type of Service: Article Number	Form 3811, July 1983 447-845	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 service(s) requested. 1. Show to whom, date and address of delivery. 2. Restricted Delivery. 3. Article Addressed to: HNG 0il Company and BelNorth Petroleum Corporation P. 0. Box 2267 Midland, Texas 79702 4. Type of Service: Article Number
يو ر	Registered Insured Cortified COD P 167 342 008 Express Mail	·	Registered Insured P 167 342 007 Express Mail
	Always obtain signature of addressee or agent and DATE DELIVERED.		Always obtain signature of addressee or agent and DATE DELIVERED.
	5. Signature - Addressee	8	5. Signature Addressee
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DOMESTIC	6. Signature – Agent	ESTIC	6. Signeture – Agent (*)
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2	DEC 0 1 1986	RETURN	7. Diggs of Delivery
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8	1. Show to whom, date at	nd address of delivery.	1983	1. Show to whom, date a	nd address of delivery.
4	2. Restricted Delivery.			2. Asstricted Delivery.	
447-846	3. Article Addressed to:		447-846	3. Article Addressed to:	
1	Dinero Operating Attn: Mr. Jim De P.O. Drawer 10505 Midland, Texas 7	wey	,	Sun Exploration a Attn: Mr. Rick E #24 Smith Rd., Su Midland, Texas	in Twr., Ste. 600
	4. Type of Service:	Article Number	1	4. Type of Service:	Article Number
جدر	Registered Insured Cortified COD	P 167 342 012		☐ Registered ☐ Insured ☐ Certified ☐ COD ☐ Express Mail	P 167 342 011
	Always obtain signature of ac DATE DELIVERED.	idressee <u>or</u> agent and		Always obtain signature of ac DATE DELIVERED.	Idressee <u>or</u> agent and (
. B	5. Signature – Addressee X		8	5. Signature – Addressee	
MESTIC	6. Signature - Agent	27		6/Signature - Agent	
	7. Date of Delivery	NEC	- E	7. Date of Delivery	
RETURN		1 1986	=		
IE	8. Addresses's Address (ONL	Y if requested and fee paid)	ž	8. Addresses's Address (ONL	Y (f requested and fee paid)
HCENT			DOMESTIC RETURN RECEIPT	Pm 12.1.86	
7					
70		, v	- XI	SENDER: Complete item	1 2 3 and 4
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S ELLO	reverse side. Fallure to do this being returned to you. The re-	will prevent this card from	38	reverse side. Failure to do this being returned to you. The re you the name of the person d	turn receipt tee will provide
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Ville	available. Consult postmaster for service(s) requested.	for fees and check box(es)	L Apr	for service(s) requested.	
58	1. Show to whom, dete as	nd address of delivery.		1. Show to whom, date a	nd address of delivery.
	2. Restricted Delivery.		447-846	2. Restricted Delivery.	
447-846	3. Article Addressed to:		- 5	3. Article Addressed to:	
1	R. C. Roberts			J. R. Rowan P.O. Box 7907	
	P.O. Box 640 Gilmer, Texas 75	644			79708
j	arimer, rendo re	S6 73 F			
	4. Type of Service:	Article Number	1	4. Type of Service:	Article Number
,	Registered Insured Cop Cop Express Mail	P 167 342 016		Registered Insured COD Express Mail	P 167 342 015
1	Always obtain signature of ad	dressee or agent and	1	Always obtain signature of a DATE DELIVERED.	ddressee <u>or</u> agent and
	DATE DELIVERED. 5. Signature - Andresses		1 .	E Cionetura Adelana)
	X Molect	<u>*</u>] 🖁	8. Signatury Agent	outer_
DOMESTIC	6. Signature Agent X	•	DOMESTIC	X	
CRE	7. Date of Delivery	<u> </u>	-i	7. Date of Delivery 400C	
7	8. Addresses's Address (ONL	V (frequented and factorial)	ETORN	8. Addresses's Address (ON	LY if requested and fee paid)
2	o. Addition & Address (UNL	1 of teduceness man lee hear)			
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reverse side. Failubeing returned to you the name of delivery. For add available. Consult for service(s) required. Show to w. 2. Restricted.	hom, date and address of delivery. Delivery. ssed to:	3 Form 3811, July 1983 447-845	Put your address in the "RE reverse side. Failure to do this being returned to you. The reyou the name of the person delivery. For additional fees available. Consult postmester for service(s) requested. 1. Show to whom, date at 2. Restricted Delivery. 3. Article Addressed to:	TURN TO" space on the is will prevent this card from eturn receipt fee will provide delivered to and the date of the following services are for fees and check box(es)
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ω	mam, date and address of delivery.	1983 44	 Show to whom, date a Restricted Delivery. 	and address of delivery.
3. Article Addre Mr. Rober P. O. Box	t B. Coleman	447-846	3. Article Addressed to: John M. Westbroo P. O. Box 2264 Hobbs, New Mexic	
4. Type of Servi	Article Number Insured P 167 342 020		4. Type of Service: Registered Insured Contified CoD Express Mail	P 167 342 019
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5. Signature – /	Addresses	9	5. Signature - Addressee	Carle.
6. Signature	Agent So		Signature Agent	
7. Date of Delik	12-1-do		Search Delivery	Λ
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Form 3811, July 1983 447-845	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 service(s) requested. 1. Show to whom, date and address of delivery. 2. Restricted Delivery. 3. Article Addressed to: Vera Kochengen Box 11006 Fresno, California 93771	Form 3811, July 1983 447-845	Put your address in the "RET reverse side. Failure to do this being returned to you. The reyou the name of the person of delivery. For additional fees available. Consult postmaster for service(s) requested. 1. Show to whom, date at 2. Restricted Delivery. 3. Article Addressed to: Bush Exploration P. O. Drawer 106 Midland, Texas	s will prevent this card from nourn receipt fee will provide lelivered to and the date of the following services are for fees and check box(es) and address of delivery. Company
-	4. Type of Service: Article Number Registered Insured Certified COD P 167 342 086	,	4. Type of Service: Registered Insured Contified CoD Express Mail	P 167 342 021
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TIC RE	7. Date of Delivery	TIC RE	7. Date of Delay	Took
RETURN RECEIPT	8. Ad No. 4 Address (ONLY if requested and fee paid)	DOMESTIC RETURN RECEIPT	8. Addressee's Address (ONL	Y if requested and fee paid)
PS Form 3811, July 1983	Put your address in the "RETURN TO" space on the reverse side. Failure to do this will prevent this card from	PS Form 3811, July 1983	Put your address in the "RET reverse side. Failure to do this being returned to you. The revou the name of the person of delivery. For additional fees the available. Consult postmaster for service(s) requested. 1. Show to whom, date on	URN TO" space on the will prevent this card from turn receipt fee will provide alivered to and the date of the following services are for fees and check box(es)
3 447-846		3 447-846	2. Restricted Delivery.	
85	Laura Jean Hofer 337 Monarch Bay South Laguna CA 92667	845	3. Article Addressed to: Bureau of Land Ma Attn: Armando Lo P. O. Box 1397 Roswell, New Mexi	pez
	4. Type of Service: Article Number Registered Insured Cortified COD P 167 342 088		4. Type of Service: Registered Insured Certified COD Express Mail	P 167 342 087
	Always obtain signature of addressee or agent and DATE DELIVERED.	,	Always obtain signature of ac DATE DELIVERED.	Idressee <u>or</u> agent and
	5 Signature - Addresses	0	5. Signature – Addressee X	
ESTIC		LESTIC	6. Signature - Agent	Many
RETURN	7. Date of Delivery 3 19/54	20	7. Dette of Delivery	138
IRN RECEIPT	8. Addresses's Address (ONLY if requested and fee paid)	TURN RECEIPT	8. Addresses's Address (ONL	Y if requested and fee paid)

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447-845	2. Restricted Delivery.	447-846	
1	3. Article Addressed to: Jack G. Woods	65	3. Article Addressed to: Ruth Guitar Murchison P. O. Box 712
4	5205 18th Place Lubbock, TX 79416		Red Bluff CA 96080
	4. Type of Service: Article Number		4. Type of Service: Article Number
4	Registered Insured P 167 342 091 Express Mail	•	Registered COD P 167 342 089
	Always obtain signature of addressee or agent and DATE DELIVERED.	•	Always obtain signature of addressee or agent and DATE DELIVERED.
8	5. Signature - Addresses	8	5. Signature - Addressee X
	6. Signature – Agent	DOMEST	6. Signature //Agent
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