



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

GARREY CARRUTHERS  
GOVERNOR

June 26, 1987

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88241-1980  
(505) 393-6161

MEMO TO: Jeff Taylor  
OCD Counsel

FROM: Jerry Sexton *J.S.*  
District I Supervisor

RE: REQUEST FOR SHOW-CAUSE PLUGGING HEARING

I request that you set a show-cause hearing for July 29, 1987, to have the wells listed at the bottom of this memo plugged.

There has been no production from the properties since February 1986.

The wells are covered by four one-well bonds. (see attached bond numbers)

To the best of our knowledge, the firm Turman and Hayes is in bankruptcy. B&J Associates filed C-104's for a change of operator on these wells in July 1986, but have not as yet ever obtained a bond.

Attached you will find copies of correspondence we have had with B&J Associates.

Turman & Hayes	B. Lee State #1-F (1650/N & 2236/W)	Sec. 7, T18S, R35E
"	B. Lee State #3-E (2319/N & 918/W)	Sec. 7, T18S, R35E
"	B. Lee State #4-L (2055/S & 660/W)	Sec. 7, T18S, R35E
"	B. Lee State #5-M (994/S & 330/W)	Sec. 7, T18S, R35E

ED

cc: Mr. William J. LeMay

Turman & Hayes ✓	\$7500 One Well Bond #50488009
\$7500 One Well Bond #50488008	660/W & 2055/S 7-18-35 9001'
2319/N & 918/W 8739'	Western Surety Co.
Western Surety Co.	Filed 7/16/84
Filed 7/16/84	Location corrected 8/21/84
	\$7500 One Well Bond #50509340
\$7500 One Well Bond #50488007 ✓	994/S & 330/W- 7-18-35 9217'
1650/N & 2236/W 7-18-35 8862'	Western Surety Co.
Western Surety Co.	Filed 7/16/84
Filed 7/16/84	



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

GARREY CARRUTHERS  
GOVERNOR

June 18, 1987

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88241-1980  
(505) 393-6161

B&J Associates, Inc.  
P.O. Box 3364  
Longview, TX 75606

Attn: S. Randy Rose

Re: Change of Operator

Gentlemen:

On July 9, August 6, 1986, and February 19, 1987, we wrote you advising that we would be unable to process your change of operator request on the Turman & Hayes B. Lee State #1, #3, #4, and #5, located in Section 7, T18S, R35E, Lea County, New Mexico, until you had an approved plugging bond on file for these wells.

As of this date you still have no approved plugging bond on file with the Oil Conservation Division. Also, the wells have no allowable since there has been no monthly operator reports filed since February 1986.

Please advise this office as soon as possible the status of your bond and what plans you have for these wells.

Until such time as your bond is approved and Form C-104 to change the operator is approved, Turman & Hayes will be the operator of record and will be responsible for these wells. They are being advised of their responsibility by copy of this letter.

Very truly yours,

OIL CONSERVATION DIVISION

Jerry Sexton  
Supervisor, District I

ed

cc: Turman & Hayes  
c/o Baldwin Engineering, Inc.  
13612 Midway Road, Suite #490  
Dallas, TX 75244



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

February 19, 1987

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88241-1980  
(505) 393-6161

GARREY CARRUTHERS  
GOVERNOR

B&J Associates, Inc.  
P.O. Box 3364  
Longview, TX 75606

Attn: S.R. Rose

Re: Change of Operator

Gentlemen:

Please refer to my letters dated July 9, and August 6, 1986, concerning the change of operator for four wells you have acquired from Turman & Hayes (B. Lee State #1, #3, #4, and #5).

This is just a reminder that we still are unable to process the C-104 forms for a change of operator for these wells because your plugging bond has not been approved by our Santa Fe office.

Please advise us as soon as possible the status of your application for a plugging bond.

Very truly yours,

OIL CONSERVATION DIVISION

Jerry Sexton  
Supervisor, District I

ed

cc: Diane Richardson  
OCD- Santa Fe



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

TONY ANAYA  
GOVERNOR

August 6, 1986

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88240  
(505) 393-6161

B&J Associates, Inc.  
P.O. Box 3364  
Longview, Texas 75606

Attn: S. Randy Rose

Dear Mr. Rose:

In reply to your letter concerning the filing of operator's monthly report (Form C-115 for May, 1986), for the B Lee State Wells #1, #3, #4, and #5, taken over from Turman & Hayes, I must advise you that in order to get your allowable reinstated, the C-115 must be filed under the operator of record.

If you have the production records for the month in question, you might file these reports under the operator of record, otherwise the wells will remain shut in without an allowable until these reports are current.

I regret this problem has arisen, but this is our policy. As soon as your plugging bond is approved, your change of operator will be processed.

Very truly yours,

OIL CONSERVATION DIVISION

A handwritten signature in cursive script that reads "Jerry Sexton".

Jerry Sexton  
Supervisor, District I

ed



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
OIL CONSERVATION DIVISION  
HOBBS DISTRICT OFFICE

TONEY ANAYA  
GOVERNOR

July 9, 1986

POST OFFICE BOX 1980  
HOBBS, NEW MEXICO 88240  
(505) 393-6161

B & J Associates, Inc.  
P.O. Box 3364  
Longview, TX 75606

Re: Change of Operator

Gentlemen:

We have received Forms C-104 to change the ownership and oil transporter on the B Lee State Lease Wells #1, #3, #4, and #5, in Sec 7, T18S, R35E, Lea County, New Mexico, from Turman & Hayes to B & J Associates, Inc.

These forms seem to be in order, and as soon as you have a plugging bond under B&J Associates, Inc. the change will be processed.

If we may be of further assistance, please let us know.

Very truly yours,

OIL CONSERVATION DIVISION

  
Jerry Sexton  
Supervisor, District I

ed

**JUL 15 1986**



STATE OF NEW MEXICO  
**ENERGY AND MINERALS DEPARTMENT**  
 OIL CONSERVATION DIVISION  
 HOBBS DISTRICT OFFICE

*Copy to ERT*

TONY ANAYA  
 GOVERNOR

Date: July 17, 1986

POST OFFICE BOX 1980  
 HOBBS, NEW MEXICO 88240  
 (505) 393-6161

Re: Operator's Monthly Report  
 (Form C-115)  
 (May, 1986)

Turman & Hayes  
C/O Baldwin Engineering, Inc.  
13612 Midway Rd., Suite 490  
Dallas, TX 75234

JUL 18 1986

Gentlemen:

Effective July 1, 1986 the allowable of the below-listed leases are hereby cancelled for failure to file subject forms.

Rule 1115 required subject reports to be "Postmarked not later than the 24th day of the next succeeding month". The distribution is identified on the form.

Allowables will be revised by supplement to the Oil & Gas Proration Schedules when subject reports are recieved.

THE BELOW LISTED WELLS SHALL BE SHUT-IN UNTIL FURTHER ORDER OF THE DIVISION:

B. Lee State	1-F	7-18-35	Vacuum Abo Reef
"	3-E	"	"
"	4-L	"	"
"	5-M	"	Vacuum (G-SA)

*For your information  
 E E Cox*

Very truly yours,

OIL CONSERVATION DIVISION

*Jerry Sexton*  
 Jerry Sexton  
 Supervisor, District I

JUL 25 1986

JS:ds

CC: Transporter-NRC  
 OCD, Santa Fe, N.M.

PLEASE NOTE: Please mail to the attention of Danny Shastid.

217-2

B & J ASSOCIATES, INC.

P. O. BOX 3364

LONGVIEW, TEXAS 75606

July 28, 1986

ENERGY AND MINERALS DEPARTMENT  
New Mexico Oil Conservation Division  
P. O. Box 1980  
Hobbs, New Mexico 88240  
Attn: Mr. Jerry Sexton

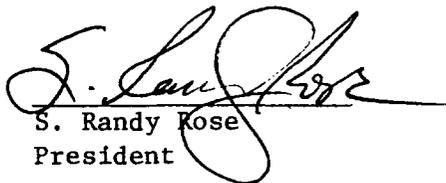
Dear Mr. Sexton:

We have recently filed with your office New Mexico Oil Conservation forms C-104 for wells producing from our B. Lee State Lease, located in Section 7, T185, R35E, Lea County, New Mexico. Copies of these forms are enclosed for your information; approval for foreign corporation operations in New Mexico and plugging bonds are needed for approval of the forms C-104. Application for these needs are in process and we hope to have them in your office within the week.

We are advised that the previous operator (Turman & Hayes, c/o Baldwin Engineering Inc., 13612 Midway Rd., Suite 490, Dallas, Texas 75234) was notified by your letter dated July 17, 1986 that allowables for these wells were cancelled effective July 1, 1986 because forms C-115 for the wells were delinquent. This letter is in response to your directions to Mr. Morrison, consulting engineer, who called you last Friday concerning this problem.

We have been unable to get information from the previous operator and wish to do whatever may be required to get allowables established for these wells so that production may be resumed as soon as our forms C-104 are approved. It is our intention to keep your office fully informed concerning the status of these wells, and we request your advise of the actions necessary for new allowable assignments.

Thank you,

  
S. Randy Rose  
President

SRR/jmp  
Enclosure

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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OPERATOR	
PRORATION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator  
B & J ASSOCIATES, INC.

Address  
P. O. BOX 3364, LONGVIEW, TEXAS 75606

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas	

Other (Please explain)

If change of ownership give name and address of previous owner  
TURMAN & HAYES (c/o BALDWIN ENGINEERING, INC.)  
13612 MIDWAY ROAD, SUITE #490, Dallas, Texas 75244

II. DESCRIPTION OF WELL AND LEASE

Lease Name "B" LEE STATE	Well No. 1	Pool Name, including Formation VACUM, ABO REEF	Kind of Lease State, Federal or Fee STATE	Lease No. E-6002
Location Unit Letter <u>F</u> ; <u>1650</u> Feet From The <u>NORTH</u> Line and <u>2236</u> Feet From The <u>WEST</u> Line of Section <u>7</u> Township <u>18S</u> Range <u>35E</u> , NMPM, LEA County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> TEXAS NEW MEXICO PIPELINE CO.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 2528, HOBBS, N.M. 88241-2528
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS 66 NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) 4001 PENBROOK, ODESSA, TEXAS 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	F 7 18S 35E YES

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

J. Ross Rose  
(Signature)  
PRESIDENT  
(Title)  
JUNE 30, 1986  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

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TRANSPORTER	OIL		
	GAS		
OPERATOR			
PRORATION OFFICE			

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator	B & J ASSOCIATES, INC.		
Address	P. O. Box 3364, Longview, Texas 75606		
Reason(s) for filing (Check proper box)	Change in Transporter of:		Other (Please explain)
<input type="checkbox"/> New Well	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Dry Gas	
<input type="checkbox"/> Recompletion	<input type="checkbox"/> Casinghead Gas	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership			

If change of ownership give name and address of previous owner: Tarman & Hayes (c/o Baldwin Engineering, Inc.)  
13612 Midway Road, Suite #490, Dallas, Texas 75244

II. DESCRIPTION OF WELL AND LEASE

Lease Name	Well No.	Pool Name, including Formation	Kind of Lease	Lease No.
"B" Lee State	3	Vacuum, Abo Reef	State, Federal or Fee State	E-6002
Location				
Unit Letter		Feet From The	Line and	Feet From The
E	2319	North	918	West
Line of Section	Township	Range	County	
7	18S	35E	NMPM, LEA	

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
TEXAS NEW MEXICO PIPELINE CO.	P. O. Box 2528, Hobbs, N. M. 88241-2528
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/>	Address (Give address to which approved copy of this form is to be sent)
PHILLIPS 66 NATURAL GAS CO.	4001 Penbrook, Odessa, Texas 79762
If well produces oil or liquids, give location of tanks.	Unit Sec. Twp. Rge. Is gas actually connected? When
	F 7 18S 35E Yes

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

S. Randy Roe  
(Signature)  
President

June 30, 1986  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19 \_\_\_\_\_  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

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	GAS
OPERATOR	
PRODUCTION OFFICE	

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator: B & J ASSOCIATES, INC.

Address: P. O. BOX 3364, LONGVIEW, TEXAS 75606

Reason(s) for filing (Check proper box):

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas	Other (Please explain)
<input type="checkbox"/> Recompletion	<input checked="" type="checkbox"/> Oil	<input type="checkbox"/> Condensate	
<input checked="" type="checkbox"/> Change in Ownership	<input type="checkbox"/> Casinghead Gas		

If change of ownership give name and address of previous owner: TURMAN & HAYES (c/o BALDWIN ENGINEERING, INC.)  
13612 MIDWAY ROAD, SUITE #490, DALLAS, TEXAS 75244

II. DESCRIPTION OF WELL AND LEASE

Lease Name <u>"B" LEE STATE</u>	Well No. <u>4</u>	Pool Name, including Formation <u>VACUUM, ABO REEF</u>	Kind of Lease <u>State, Federal or Fee STATE</u>	Lease No. <u>E-6002</u>
Location Unit Letter <u>L</u> ; <u>660</u> Feet From The <u>WEST</u> Line and <u>2055</u> Feet From The <u>SOUTH</u> Line of Section <u>7</u> Township <u>18S</u> Range <u>35E</u> , NMPM, <u>LEA</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> <u>TEXAS NEW MEXICO PIPELINE CO.</u>	Address (Give address to which approved copy of this form is to be sent) <u>P.O. BOX 2528, HOBBS, N.M. 88241-2528</u>					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> <u>PHILLIPS 66 NATURAL GAS CO.</u>	Address (Give address to which approved copy of this form is to be sent) <u>4001 PENBROOK, ODESSA, TEXAS 79762</u>					
If well produces oil or liquids, give location of tanks.	Unit <u>F</u>	Sec. <u>7</u>	Twp. <u>18S</u>	Range <u>35E</u>	Is gas actually connected? <u>YES</u>	When

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

S. Ruffolo  
(Signature)  
PRESIDENT  
(Title)  
JUNE 30, 1986  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1106.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

STATE OF NEW MEXICO  
ENERGY AND MINERALS DEPARTMENT

Form C-104  
Revised 10-01-78  
Format 06-01-83  
Page 1

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OIL CONSERVATION DIVISION  
P. O. BOX 2088  
SANTA FE, NEW MEXICO 87501

REQUEST FOR ALLOWABLE  
AND  
AUTHORIZATION TO TRANSPORT OIL AND NATURAL GAS

I.

Operator  
B & J ASSOCIATES, INC.

Address  
P. O. BOX 3364, LONGVIEW, TEXAS 75606

Reason(s) for filing (Check proper box)

<input type="checkbox"/> New Well	Change in Transporter of:	<input type="checkbox"/> Dry Gas	Other (Please explain)	
<input type="checkbox"/> Recompletion		<input checked="" type="checkbox"/> Oil		<input type="checkbox"/> Condensate
<input checked="" type="checkbox"/> Change in Ownership		<input type="checkbox"/> Casinghead Gas		

If change of ownership give name and address of previous owner  
TURMAN & HAYES (c/o BALDWIN ENGINEERING, INC.)  
13612 MIDWAY ROAD, SUITE #490, DALLAS, TEXAS 75244

II. DESCRIPTION OF WELL AND LEASE

Lease Name "B" LEE STATE	Well No. 5	Pool Name, including Formation VACUUM, GRABURG - SAN ANDRES	Kind of Lease State, Federal or Fee STATE	Lease No. E-6002
Location Unit Letter <u>M</u> ; <u>330</u> Feet From The <u>WEST</u> Line and <u>994</u> Feet From The <u>SOUTH</u> Line of Section <u>7</u> Township <u>18S</u> Range <u>35E</u> , NMPM, <u>LEA</u> County				

III. DESIGNATION OF TRANSPORTER OF OIL AND NATURAL GAS

Name of Authorized Transporter of Oil <input checked="" type="checkbox"/> or Condensate <input type="checkbox"/> TEXAS NEW MEXICO PIPELINE CO.	Address (Give address to which approved copy of this form is to be sent) P.O. BOX 2528, HOBBS, N.M. 88241-2528					
Name of Authorized Transporter of Casinghead Gas <input checked="" type="checkbox"/> or Dry Gas <input type="checkbox"/> PHILLIPS 66 NATURAL GAS CO.	Address (Give address to which approved copy of this form is to be sent) 4001 PENBROOK, ODESSA, TEXAS 79762					
If well produces oil or liquids, give location of tanks.	Unit F	Sec. 7	Twp. 18S	Rge. 35E	Is gas actually connected? YES	When

If this production is commingled with that from any other lease or pool, give commingling order number: \_\_\_\_\_

NOTE: Complete Parts IV and V on reverse side if necessary.

VI. CERTIFICATE OF COMPLIANCE

I hereby certify that the rules and regulations of the Oil Conservation Division have been complied with and that the information given is true and complete to the best of my knowledge and belief.

J. Rungberg  
(Signature)  
PRESIDENT  
(Title)  
JUNE 30, 1986  
(Date)

OIL CONSERVATION DIVISION

APPROVED \_\_\_\_\_, 19\_\_\_\_  
BY \_\_\_\_\_  
TITLE \_\_\_\_\_

This form is to be filed in compliance with RULE 1104.  
If this is a request for allowable for a newly drilled or deepened well, this form must be accompanied by a tabulation of the deviation tests taken on the well in accordance with RULE 111.  
All sections of this form must be filled out completely for allowable on new and recompleted wells.  
Fill out only Sections I, II, III, and VI for changes of owner, well name or number, or transporter, or other such change of condition.  
Separate Forms C-104 must be filed for each pool in multiply completed wells.

STATE OF NEW MEXICO

ENERGY AND MINERALS DEPARTMENT

OIL CONSERVATION DIVISION



GARREY CARRUTHERS  
GOVERNOR

July 9, 1987

POST OFFICE BOX 2088  
STATE LAND OFFICE BUILDING  
SANTA FE, NEW MEXICO 87501  
(505) 827-5800

CERTIFIED - RETURN  
RECEIPT REQUESTED

Turman & Hayes  
13612 Midway Road, Suite 490  
Dallas, Texas 75234

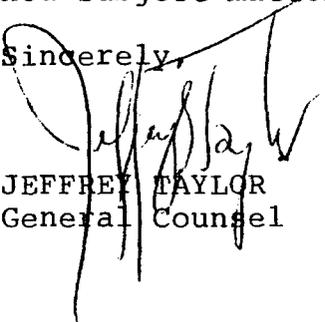
Western Surety Company  
Daniels Insurance  
P. O. Box 1258  
Hobbs, New Mexico 88241-1258

Re: "B" Lee State Wells - No. 1,  
located in Unit F; No. 3, located  
in Unit E; No. 4, located in Unit  
L; and No. 5, located in Unit M,  
all in Section 7, Township 18 South,  
Range 35 East, Lea County  
Plugging Bond

Gentlemen:

Enclosed is a copy of the notice of publication for the  
Examiner Hearing to be held on Wednesday, July 29, 1987, at  
8:15 a.m. in the Oil Conservation Division Conference Room,  
State Land Office Building, Santa Fe, New Mexico. Case 9179  
concerns the above-captioned subject matter.

Sincerely,

  
JEFFREY TAYLOR  
General Counsel

JT/fd  
enc.

PS Form 3811, July 1983 447-845

**SENDER: Complete items 1, 2, 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 service(s) requested.

1.  Show to whom, date and address of delivery.  
 2.  Restricted Delivery.

3. Article Addressed to:  
 Daniels Insurance  
 P. O. Box 1258  
 Hobbs, New Mexico 88241-1258

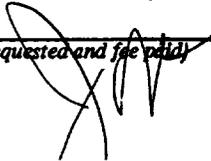
4. Type of Service:	Article Number
<input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail	P 612 458 732

Always obtain signature of addressee or agent and DATE DELIVERED.

5. Signature - Addressee  
 X

6. Signature - Agent  
 X *Michelle Roberge*

7. Date of Delivery  
 JUL 13 1987

8. Addressee's Address (*ONLY if requested and fee paid*)  


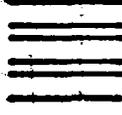
DOMESTIC RETURN RECEIPT

**UNITED STATES POSTAL SERVICE**

**OFFICIAL BUSINESS**

**SENDER INSTRUCTIONS**

- Print your name, address, and ZIP Code in the space below.
- Complete items 1, 2, 3, and 4 on the reverse.
  - Attach to front of article if space permits, otherwise affix to back of article.
  - Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE USE: \$300**

**RETURN TO** 

OIL CONSERVATION DIVISION

(Name of Sender)

POST OFFICE BOX 2088

(No. and Street, Apt., Suite, P.O. Box or R.D. No.)

SANTA FE, NEW MEXICO 87504-2088

(City, State, and ZIP Code)

P 612 458 732

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

PS Form 3800, Feb. 1982  
★ U.S.G.P.O. 1983-403-517

Sent to Daniels Insurance	
Street and No. P. O. Box 1258	
P.O., State and ZIP Code Hobbs, New Mexico 88241-	
Postage	\$ 1258
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 3811, July 1983 447-845

**SENDER: Complete items 1, 2, 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 service(s) requested.

1.  Show to whom, date and address of delivery.

2.  Restricted Delivery. 48

3. Article Addressed to:  
 Turman & Hayes  
 13612 Midway Road, Suite 490  
 Dallas, Texas 75234

4. Type of Service:	Article Number
<input type="checkbox"/> Registered <input type="checkbox"/> Insured <input checked="" type="checkbox"/> Certified <input type="checkbox"/> COD <input type="checkbox"/> Express Mail	P 612 458 733

Always obtain signature of addressee or agent and **DATE DELIVERED.**

5. Signature - Addressee 13  
 X

6. Signature - Agent  
 (X) *C. Y. Baldwin*

7. Date of Delivery  
 7-13-87

8. Addressee's Address (ONLY if requested and fee paid)

DOMESTIC RETURN RECEIPT

**UNITED STATES POSTAL SERVICE**

**OFFICIAL BUSINESS**

**SENDER INSTRUCTIONS**

- Print your name, address, and ZIP Code in the space below.
- Complete Items 1, 2, 3, and 4 on the reverse.
  - Attach to front of article if space permits, otherwise affix to back of article.
  - Endorse article "Return Receipt Requested" adjacent to number.



**PENALTY FOR PRIVATE USE, \$300**

**RETURN TO** 

**OIL CONSERVATION DIVISION**

*(Name of Sender)*

**POST OFFICE BOX 2088**

*(No. and Street, Apt., Suite, P.O. Box or R.D. No.)*

**SANTA FE, NEW MEXICO 87504-2088**

*(City, State, and ZIP Code)*

P 612 458 733

RECEIPT FOR CERTIFIED MAIL

NO INSURANCE COVERAGE PROVIDED  
NOT FOR INTERNATIONAL MAIL

(See Reverse)

U.S.G.P.O. 1983-403-517  
U.S. Form 3800, Feb. 1982

Sent to <b>Turman &amp; Hayes</b>	
Street and No. <b>13612 Midway Road, Ste. 49</b>	
P.O., State and ZIP Code <b>Dallas, Texas 75234</b>	
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	